

Women and Equalities Committee

Oral evidence: Menopause and the workplace, HC 602

Wednesday 9 February 2022

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Members present: Caroline Nokes (Chair); Caroline Dinenage; Jackie Doyle-Price; Carolyn Harris; Kim Johnson; Anum Qaisar; Kate Osborne and Bell Ribeiro-Addy.

Questions 84 to 109

Witnesses

[I](#): Deborah Garlick, founder and director, Henpicked – Menopause in the workplace; Nikki Pound, policy and campaigns support officer, Trade Unions Congress and Claire McCartney, senior policy adviser (resourcing and inclusion), Chartered Institute of Personnel Development (CIPD).

[II](#): Lynda Bailey, co-founder and director, Talking Menopause and former inspector, West Midlands Police; Chris Pitt, chair executive officer, First Direct and Sharon Ollivier, senior training and development partner, South Tees Hospitals NHS Foundation Trust.



Examination of witnesses

Witnesses: Deborah Garlick, Nikki Pound and Claire McCartney.

Chair: Good afternoon and welcome to the Women and Equalities Select Committee and our evidence session considering our inquiry into menopause and the workplace.

Can I thank all of our witnesses for coming to give evidence this afternoon? We have Deborah Garlick, the founder and director of Henpicked; Nikki Pound, the women's equality policy officer at the TUC, and Claire McCartney, who is the senior policy officer at the Chartered Institute of Personnel Development.

Thank you very much for coming along this afternoon. Members of the Committee will ask you questions in turn and I am going to start with Kim Johnson, please.

Q84 **Kim Johnson:** Good afternoon, panel. My question is to Claire: do you think there is enough good quality guidance for employers about their obligations to employees experiencing menopause and what else would you like to see? We know that the HSE, for example, has no guidance whatsoever.

Claire McCartney: The guidance that we have at the CIPD for both HR and line managers talks about legal obligations and 16,000 organisations have downloaded it. Obviously, there is also really good guidance from other members of the panel here today. ACAS have really clear guidance for employers on the menopause including information on the menopause and the law, and also carrying out health and safety checks and risk assessments, which is really helpful.

In terms of the gaps, you quite rightly mentioned the HSE website—that certainly needs to be filled and addressed. I would also say that the EHRC, the Equality and Human Rights Commission, has guidance around the Equality Act but makes no specific reference to employers' legal obligations relating to the menopause. I would say that that could certainly be highlighted more clearly by the EHRC.

Q85 **Kim Johnson:** Would you say that there is a disparity between the public and private sector, given that a lot of women work in front facing, key skill-type jobs, and whether they have access to effective communication about their rights as women in terms of menopause?

Claire McCartney: Our survey data suggests that organisations that have a supportive framework in place around the menopause are much more likely to be in the public sector and the not-for-profit sector than the private sector, and also within larger organisations, as you would probably expect. But we really need to raise awareness across all organisations and I think SMEs are particularly important because they make up such a high proportion of businesses.



Q86 Chair: I will start with Claire. We have had some really mixed evidence about how well employers are doing, with some employers having really great menopause policies that are not actually implemented, others having no policy at all, and still a culture of stigma in some workplaces. What are the challenges that you think are holding employers back from not just having policies, but implementing them?

Claire McCartney: When we launched our guidance in 2019, we polled our members at the CIPD, around 500 of our members, and fewer than one in ten at that time had any sort of supportive framework, menopause policy or guidance in place. We repeated that poll in April of last year, and the number went up to just under a quarter, so 24% of organisations. While that is good progress, it clearly shows that disparity—that there are lots of organisations that are not focusing on this and do not have guidance.

The things that are holding organisations back are a general lack awareness of the menopause, a general lack of understanding around the menopause and not really realising that the menopause is a workplace issue. Also, the fact that some organisations have closed cultures where people feel that they are not able to talk about the menopause—some people might be embarrassed to do that and feel that they will not be supported by their organisation.

The final area I would mention is a lack of understanding and awareness by line managers as well. Line managers really have a very pivotal role to play in supporting those people experiencing menopause transition in the workplace. They are often the first port of call and they would be looking at practical workplace adjustments. That would be another area that was potentially holding organisations back—that lack of understanding and awareness by line managers.

Q87 Chair: Can I turn to Deborah? We have just heard from Claire the terrifying statistic that 75% of organisations do not have a policy. What do you think: is it the closed cultures that she is referring to that are stopping employees from having the confidence to approach their line manager or their employer directly?

Deborah Garlick: Firstly, it is good progress over such a relatively short period of time, but how do we accelerate that to make sure all employers do this? What gets in the way with some of them is a lack of awareness of what they should be doing and what their responsibilities are, but many employers do not understand how to do this. What that results in is that closed culture—perhaps even organisations that have got policies in place, if they have not engaged all of their colleagues and said, “This is important to us, if you need support, come and talk to us”. As Claire says, putting line manager or HR occupational health line manager training in place too will stop people coming forward.

Q88 Chair: Do you think that there should be legal requirements for organisations to have not just policies in place but implemented policies?



