

A policy statement about menopause

Why talk about menopause?

Queen Mary University of London is committed to providing an inclusive and nurturing environment for everyone who works and studies here, regardless of their circumstances. This is reflected in the [Queen Mary Strategy](#), [Equal Opportunities Policy Statement](#), our [Dignity at Work Policy](#) and our values and behaviour.

Menopause is a natural part of life for many people. Women over the age of 50 are the fastest growing segment of the workforce, and most will go through the menopause transition during their working lives. Not everyone experiences the menopause in the same way. Different cultures and societies have different perceptions of menstruation and menopause. It is important for colleagues and line managers to be aware of the effects of the menopause and sensitive to the different cultural understandings of the menopause. Despite the number of people impacted by the menopause, menopause remains a taboo subject in many workplaces. At Queen Mary we are committed to providing a safe space to have open conversations about the impact of the menopause, break down the taboo and create a supportive environment for our staff experiencing the menopause.

It is important to remember that the menopause is not experienced exclusively by women, and not all women will experience the menopause. For example, trans men, trans women and non-binary people may also experience the menopause (see FAQs for more information).

Below are some key facts about the menopause. It is important for staff to have some basic knowledge of the menopause to ensure they can better support their colleagues experiencing the menopause.

Key facts about menopause

- Menopause is a natural part of ageing that typically happens between age 45 and 55 when a person's oestrogen levels decline, and they stop having periods. It is a biological stage that marks the end of some people's reproductive life.
- The average age for a person to undergo menopause in the UK is 51, but around 1 in 100 experience it before the age of 40, known as premature ovarian insufficiency (POI) or 'premature menopause'.
- 'Perimenopause' refers to the phase leading up to menopause, when a person's hormone balance starts to change; for some women this can start as early as their twenties or as late as their late forties. It's not always easy to attribute the possible symptoms to perimenopause as they can be many and varied, ranging from mood changes, sleep disturbance, weight gain, night sweats and hot flushes to dryness of the skin, eyes, mouth and vagina.
- 'Post-menopause' refers to the stage after menopause, when a person has not had a period for at least 12 consecutive months.

*Information from Chartered Institute of Personnel and Development March 2019

People undergoing menopause may experience a combination of different symptoms and their severity will vary dramatically from one person to the next. By providing the right support to everyone affected, we can improve their working life.

Why is menopause a workplace issue?

Some people go through menopause with little impact on their daily life. However, others experience symptoms that can last for several years and have a negative impact on their performance and attendance at work. A bad night's sleep can affect concentration, for example, while heavy periods or hot flushes can be physically distressing and sometimes embarrassing. The psychological effects can also have an impact on an individual's relationships at work. For some, the symptoms are so severe that the employee is forced to leave their job altogether.

It is possible to experience a wide range of physical, psychological and emotional symptoms associated with menopause that can last for several years. Most people going through the menopause do experience some symptoms, although everyone is different, and symptoms can be fluctuating and be felt to varying degrees. Although on average symptoms last for around four years from a person's last period, around one in ten experience them for up to 12 years.

Typical symptoms of menopause include:

- A person may experience changes to their mental health as a symptom of the menopause such as mood disturbances, anxiety and/or depression, memory loss, panic attacks, loss of confidence and reduced concentration
- Hot flushes – brief and sudden surges of heat usually felt in the face, neck and chest
- Sleep disturbance that can make people feel tired and irritable
- Night sweats – hot flushes that happen during the night
- Irregular periods and/or periods can become light or heavy
- Muscle and joint stiffness, aches and pains
- Recurrent urinary tract infections (UTIs) including cystitis
- Headaches
- Weight gain
- Palpitations – heartbeats that become more noticeable
- Skin changes (dryness, acne, general itchiness)

Guidelines for Line Managers

We encourage line managers to be open to having conversations with staff about how menopause is affecting their work. Line managers should listen actively and carefully to what their member of staff is telling them and show empathy and understanding. Make the individual aware that the conversation is confidential. Discuss the supportive strategies listed below and consider together whether any of those may be of assistance.

Examples of supportive strategies:

- Consider offering a flexible working arrangement, for example a later start and finish time for an agreed period of time.*
- Consider allowing someone to work from home on an ad hoc basis if they're experiencing disturbed sleep or if they have very heavy bleeding.
- Look at ways to cool the working environment, for example provide a fan, move a desk close to a window or adjust the air conditioning.
- Encourage employees to discuss concerns at one-to-one meetings with you and/or HR Adviser / Occupational Health.
- Discuss with the HR Adviser / Occupational Health team whether a stress risk assessment would be beneficial.
- Discuss possible adjustments to tasks and duties that are proving a challenge.
- Signpost to the employee assistance programme or counselling services.
- Identify a supportive colleague to talk to away from the office or work area, such as a well-being champion.
- Have some quiet time or undertake relaxation or mindfulness activities.
- Have agreed protected time to catch up with work.
- Consult HR Adviser if the individual is experiencing significant difficulties related to physical or emotional symptoms.

