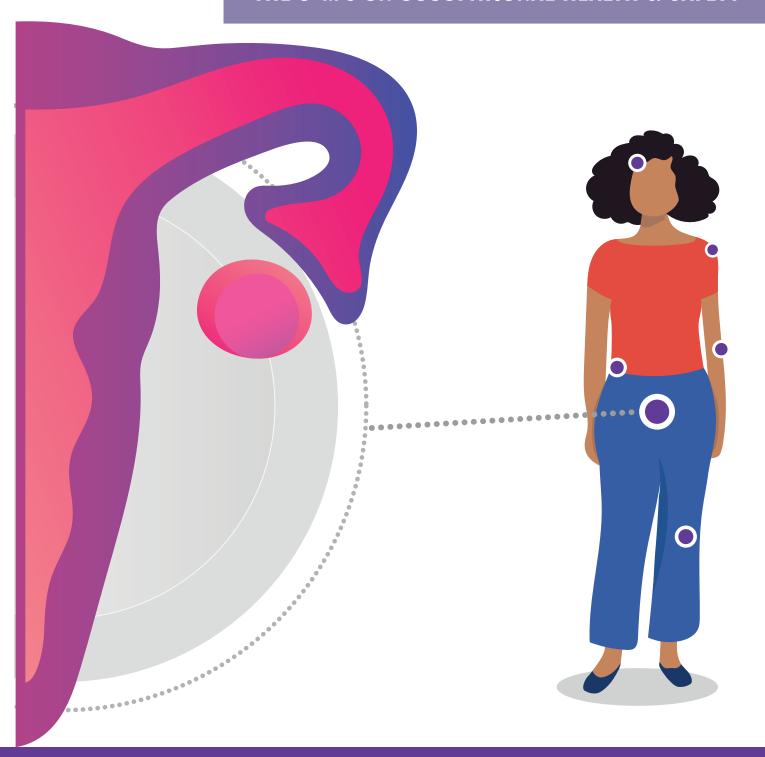


# ENSTRUATION ATERNITY ENOPAUSE

THE 3 'M'S ON OCCUPATIONAL HEALTH & SAFETY



Menopause: A practical guide for trade unionists



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## WHAT IS MENOPAUSE?

Menopause is the time that marks the end of the menstrual cycle and is diagnosed after 12 months without a menstrual period. This occurs naturally between the ages of 45 and 55, although it can begin earlier. This means that currently, women of menopausal age represent more than 50 per cent of the economically active population, and the number will increase worldwide as the population ages<sup>1</sup>.

Some women experience menopause earlier (before the age of 40). This "premature menopause" may be due to certain chromosomal abnormalities, autoimmune disorders, or because of surgical procedures or medical interventions that cause ovarian function to cease.

The transition to menopause may be gradual and usually begins with changes in the menstrual cycle. This period is known as "perimenopause" and it ends one year after the last menstrual period.

# During perimenopause women begin to feel the symptoms<sup>2</sup> associated with menopause such as:

- Hot flashes and night sweats.3
- Changes in the regularity and flow of the menstrual cycle, culminating in cessation of menstruation.
- Vaginal dryness, pain and incontinence.
- Difficulty sleeping/insomnia.
- Mood swings, depression and/or anxiety.
- Fatigue/lack of energy.
- Recurrent urinary tract infections.
- Palpitations.
- Mental fog and memory problems.
- Joint pain.



https://www.cipd.org/en/about/press-releases/menopause-at-work/

<sup>&</sup>lt;sup>2</sup> https://www.mayoclinic.org/diseases-conditions/menopause/symptoms-causes/syc-20353397

<sup>&</sup>lt;sup>3</sup> A hot flash is the sudden feeling of warmth in the upper body, which is usually most intense over the face, neck, and chest. Your skin might redden, as if you're blushing. A hot flash can also cause sweating. If you lose too much body heat, you might feel chilled afterward (https://www.mayoclinic.org/diseases-conditions/hot-flashes/symptoms-causes/syc-20352790)



Furthermore, menopause can also lead to the weakening of pelvic support structures, which increases the risk of pelvic organ prolapse; the loss of bone density which contributes to higher rates of osteoporosis and fractures<sup>4</sup>; as well as an increase in cardiovascular diseases which are a consequence of the decrease in oestrogen levels.