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Deborah Garlick: That is a good question. Do I think that it should be law for an organisation to have a policy? Actually, what we are seeing in terms of best practice is organisations that do put the framework in place. A policy is great, or a guidance document is great, but it is how you bring it to life and change the lived experience within the organisation that seems to be making all the difference.

What I would not like to see is making policies law and people just downloading policies, storing them in the policy drawer and doing nothing with them. That would not change anything at all.

Q89 **Chair:** Is that the danger—that it becomes a box ticking exercise?

Deborah Garlick: Yes, I would be concerned that it becomes a box ticking exercise. Certainly the way so many employers are getting engaged with this and putting phenomenal things in place—and also thinking of some of the leading organisations putting support and guidance in place—is having a ripple effect rather than it necessarily just being made a blanket law. They are telling other employers, “This is what we did, this is how we did it, these are the results”.

Q90 **Chair:** Nikki, can I have your thoughts on those same questions, please?

Nikki Pound: Just to touch on the most recent point in terms of legislation: it is really important and this is where the awareness raising comes up. There are existing legal duties under the law that already exist in terms of Health and Safety and the Equality Act. Public sector employers also have the public sector equality duty and something that we advocate for in general is that that should be extended to the private sector, where most people work.

There is a lot of legislation out there, but employers do not know how that relates to their duty in relation to menopause. There is a lot of work to do in terms of making that clear as part of guidance and raising people's awareness and also raising awareness for workers in terms of what their rights are under the Equality Act and the Health and Safety Act.

In terms of the experiences that Claire and Deborah alluded to, certainly when we have consulted with affiliates on their experiences of menopause in the workplace and previous research we have done through Wales TUC, the common theme is a lack of awareness and empathy around the experience of menopause in the workplace. There seems to be a bit of ignorance around the issue and also it is being treated as a joke and dismissed as a women's issue rather than thinking about it as a workplace health issue. They tend to be the big barriers that prevent women coming forward and asking for support which then creates that really closed culture that we are talking about.

When we consulted on this, some of our affiliates said that, particularly from line managers, there is a lack of awareness and training in how to respond sensitively but also take into account people's individual



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experiences. Yes, there might be some common symptoms that people experience, but everyone's experience is going to be different. That is also then impacted by where you work, the type of job you do and the sector that you work in.

For example, we have had affiliates feed back to us that where women workers are operating in very male dominated sectors, actually something as simple as having access to bathroom facilities is a real problem. People working in sectors like education are not able to take breaks when they might need to because of the nature of the work. Also roles like prison officers—the annual health and safety tests that they have to take as part of their fitness check does not always take into account the length that menopause lasts for women or the physical impact.

There is a real need to look at balancing the two approaches between having this general approach and making employers aware of their legal responsibilities and making workers aware of their rights, but then also making sure that each organisation is trained in giving that individual support as well through risk assessments, occupational health and just having a supportive environment such as a workplace champion or menopause cafés. All those kinds of things can really help to make a good, healthy workplace culture that will support women going through the menopause.

Q91 Chair: Picking up on awareness, I absolutely agree; you are right that there needs to be greater awareness. Does raising awareness necessarily make it easier for employees to start that conversation, and if not, what tool kits could be put in place?

It is a question I am often asked; I have done a lot of panels on the menopause recently. Everyone says, "How do you start the conversation?" At which point they get a very blank look from me because I would not know. How can we make sure that employees are empowered to start the conversation, and employers know how to respond?

Nikki Pound: Raising awareness is really important—things like employers making an explicit commitment to supporting workers going through menopause in the workplace through a policy signal that you are open to those conversations. The policy itself is not a silver bullet, but in doing so you are showing your commitment to supporting workers going through menopause.

As part of onboarding processes, when you are looking at giving new members of staff training in terms of inclusivity training, equality training, all of those things that we would want to see in a workplace in general, it is about making sure that menopause and health issues are covered in that as well. But it is about getting an explicit commitment to that.



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Before we came in, we were discussing with some of the speakers who will be joining us later that it really feels like in the last two years there has been a real change in the emphasis on this. Thanks to all the different campaigning works, we have seen that we are talking about this so much more. Certainly from our members as well—57% of members of the trade union movement are women, and many of them will be approaching the perimenopause and many of them will have been through menopause and experienced these challenges in the workplace. That is all helping to raise awareness, but now it is about solidifying it into action in the workplace.

Q92 Chair: You are absolutely right about the increasing awareness over the last couple of years, but what role do you think the Government should have in further increasing awareness?

Nikki Pound: There is definitely a strategic role for Government in co-ordinating all of these different stakeholders in terms of pulling together best practice guidance. As other speakers have identified, there is not the guidance on the HSE website; that is something that we would like to see as well.

There is a strategic role there for Government. There is a role to look at in terms of existing legislation: making sure that the public sector equality duty is enforced, and seeing whether there is an option to extend that to the private sector. Also, under the Equality Act there are things like section 14, which allows cases to come under dual discrimination—in the case of menopause that might be sex and age, but also looking at how multiple discrimination works in the workplace.

