

“The Menopause and Me”

UNISON Staff Engagement Exercise

1. Introduction

‘The change’, ‘the climacteric’, ‘the time of life’ – call it what you will, it is an unavoidable fact that all women go through the menopause. However, for many women this natural process is a time of anxiety and distress due to the various symptoms that can accompany it. Some menopausal changes can also be brought about by treatments for cancer, including chemotherapy, ovarian ablation and hormone therapy.

The menopause is a natural stage in a woman’s life, usually happening between the ages of 45 and 55, marked by changes in the hormones and the ending of menstruation. It can last from four to eight years. The years during which the oestrogen levels decline before a woman has her last period is called the perimenopause.

Women are roughly half of the UK workforce and about 3.5million are over the age of 50, nearly all of whom will be experiencing the menopause. For some women it means particular difficulties at work, yet it’s not something we usually talk about.

The effects on a woman’s physical and emotional health can significantly impact on how she carries out her work and her relationships with her colleagues.

UNISON believes that employers have a responsibility to take into account difficulties women may experience during the menopause, not least under health and safety legislation, and to take account of these in sickness absence policies.

As recognised and referred to in many of the policies implemented by Caerphilly County Borough Council - “...staff are our most valuable asset”. Given that approximately 3800 staff are female and between the ages of 40 – 65, and approximately 880 are between the ages of 35 – 40, dealing with the issues that the menopause may bring is, and will continue to be, undoubtedly an important workforce issue.

The Authority has been proactive in its approach and has set out a clear commitment to develop and implement a Menopause Policy/Guidance in the workplace - this is welcomed by Caerphilly UNISON.

To assist the authority with the preparation of the policy/guidance Caerphilly Unison undertook an exercise to engage with staff, particularly women, to seek their views/comments on:

- The level of support for a menopause at work policy/guidance;
- Their experience(s) (physical and mental effects) of the menopause or perimenopause, and
- What would help them and/or they would like to see in the workplace.

‘Menopause and Me’ events were held at various venues across the county borough to ensure as many staff as possible had the opportunity to engage with the exercise. Events were held on:

- 15 June 18 – Ty Penallta
- 05 July 18 – Blackwood Library
- 09 July 18 – Ty Pontygwindy
- 07 August – Caerphilly Library

The findings of the exercise are detailed below.

2. Findings

2.1 Support for a menopause at work policy/guidance

Across all 4 venues a total of 162 signatures were gathered in support of a Menopause at Work Policy. The general feeling expressed was that a policy/guidance document would not only highlight the issues experienced by many women in the workplace but give assurance that the physical and mental symptom(s) often experienced are taken seriously by the organisation. It is also heartening to report that a number of the signatures were male members of staff, which suggests that it is recognised, albeit to a limited extent, as a workforce issue not just a female issue.

2.2 Their experience(s) of the menopause or perimenopause

60 of the women who took part in the exercise were willing to share their experience(s) of how it felt to go through the menopause or to be perimenopausal. The most common symptoms highlighted were:

- Hot flushes
- Memory loss and ‘Brain fog’
- Depression/Anxiety/Mood Swings
- Loss of confidence and difficulty making decisions
- Tiredness and sleep problems

Below is a flavour of some of the comments made:

‘I am living in a fog. The worse thing is I take a lifetime to make a decision.’

‘Absolutely horrendous! Mental and physical exhaustion due to lack of sleep and symptoms caused. A struggle to get through each day at work.’

‘Disturbed sleep leading to tiredness. Forgetfulness. Hot sweats – difficult to cope with especially in meetings.’

‘My memory is shocking! Tired all the time. Mind feels foggy.’

‘Disturbed sleep – sweating excessively in meetings and feeling embarrassed.’

‘Flying into a rage for no reason at all. Very hard to control.’

‘I thought I was losing the plot!’

‘Meltdown!!’

‘Bad tempered, hot flushes, tiredness and sleepless nights.’

‘Feeling as if my head would combust! Night sweats and flushes.’

Overwhelmed, fuzzy head and irritable.'

'Feeling low – lack of concentration and expected just to get on with it.'

'Was forgetful and emotional – it's a source of jokes from male members of staff.'

'I couldn't remember words and kept forgetting things. Before I had a sharp mind and strong recall – I thought I had dementia and was losing my mind!'

Given that stress/anxiety and depression is the number one cause of sickness absence in the authority, the organisation may wish to explore preventative and/or additional means of support should symptoms be linked to the perimenopause/menopause. This may have a positive impact on sickness absence levels.

2.3 What would help them and/or would like to see in the workplace

The top 3 things identified that women believed would help them in the workplace were:

1. A workplace policy;
2. Greater use of flexible working/reasonable adjustments, and
3. Greater awareness raising on the menopause (issues/symptoms etc.).

The full results are shown in Appendix 1.

It is important to note at this point that the comments put forward cover a range of job roles, workplaces, service areas and departments and therefore some work environments may lend themselves more easily to adjustment/adaptions than others, but it is also important to emphasise that where reasonable changes/working practices can be accommodated, every effort should be made to do so.

The women who took part in the exercise also suggested the following 'hints and tips' for dealing with symptom(s) experienced:

- Acupuncture
- JML 'Chillow'
- Hormone Replacement Therapy (HRT)
- Having someone to talk to at work
- Sitting by a window
- See you GP about attending a menopause consultant clinic
- More awareness for men

3. Conclusion

Women experience the menopause in widely varying ways. Some women breeze through a problem-free menopause, but most experience some symptoms ranging from mild to severe.

Any policy/guidance issued by the authority should aim to ensure that:

- All managers are aware of the issue(s) and how it can affect their staff
- Ensure women feel confident enough to raise issues about their symptoms and ask for adjustments at work, and
- Take account of the difficulties that some women may experience during the menopause/perimenopause, and work with them to support and assist wherever possible.

What are the top 3 things that would help you and/or you would like to see in the workplace?

A workplace policy	73 - 1 st Place
Specific training for managers/supervisors	30
Greater awareness raising	39 - 3 rd Place
Recognised points of contact in the authority	4
Support/Peer Group	11
Greater use of flexible working/reasonable adjustments	57 - 2 nd Place
Gender sensitive risk assessments	1
Better ventilation (open windows/fans)	37
Staff uniforms/work wear – less nylon more natural fibre)	5
Greater access to natural light	5
Access to more menopause information	25
Access to further support e.g. Occupational Health	16
Use of body mapping tool to identify health issues	20
Policies that support and help to identify underlying issues	7
Better work stations/sanitary and rest facilities	10
Conduct a menopause survey	9
<p>Anything else? (please specify):</p> <ul style="list-style-type: none"> • Ice water for feet • Access to fresh air • Working from home • Talk about it with male and female colleagues • Compassion • Allow us to have plants again for better environment and air quality • Easy access to water/refreshments • More advice from Occupational Health not just directed to an NHS Website • Access to space where confidential discussions/'melt downs' can take place not in managers office • Shower facilities • More fans that are easy access rather than having to email different departments for one • Consider job roles of women i.e. visits/time out, pressure and stress points • Support for partners of menopausal person i.e. manager awareness of how this can impact the partner i.e. lack of sleep, sleep disruption and stress. 	