These changes can affect women's physical, emotional, mental and social well-being; and can vary from person to person and last several years.

## **GENDER ROLES AND MENOPAUSE**

Menopause is an important transition both from a social and a biological perspective. Socially, a woman's experience of menopause can be influenced by gender norms, family and sociocultural factors, including the way in which female aging and the transition to menopause is viewed in different cultures.

# Biologically, it represents the end of the reproductive cycle.

Because it represented the end of the reproductive cycle in women, and as a result of the patriarchal conceptions that women's main function is that of reproduction and care, menopause became a way of undermining women who became "useless" as their bodies could no longer reproduce.

These beliefs are still prevalent in our societies, affecting women who experience menopause as something negative and not as a natural stage of life.

As with menstruation, women are often confronted with minimization of symptoms and jokes (especially with regard to emotional symptoms or those affecting cognitive abilities such as lack of concentration or memory problems), leading to situations of harassment and gender-based violence within their workplaces.

Age discrimination is another component that can lead women going through menopause to suffer hostile work environments that affect their physical and mental health.



<sup>&</sup>lt;sup>4</sup> Menopause (who.int)



Two trade union organizations have published booklets in which the workers themselves recount their experiences.

I tried to raise the issue at work, but I was mocked and ridiculed by an internal email that was not intended for me but sent to me by accident by management. When I try to open windows to relieve my hot flashes, other coworkers close them. An example of a derogatory comment made about me by a female manager, 'I was there and got the shirt. You have to move on.<sup>5</sup>

66 My employer couldn't care less. In fact, I felt I had to keep it a secret, as menopausal women are considered to be a bit silly and can't be trusted to work effectively.6

## **MENOPAUSE IS A WORK ISSUE**

Traditionally, menopause has been an almost invisible topic<sup>7</sup>, considered a medical, private or "women's issue," and therefore generally not openly discussed or considered in the design of workplaces and work practices.

This invisibility of the issue, mixed with existing gender stereotypes, makes it difficult for women workers to feel comfortable in sharing these issues, even with other female colleagues; and the lack of support from managers and colleagues makes it even harder for women to find the support they need.

Menopause is an important stage in women's lives and its symptoms can severely disrupt women's personal and professional lives at a crucial time in their careers.8

<sup>&</sup>lt;sup>5</sup> Wales TUC Cymru (2016). The menopause in the workplace. A toolkit for trade unionists,

<sup>&</sup>lt;sup>6</sup> Finance Sector Union, SDA (2022). Menopause and menstrual leave policy framework.

<sup>7</sup> Is the menopause a workplace issue? | The Future of Work Podcast (ilo.org)

<sup>&</sup>lt;sup>8</sup> Research: Workplace Stigma Around Menopause Is Real (hbr.org)



A survey conducted in the United Kingdom found that three out of five menopausal women, usually aged between 45 and 55, were adversely affected at work and that nearly 900,000 left their jobs for an indefinite period of time due to menopausal symptoms<sup>9</sup>.

# Another survey<sup>10</sup> conducted amongst 13,000 women from UNITE indicated that:

- 80 PER CENT OF THE WOMEN said that their employers do not provide support at work for those who have menopausal symptoms.
- 15 PER CENT said their visits to the bathroom were recorded or monitored at work, and 7 PER CENT said they had to ask permission to use the bathroom.
- Hundreds of women said they had to work in uncomfortable conditions during debilitating experiences such as hot flashes. Some said they were not even allowed simple adjustments such as setting up office fans.

On the other hand, menopause can worsen existing disabilities and health problems, or even cause new ones in disabled women and those with pre-existing health conditions<sup>11</sup>.

Women who are migrant workers, precariously employed, working multiple jobs or combining work with caring responsibilities, are more vulnerable to encountering obstacles in accessing adequate medical care due to their employment status and prejudice in the workplace<sup>12</sup>.

