

MENOPAUSE AND NON-VISIBLE CONDITIONS IN THE WORKPLACE

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Menopause and other non-visible conditions can be difficult for employees and employers to deal with in the workplace. Vivienne Reeve and Siobhan Bishop discuss the impact on employees, policies, whether the symptoms may amount to a disability and best practice to encourage a supportive workplace.



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Transcript

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Siobhan Bishop: Hello and welcome to our podcast where we are covering dealing with menopause in the workplace and other non-visible issues that individuals may have. I'm

Siobhan Bishop, a Principal Associate in the Employment, Labour & Equalities team and I'm joined by Vivienne Reeve, another Principal Associate in our team.

She's here to chat about how the menopause and other non-visible conditions can affect staff and some examples of best practice.

So Vivienne, both of these topics are coming much more into focus recently.

For example, with the menopause more and more women are working well into their forties, fifties and sixties and so this is an issue that employers are going to have to look at much more closely and it is also getting much more publicity, for example in October we had World Menopause Day.

Equally, on non-visible conditions they're receiving much more attention. Another example, not in the workplace, but blue disabled badges are now extended to those with non-visible disabilities.

And we're talking about both of these and what would you say are the main things that they have in common?

What are the main things that the menopause and non-visible disabilities have in common?

Vivienne Reeve: Thanks Siobhan. There's a couple of things, I think the first thing to say is people are often surprised when others talk about what they are going through at work, because they look fine. They're presenting as they did before.

I think we often think of the hot flushes when we think menopause but, actually this is only one of 34 recognised symptoms. Non-visible conditions are just that. We know that many people suffer from conditions like MS, ME, fibromyalgia, diabetes and there are many people, in fact everybody is neurodiverse, to an extent, and they often feel like then they have to show that they're coping by not talking about it when symptoms are particularly bad. Not being at work or at the pub, at sports day.

Secondly, I think the challenge is that these symptoms are often changeable in ability and how they present. So each woman presents and experiences the menopause differently and the symptoms can change over time. Equally, some conditions change by the week, the day and even the hour, causing frustration at the very least and this means, as employers, we need to adapt.

I think it's fair to say there's still a considerable amount of stigma when we talk about the menopause and many non-visible conditions as well have embarrassing or undignified symptoms. So it's not just things like your face burning up, feeling hot, it's digestive issues, shaking, all of these things can be really hard to talk about.

For me, I think a key thing is certainty. We like certainty. We like, if we're faced with a challenge, particularly medical, we like a diagnosis and we like a prognosis, but menopausal symptoms vary from woman to woman and also many non-visible conditions, whilst recognised, have no cure. There's not been enough research and cryptically they cover many different disciplines, so diagnosis can take years. So the best we can do is manage what's in front of us.

I think the last thing to say is that it has an impact on everybody so there will be people in your team and workplace going through or managing the menopause and people with non-visible conditions and so there's an obvious benefit in supporting your team to manage attendance and well-being.

Siobhan: Okay, so you have mentioned some of the symptoms that women may experience. Some of those long lists which you mentioned, but it's really worth having a little further delve into that because they are not really widely known.

Of course the first point, as you mentioned, is to remember that every woman experiences it differently and everyone is an individual and the impact of the symptoms can vary widely amongst women, but many people, even women, do not know what to expect or how it might affect them or other members of their team.

What are the symptoms of the menopause and how might it affect women?

Vivienne: That's right. I thought I knew something about the menopause until I started looking into this last year and I did not know the half of it. So, I think the key facts, for me, are the age range, so the average age of perimenopause, which is the start of changes, is around 45 but it can be earlier. And the menopause, overall, can last between the age of 45 to 60 so different women will experience it, hopefully for not all of that period and usually not but certainly for a long period of time.

There are about 12 million women in the UK who are perimenopausal or menopausal and many more women of menopausal age in the workplace now, so this is a significant issue for employers. It can start naturally or it can start as a result of surgery, whether that's a

hysterectomy or possibly cancer treatment.

