Including (all) Women

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January 2021



Pre- Covid: Women's health & work

- Women need to be empowered to get support for their health through greater recognition of conditions and ensuring parity alongside other workplace health issues. 1.
- Gender inequality both inside and outside the workplace can affect women's occupational safety and health with important links between wider discrimination issues and health. 2.
- There are substantial differences in the working lives and employment situation of women and men and therefore occupational safety and health, so we need to take account of gender issues in work-related risks and their prevention. 2.
- 1. Report calls for action on women's health issues at work (personneltoday.com)
- 2. <u>2003-1161_Reportwomen1_EN (europa.eu)</u>



Biological

- Reproductive Health
- Endometriosis
- PCOS

Ethnicity & Culture

- Attitudes & beliefs
- Disproportionat

Psychological Attitudes &

- Beliefs
- Mental Health
- Stress

Social (inc work)

• Attitudes & beliefs

Why talk about the menopause at work?



The effects of menopause transition on women's economic participation in the UK

Research report

July 2017

Joanna Brewis, Vanessa Beck, Andrea Davies and Jesse Matheson – University of Leicester



Results

- Every woman will go through the menopause transition and 25% will have symptoms that will significantly affect their health and wellbeing.
- 3 out 4 women experience hot flushes
- 50% of women said work was more challenging
- 47% of women did not tell their manager why they needed a day off
- 25% have considered quitting their job
- The workplace can support or make things worse



Results

- Less than 20% of respondents said their workplace provided information about the menopause
- 10.2% said their workplace had a menopause policy or guidance
- 77% wanted information about menopause at work.
- Top 6 symptoms:

Fatigue, hot flushes, difficulty concentrating, anxiety/worry, insomnia, problems with recall

• Top 7 workplace factors influencing severity of symptoms:

High temperature, poor ventilation, humidity, no access to quiet area/space, dryness, lack of light & noise issues

Focus Group

- The menopause was viewed as a physical and psychological process
- The menopause transition was related to midlife age, perceived as a negative experience words used to describe largely governed by own mother's and friends moderate to severe symptoms.
- Peri-menopausal was not mentioned and participants did not know the average age of the menopause transition or how women are diagnosed under and over 40 years of age.
- 'The psychological symptoms of the menopause can be less credible than psychological symptoms of a bereavement.'
- · Self-help strategies and lifestyle choices that can influence severity of symptoms were not identified or discussed.
- Informal support was witnessed at work via discussion between colleagues but no formal support structure/toolkit identified for employees or managers to refer to.
- The broad spectrum of physical and psychological symptoms can lead to confusion as some may not necessarily attribute them to the menopause process or conversely a medical condition may be dismissed as menopause symptoms.
- Occupational Health or HR intervention is rarely sought to gain more evidenced based information or guidance. There was no awareness of where to access information from external agencies.



Workplace sessions on the Menopause Transition – 112 employee feedback forms

Questions	Pre-Session	Post-Session
	Above average (those who scored 4/5 or more)	Above average (those who scored 4/5 or more)
How would you rate your knowledge of the Menopause?	22%	78%
Would you know where to go for information on the Menopause?	29%	89%
How comfortable are you discussing the menopause with colleagues?	46%	73%
How comfortable are you discussing the menopause with your manager?	33%	64%

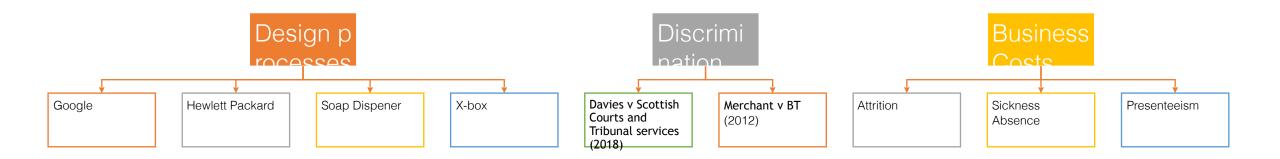


Representation & role models

- How is inclusion and diversity represented in your workplace
- How many women, ethnically diverse, neurodiverse, LGBTQI and disabled employees are senior leaders, on the board, heads of charities and public bodies?
- Given that all women menstruate, some get pregnant, and all will experience the menopause transition - how is women's health discussed or signposted in the workforce
- In the absence of adequate role models and being included, groups have set up to provide support and to listen.



Not just 'women's problems'





Best Practice

- Provide an accessible policy and/or a management guide
- Include menopause/women's health in wellbeing conversations
- Educate all key personnel
- Conduct a risk assessment to identify hazards that can be reduced
- Involve occupational health
- Implement reasonable adjustments (WRAP)
- Flexible working
- Agile working
- Women's wellness networks



Refreshing your Health and Wellbeing and Equality and Diversity plans

- Start with cultural awareness of inequalities and intersectionality
- Listen and amplify
- New customer ethical and responsible brands, purposeful decisions
- New client the inclusion gap, ESG
- New patient HCP's aware of the power relationship and cultural advocacy
- New member how do mission statements and values speak on behalf of everyone



"One of the greatest under-appreciated sources of innovation and new business may in fact be women over 50, with new ideas, lots of life ahead of them, and with the verve to get it done" (Coughlin, 2017)

Continue the discussion: LI Emma Persand, Lemur Health T:@lemurhealth @menopausecbt. FB: Lemur Health, Working with the Menopause.