All this can even lead to women quitting their jobs at an age when their talents, skills and experience are most valuable, directly impacting the existing gaps in wages and pensions, as well as overall workplace productivity.

https://committees.parliament.uk/work/1416/menopause-and-the-workplace/

<sup>&</sup>lt;sup>10</sup> https://www.theguardian.com/society/2023/dec/18/four-in-five-uk-women-say-workplace-support-for-menopause-lacking-survey

<sup>&</sup>lt;sup>11</sup> Menopause Health Decision Support for Women With Physical Disabilities - Journal of Obstetric, Gynecologic & Neonatal Nursing (jognn.org)

<sup>&</sup>lt;sup>12</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9527784/



# DIFFICULTIES ENCOUNTERED BY MENOPAUSAL WOMEN IN THE WORKPLACE.

Lack of information, even amongst women, can make it hard for women to understand what their bodies are going through and seek medical attention to help them manage it.

Conditions in the workplace such as poorly ventilated and/or hot workspaces, lack of access to decent sanitary facilities, control over the time spent in the bathrooms, lack of fresh water, and other working conditions such as stress, sedentary work, poor workstation design and adaptability, manual handling, screen based work, etc. can also compound menopause symptoms.

- ▶ I really struggled with perimenopause five years ago and I didn't recognize my symptoms.
- ▶ I was late all the time. I was very emotional at work. I had very low self-esteem and was worried about my memory.
- ▶ If someone had walked into my office at that time and said, "Louise, I have this brochure. If someone had pointed me in the right direction for more information, that would have saved me four or five months of thinking I was going to have to stop working.
- ▶ This is really scary.
- Awareness is really important.
- ▶ What women do about menopause treatment is completely individualized and up to them, but it's about having that conversation because there are a lot of women who are not looking for a promotion or are about to leave their jobs¹³.

Homophobia, transphobia and other forms of discrimination based on gender identity, reinforce the negative experiences of those who are going through menopause but do not identify as women.



<sup>13</sup> Op. cit. ILO Is the menopause a workplace issue? | The Future of Work Podcast (ilo.org)



# HOW CAN TRADE UNIONS SUPPORT MENOPAUSAL WOMEN?

We have already seen that the right to a safe and healthy working environment is a fundamental right and that the menstruation cycle of women, from menarche to post-menopause, needs to be addressed.

#### For this reason, trade unions<sup>14</sup> can:

- Encourage women to become staff reps and ensure they receive support.
- Train managers, supervisors, and safety reps to deal with menopause issues sensitively and fairly in the workplace.
- Train safety reps and shop stewards<sup>15</sup> to ensure that workplaces are comfortable spaces in terms of temperature and adequate ventilation, consulting with workers and carrying out risk assessments that pay particular attention to workplace conditions that can exacerbate any of the three 'M' symptoms.
- Ensure sickness absence related to menopause (or any of the three 'M's) is not counted in disciplinary and performance management processes.
- Make information on menopause, advice on how to deal with it, as well as training, accessible to workers.
- Raise awareness and promote education around women's health in the workplace.
- Make sure women's health at work is on the union and on the joint health and safety committee agenda.
- Negotiate improved occupational health and safety provisions that include menopause.
- Ensure a gender sensitive approach to menopause when dealing with risk assessments.
- Negotiate flexible working arrangements, rest and toilet breaks.
- Negotiate with the employer the access to menopause products, such as pain relievers, for employees.
- Negotiate paid time-off for employees who are experiencing menopause-related symptoms.



<sup>&</sup>lt;sup>14</sup> Stop the Stigma campaign from the Irish Trade unions (ReportBody.qxp\_Layout 1 (forsa.ie)) and UNITE the union policy on menopause (Menopause at work | A key workplace issue (unitetheunion.org))

<sup>15</sup> Some solutions can be easy and affordable with a big impact for women workers, such as access to cold drinking water and the right to have toilet breaks when necessary.



#### **ACTIVITY 1**

### MENOPAUSE AND PERIMENOPAUSE, WHAT WE KNOW AND WHAT WE BELIEVE.

OBJECTIVE: to understand our beliefs and knowledge about perimenopause and menopause.

MATERIALS: survey and pencils.

ACTIVITY:

Survey and Discussion

Share with the participants what the activity is about and what its objective is.

The survey is handed out and participants are given 15 minutes to answer it.

Once the participants have finished answering the survey, the facilitator will ask the questions out loud, read the answers and the participants will raise their hands if they have answered that option.

It is very enriching if the participants belong to different age ranges.

If the questions are about information (for example, if they know what perimenopause is), the facilitator will give the precise information.