The symptoms range from everything: from hot flushes, which actually aren't necessarily just feeling a bit warm, but some people had reported their whole body feeling like it's burning; insomnia; anaemia from excessive or severe bleeding; new allergies, which was a big surprise to me; and, perhaps not so surprising if you have insomnia for example, brain fog and a real struggle to concentrate; and then anxiety; and a loss of confidence.

The symptoms, as I mentioned, can change throughout the menopause, as can non-visible conditions. They can last a couple of years or the menopause has been known to last for over a decade in worst cases. So the potential for employers to make a real difference to people's lives and the workplace is really there.

Siobhan: So the extent of these symptoms and the period over which they last could mean, that in some cases, they amount to a disability in the legal sense and how can employers go about accommodating someone with a condition that does amount to a disability?

The symptoms of the menopause may amount to a disability. How can employers accommodate a condition that amounts to a disability?

Vivienne: That's right, so the menopause itself is not a disability, it's a normal part of a woman's life, but the symptoms that you might struggle with and have to deal with may be, for both the menopause and non-visible conditions, the label or the diagnosis actually doesn't really matter. The effect of what that condition is or the state of health is the key thing.

So we are looking at: does it have a long term effect? Is the effect substantial? And what is that effect on their abilities to do normal daily things? And if you think that we are in that category then they're likely to be covered by the Equality Act and the Health and Safety at Work Act.

Sometimes, when we're talking about how to deal with people's health conditions at work, one of the first things that comes up is that we weren't told about it or it wasn't on an employment form or a questionnaire at work and, equally, that doesn't really matter either. If somebody is confident enough to share something, that's great, but many people aren't

and many things happen whilst in employment.

So the key is, you know, understanding what somebody's normal is so that you can notice and then do something about a change in circumstances. I think one of the things that comes out, from all the research on this, is that many women don't feel confident in citing menopausal conditions as the reason for absence, I think because there is so much stigma about it.

And, as I said earlier, a lot of non-visible conditions are quite undignified so you can't rely on somebody having the confidence or the ability to share something with you.

So we are talking about reasonable adjustments, if you have been told you are aware that somebody is struggling with something in the workplace. Perhaps there's a working practice or a policy that's causing an issue, we need to think about how we deal with that. So, we need to understand: what is the working practice or the physical environment that's causing an issue? What impact is it having on somebody? And what can we do to alleviate or remove that impact?

So when we're talking about all these things, we need to bear in mind how effective might an adjustment be? Whether it is suggested by the person themselves or something that the team think of. Is it practical? We can bear in mind costs and the resources of an organisation as well. It's worth remembering that more will be expected of larger organisations, but the Equality Act does apply to all businesses. Is there any financial support available, like Access to Work for example?

The flashpoints that we've talked about at work for these kind of conditions, I think there's a couple of obvious ones. So the first is energy and being well enough to go that extra mile or to stand out and do that job or whatever it is that somebody could reach for; performance; attendance; and the working environment. So what might we do about any of those things? Actually, they're quite practical and often quite easy things to do and it's really about being flexible.

So we might be able to adapt working hours and travel time if mornings and later in the day are an issue, which they often are for people with low energy or chronic fatigue; looking at parts of the role, which might be really difficult to do; facilitating access to a building. So there can be a lot of physical barriers in the workplace like stairs; heavy fire doors to get through; where meeting rooms are; and where bathroom facilities are.

And I think other things, as well, like preparing for meetings, so things as basic as ensuring materials are printed in big enough font for people with impaired sight, and not

having meetings in loud, busy environments which exclude those with hearing loss.

Siobhan: So there are a whole range of issues that people do have to cope with and that can be really tough.

It's clear from what you've said and you've highlighted that many of these issues are taboo and people do clearly feel that they're private or they might feel embarrassed. Especially, for example, if the line manager is not someone with menopausal experience and they might be worried that they're not being taken seriously or being thought of as less capable.

So, is there any way that an employer can address these individual concerns that the employees have to encourage them to raise these issues?

How can employers encourage employees to raise issues relating to the menopause or non-visible conditions generally?