* Flexible working arrangements will be considered in line with the provision of the Queen Mary Flexible Working Policy and organisational needs.

http://hr.qmul.ac.uk/procedures/leave/flex_work/

Useful resources

Queen Mary:

- Who's Who in HR <http://hr.qmul.ac.uk/contact/whoswho/>
- Occupational Health <http://hr.qmul.ac.uk/about-us/>
- Employee Assistance Programme <http://hr.qmul.ac.uk/wellbeing/mental-wellbeing/>

Further information:

- Healthtalk.org has a large resource on working and menopause. <http://www.healthtalk.org/peoples-experiences/older-life/menopause/work-and-menopause>
- NHS guidance on menopause www.nhs.uk/conditions/menopause/
- Women's Health Concern (patient arm of the British Menopause Society) – www.womens-health-concern.org
- Support for premature menopause www.daisynetwork.org.uk
- Henpicked, Menopause in the Workplace <https://menopauseintheworkplace.co.uk>
- Menopause Café – 'gather to eat cake, drink tea and discuss menopause' –

- www.menopausecafe.net
- The Menopause Exchange
www.menopause-exchange.co.uk
- Menopause Matters
www.menopausematters.co.uk
- Gendered Intelligence
<http://genderedintelligence.co.uk/>

Frequently Asked Questions

Section A: I am a member of staff who is experiencing the menopause transition.

Q1 – I am experiencing unpleasant symptoms and this is affecting my work performance. What should I do?

A - In the first instance, you should approach your line manager. (You can choose to speak to your HR Adviser prior to informing your line manager, but where possible, the line manager should be approached first). Together you can agree on some reasonable adjustments and possibly a referral to HR and/ or Occupational Health.

Q2 – Can you give me some examples of reasonable adjustments that I might expect?

A – [Reasonable adjustments](#) could involve offering a flexible working arrangement, for example a later start and finish time; allowing someone to work from home on an ad hoc basis if they're experiencing disturbed sleep or if they have very heavy bleeding; more examples can be found on page 2 of this document.

Q3 - I don't want my colleagues to know what I am going through. Can Queen Mary guarantee confidentiality?

A – Queen Mary is committed to maintaining confidentiality and not disclosing any information without your consent. GDPR treats health information as sensitive data.

Q4 - Am I entitled to any time off due to my symptoms?

A – If symptoms are severe enough to cause discomfort or distress, we recommend you speak with your Line Manager and / or HR Adviser to discuss your particular situation. Further information can be found in the Queen Mary Attendance Policy and Procedure <http://hr.qmul.ac.uk/procedures/sick/>.

Section B: I am a manager with a member of staff who is experiencing the menopause transition

Q1 – A member of staff is experiencing unpleasant symptoms and this is affecting their work performance. What should I do?

A – Find a private space to discuss what your member of staff is experiencing. Together try to agree on some reasonable adjustments that would suit their particular circumstances. If their symptoms are severe, refer them on to their HR Adviser who can facilitate an appointment with Occupational Health.

Q2 – A member of staff is requesting time off for sick leave. Can I grant this?

A – You will need to follow the provisions laid out in the Queen Mary Attendance Policy and Procedure <http://hr.qmul.ac.uk/procedures/sick/> . If you are unclear about this, speak to your HR Adviser.

Q3 – A member of staff is requesting to work flexibly. Can I grant this?

A – Consider offering a short-term flexible arrangement first. If this is not satisfactory, permanent flexible working arrangements will be considered in line with the provision of the Queen Mary Flexible

Section C: How might trans men, trans women and non-binary people experience the menopause?

- A trans man is someone who identifies and lives as a man but was likely assigned female/a girl at birth. Trans men may experience menopausal symptoms if their ovaries remain in place. They may experience surgical menopause if the ovaries and uterus are removed.
- A trans women is someone who identifies as a woman but was likely assigned male/a boy at birth. They may experience pseudo-menopausal symptoms if their hormone therapy treatment is interrupted or levels are unstable.
- Non-binary people's gender identity does not sit comfortably with the binary of 'man' or 'woman'. Some non-binary people may identify with some aspects of binary identities (e.g. they may feel they embody some elements of masculinity or femininity or both), while others reject them entirely. Some non-binary people may also experience menopausal symptoms.

Working Policy http://hr.qmul.ac.uk/procedures/leave/flex_work/ and organisational needs. We recommend you have a conversation with your HR Adviser if you need more information.