# **SURVEY**

	1. At what age do you think menopause occurs?
	o Between 45 and 50 years of age.
	o More than 50 years old.
	o I don't know. (If you have experienced it, at what age was it?)
•	2. Do you know what perimenopause is? Yes - No
•	3. Have you experienced perimenopause? <b>Yes - No</b> If Yes: Did you know what it was?
•	3. What do you think are the symptoms you go through during menopause? List as many as you can think of.
	If you have already gone through menopause, list any symptoms you have had and whether they were limiting to your daily life.



# In this question the facilitator can read a list of symptoms and participants will raise their hands if those symptoms are or are not included in their surveys.

•	4. Who do you or would you talk to about your experiences with perimenopause or menopause? Select all that apply.
	o Friends
	o Family (who:).
	o Health care provider.
	o Spouse/partner.
	o Employer/work colleagues.
	o Other (specify):
	5. Which of the following statements do you believe are correct when it comes to menopause?
	o My symptoms will/are affecting my relationships with my friends.
	o My symptoms will affect/are affecting my social life.
	o My symptoms will affect/are affecting my sex life or intimacy with my partner.
	o My symptoms will/will affect my relationships with my children
	o My symptoms will/will affect my performance at work.
	o My symptoms will/are affecting my relationships with my coworkers.
	o None of the above.
<b>•</b>	6 Which of the following statements describes how you view menopause? (Select all that apply).
	o It is another stage of life and there is a lot to look forward to.
	o It is very private and/or embarrassing.
	o I would not/do not share it with my partner.
	o I wouldn't/do not share it with my immediate family.
	o I would not/do not share it with my coworkers.
	o My partner would be supportive of me.
	o My partner would support me/support me.
	o My friends would support/support each other.
	o My coworkers would/do support each other.
	o I feel/will feel free.
	o I am/will be in control of my life.
	o I am/will be living my best moment.
	o I am/will be strong.
	o None of the above.
	o Other (specify):





- ▶ 7. Which of the following statements do you think best describes society's perceptions of menopause? (Select all that apply).
  - o It is another stage of life and there is a lot to look forward to.
  - o It is an issue that only concerns women.
  - o It is very private and should not be discussed in public.
  - o Others don't want to know about it.
  - o As women get older, they are no longer sexual.
  - o Women are not capable of controlling their emotions.
  - o Women exaggerate, it can't be serious enough to miss work.
  - o Women are more attractive as they get older.
  - o Women feel/will feel free.
  - o Women feel/will feel free.
- ▶ 8. How do you feel about the reproductive and fertility changes that menopause will bring? (Check all that apply.) o I will be/am happy not to have my period anymore.
  - o I will be/am happy to no longer have my period.
  - o It will be/is liberating because I no longer have to worry about getting pregnant.
  - o I will be/am sad because I can no longer have children.
  - o I will be / I am happy about this new chapter in my life.
  - o I will be / I am sad about this new chapter in my life.
  - o I don't want to be considered old. o I don't want to be considered old.
  - o I am not worried about how old people think I am.

o Other (please specify):		
O Cillei iblease specify.		

After discussing the survey, participants will be asked to comment on what conclusions they reached.





## **ACTIVITY 2**

#### **MODEL AGREEMENT AND RISK ASSESSMENT CHECKLIST**

OBJECTIVE: To create a model agreement that includes the needs of women going through menopause in the workplace.

**ACTIVITY**:

To create a risk assessment checklist, carry out the checklist and adapt the model clause to the needs specified in the checklist.

Divide the group in two. Each group will nominate two/four staff reps who will be in charge of carrying out a risk assessment in the workplace.

After the first round of risk assessments, the staff reps will explain in plenary what their findings are.

After they have discussed, they will receive copy of the checklist to go over it again with the group.

After finalizing the checklist, they will receive a copy of the model agreement and will discuss what to add, change, modify of eliminate from the model clause to adjust to their risk assessment.