Vivienne: Absolutely, and actually the things that we can be doing are not that difficult. They are very similar to other things a lot of employers are already doing about mental health, for example. So I think the overarching point is it's about learning. It's about creating a safe space for people to be interested, to read, to listen and to share some experiences.

So picking up on what you just said about not wanting to, or not feeling able to talk to a manager for example, some organisations are creating menopause champions, similar to first aiders for mental health and this can be a really effective way to build trust and to build a network of support. Because if you are going through symptoms which you just don't think your manager could relate to, having somebody outside of your team who is there for everybody, who knows more about the menopause, who can share, anonymously perhaps to start with, other people's experience and adjustments that have worked, that can be really powerful.

I think menopause policies definitely have a place. Having a policy, having to draft it, consult about it and raise awareness so that you're giving information to staff, but also guidance to managers in dealing with it, which can be challenging as well. That helps and it helps as a first step. Obviously, just having a policy is not going to cut it. We need to be training people from the top down. There needs to be leadership and buy-in from senior management so that everyone can see the value in this and the fact that we are all getting

on board with it, it's not just left to managers to deal with on their own.

Something that we've been using quite a lot here at Gowling recently are lunch and learn events. So you bring your lunch, you sit, it's an informal session and people come in to talk about hearing loss, or asperger's, being neurodiverse, menopause and it's great. It's something, it's not at the beginning or the end of the day you've got to fit in. It's a half.hour, may be an hour's session where you can come and chat and learn.

Siobhan: So there's another issue which I want to explore with you and that's about diversity in the workforce and talent retention for people who are going through the menopause and also with non.visible disabilities. Do you think the menopause might be a factor in the gender pay gap?

Is the menopause a factor in the gender pay gap?

Vivienne: I do, and I don't think it's a coincidence that the age of when the gender pay gap really starts kicking in is around the age of 40 upwards and I don't think it's a coincidence that sort of 40/45 is the start of some people's perimenopausal or menopausal symptoms.

I think there's not been a lot of research on it yet but I certainly think it's something we need to be thinking about, because if you think back to the symptoms we're talking about, particularly for the menopause. But also non.visible conditions, so if you are suffering from chronic fatigue; chronic pain; perhaps you are, you know, perhaps you're suffering the indignity of incontinence, which you never thought was going to happen at this age; your confidence has taken a knock with all these symptoms. Would you really be in a position to step up, go the extra mile, to take on opportunities and take on promotion? Well, you may well not be and I do think it's something that may lead in to the gender pay gap.

I think the key for me is understanding and people understanding that menopausal and non.visible symptoms change and the menopause does come to an end. And I think it's just bearing in mind, thinking about your team and if perhaps somebody mentally either subconsciously or consciously, from having a discussion, is not on promotion track let's say. Let's just make sure that that conversation is revisited, it's revisited every year or it's revisited whenever it should come up so that somebody doesn't feel that they've been put on that track or started there and that actually that they can't come back.

I think, you know, there are millions of women in work and it's only going to increase the

number of working women who are dealing with the menopause in particular.

This is a huge opportunity, I think we should see it as an opportunity to make positive change and to support our staff. It's really important also to be talking about it, in terms of retaining and recruiting talent. We know that, particularly in the public sector but equally in private sector, there are more and more questions in procurement and pitches, in contracts about your diversity inclusion agenda and it's not just about a tick box exercise.

People want to know the businesses they work for are also interested in doing something about these issues and we know that people are now looking to join businesses, not only because of pay and the job, that's not even half of it. Often it's about flexibility, it's about how do you look after people's welfare and so this is a legal requirement in terms of making sure we support people but it's equally firmly on the diversity agenda for 2020.

Siobhan: Thank you very much, Vivienne. There's an awful lot of food for thought there and we really like the tips and the good guidance that you've given to employers to consider for supporting a workforce and all this diversity and inclusion strategies that they will be focussing on going forward.

So, thank you very much for listening and, of course, if you have any queries on this area please do get in touch with Vivienne.

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