## MENOPAUSE RISK ASSESSMENT CHECKLIST

#### 1. Health and safety management

Are women included in the joint health and safety committee?	
Are women's issues included in the health and safety agenda?	
Are there women trained as health and safety reps?	
Is there a workplace menopause agreement/policy?	
Have managers and supervisors been trained in issues relating to health, safety and welfare and the menopause including those experienced by other groups such as disabled, LGBTI+ or youth?	
Have managers and supervisors been trained in issues relating to women's health, safety and wellbeing?	
Does the risk assessment include consideration of the menopause and other gender issues?	
Does the risk assessment include consideration of the menopause for trans+ employees?	
Is an individual risk assessment related to the menopause carried out?	
Do workers have access to information on the menopause?	
What occupational health arrangements have been made in relation to the menopause?	
Does the sickness absence policy recognize the menopause as a health, safety and wellbeing issue?	
Is there flexibility in regard to working hours and practices, including temporary or permanent adjustment of shift patterns or hours, home working, alternative tasks and duties?	
Are there arrangements for lone workers and travelling to and from work at unsocial hours?	
Is an environment of openness and transparency encouraged where members can talk about the menopause?	
Can women report menopause related sickness to a woman manager?	
What arrangements are in place to deal with related issues such as stress management?	





# 2. Sanitary and health issues – frequent urination, heavy periods, irregular periods, nausea and vomiting

Are workstations easily accessible to safe, clean sanitary and rest facilities?	
Are there private washing and changing facilities?	
Is there access to free sanitary products?	
Do rotas, shifts and schedules ensure that workers have easy access to safe and clean sanitary and washing facilities, including for mobile workers and those on off-site or temporary locations?	

#### 3. Temperature - hot flashes and perspiration

Is there a policy on workplace maximum (and minimum) temperature and is it implemented?	
How is it implemented?	
Is ventilation available and is it regularly maintained?	
Is additional ventilation, e.g. a portable fan, provided if necessary?	
Do uniforms and PPE reflect the needs of menopausal women?	
Is loose clothing provided?	
Is it made of natural fibres?	
Is there access to cold drinking water, including for mobile workers and those on off-site or temporary locations?	

#### 4. Aches and pains, dizziness, lack of energy, headaches

Have workstation risk assessments been reviewed to take the menopause into account?	
Are there opportunities to switch to lighter or different duties?	
Do manual handling assessments take these issues into account?	
Are sickness absence policies sympathetic?	
Are there flexible working arrangements in place in relation to breaks?	
Do working hours in general take account of these health issues?	



#### **5. Reproductive organs and bone damage**

Is there access to natural light?	
Are there regular and flexible breaks?	
Are uniforms etc. made of natural fibres?	
Are work processes considered?	

#### 6. Mood swings, irritability, loss of concentration, insomnia

Is there flexible working time?	
Are there flexible breaks?	
Is there access to natural light?	

#### 7. Workstations and work environment: skin and eyes

Have workstations been assessed and reviewed?	
Are there regular breaks?	
Are ventilation systems functioning?	
Are humidifier systems functioning?	

8. Are there	any other	conditions	in your	workplace	which	may	be	relevant	to
menopausal	l women?								

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#### **MODEL AGREEMENT - MENOPAUSE**

#### 1. Equal opportunities

- **1.1** The employer opposes all forms of discrimination directly or indirectly related to menopause, including on the grounds of age, sex, race, disability, sexual orientation and gender identity, and including discrimination in training, promotion and job security.
- **1.2** The employer and the union will work in partnership to promote a positive attitude towards employees experiencing menopause.
- **1.3** The employer undertakes to ensure that appropriate training is given to all employees with supervisory and personnel responsibilities to ensure the effective implementation of this equal opportunities' commitment.

#### 2. Health, safety and wellbeing

- 2.1 The employer recognizes that menopause is not an illness.
- 2.2 The employer also recognizes that menopause is a workplace health and safety issue.
- **2.3** The employer is committed to ensuring that the jobs, the work environment (including the provision of clean, safe and accessible sanitary and welfare facilities and maintaining a comfortable workplace temperature) are designed to be safe for all workers, including menopausal women workers.
- **2.4** The employer undertakes to carry out appropriate risk assessments, including individual assessments.
- **2.5** The employer recognizes their duty when providing personal protective equipment to take account of the health of those who may wear it and undertakes to provide uniforms and personal protective equipment and clothing which are suitably designed for menopausal women.
- **2.6** The employer recognizes that providing information and training about the menopause is essential for all managers and supervisors to ensure that menopause issues are handled sensitively and appropriately in the workplace.

#### 3. Sickness absence

3.1 The employer recognises that the menopause is not an illness and that sickness absence, capability, disciplinary and performance policies will not penalise women who have to take time off from work because of symptoms related to the menopause.