There is a role for Government in reviewing that and considering whether the existing legislation is being enforced to best effect, and if not, why not. I do think the really key role is actually about strategic guidance and moving employers on to that position of looking for guidance, looking for support, looking at best practice, looking at model policies and also backing that up with training as well. It is not just about having the policy on paper; it is about what that looks like in the workplace.

Q93 Chair: Would that be enhanced if it was made a protected characteristic? Do you think that would make a difference?

Nikki Pound: Our position at the TUC at present is that we think there is equality legislation that allows you to bring cases under sex and age as a discriminatory situation, and there is existing guidance under health and safety legislation.

There is definitely something to explore there. Menopause is a life stage that women go through in the same way that not all women but some women will go through pregnancy and maternity; that does have its own specific characteristic so there is definitely a case to look at that.

I would say that from the TUC's perspective we have not done enough work in looking into that yet and at the moment we would say that there



is plenty of legislation that we can look at to see whether that is currently being enforced correctly. Again, if you are not able to access employment tribunals, if you do not know your rights, if employers do not know what legislation exists that they should already be upholding, then another piece of legislation could act as another barrier in the sense of if it is not being enforced then it is not being enforced. There is definitely something to look at in exploring that.

Q94 Chair: That was the message we got from the employment lawyers: that they wanted to see something so they were not relying on disability discrimination legislation. Deborah, can I just turn to you and ask what best practice looks like? Your accreditation for employers scheme: what do you ask them to sign up to in order to get that accreditation?

Deborah Garlick: What they are actually demonstrating as part of that is that they are committed to being a menopause-friendly organisation. I agree with Nikki around awareness; actually, many employers do not know where to start when they start on this journey. They can feel tentative. First toe in the water: when I say menopause, what is going to happen? They can feel very worried about it.

Menopause Friendly accreditation membership gives a framework for employers to follow, appreciating that all employers are different and they all have different cultures, different leadership styles, different work roles, so it is not a box ticking exercise. It gives areas of focus. For example, how do you change the lived experience in an organisation? How do you create that open conversation within your organisation? Being clear about having a policy and a guidance document is great. Are senior leaders engaged with this? Because when senior leaders share their stories and say this is important, it gives everybody permission to talk about menopause and creating that conversation.

I would say the best employers listen to their employees first, to understand what is getting in the way and what they can do to remove anything like that and to support them. There is the training, and that is for all different types of people. Everybody in the organisation could be trained, focusing on line managers, occupational health, and EAP providers, for example. Looking at facilities is where it is absolutely key to listen to colleagues: what they are actually experiencing and what is getting in the way.

As an example, an organisation did make desk fans available to everyone after a woman came forward, to her credit, and said, "I'm just hot. I need a fan, but I have to fill in so many forms to get one, it's impossible." The organisation simply got rid of all those processes so employees can now order fans through stationary. That listening and the feedback mechanisms are key.

Nikki mentioned workplace advocates and champions; they are fantastic for engaging colleagues and understanding what is actually happening for them, and helping the organisation put things in place, so it is a range of



things. But the independent panel are setting those standards to be helpful to people. Yes, it is an accreditation that is absolutely meaningful, but the whole point of it was to accelerate change and to help organisations deliver to the standard that makes this sustainable change—changes for good.

Q95 **Chair:** Nikki, briefly before I move on to the next Committee member.

Nikki Pound: Just to pick up again on the kind of practical things that employees are facing when they are dealing with menopause in the workplace, and then things employees can do.

One of the things that comes up time and time again from our affiliates is sickness and absence policies and performance review policies. We find that employers could very easily and quickly change the way that they look at sickness and absence, so that when people have regular periods of time off due to their menopause they are not being triggered for disciplinary procedures. That is a huge barrier for women experiencing menopause; they are worried that they going to face disciplinary action, they are going to be on trigger warnings and so on. There are really straightforward steps that employers can take that will make a big difference quite quickly.

Q96 **Anum Qaisar:** Nikki, I will come to you first. Many women are working for longer—in fact, women over 50 are the fastest growing group in the workforce—so the percentage of the workforce impacted by the menopause is getting bigger. What is the impact on employees experiencing menopause if they are not supported at work?

Nikki Pound: As we have touched on, that lack of awareness and empathy can cause real difficulties and a lot of anxiety. When we have consulted affiliates on this, one of the big things that women talk about is the mental and emotional toll it takes on them because of the lack of support. It can lead to a real loss of confidence in the workplace, a lot of anxiety and worrying about something that they should not have to worry about. There is often a lack of flexibility in the workplace as well. Again, there are specific policies that can help support women going through menopause, but there are also policies such as flexible working, which is a good workplace policy for everybody, that can really help women if they are managing symptoms such as insomnia or fatigue.

We find that women who speak to us about their experiences find that it is often treated as a joke or, if not treated as a joke, it is dismissed or not taken seriously and it is dealt with as a private matter, not a matter for the workplace. That leads to a lot of anxiety and a lot of pressure.

The Newson health and education research found that nearly 20% of women have not gone for promotions because of the impact of their symptoms—they feel that they will be judged and they will not be supported because all of those things will be held against them. That is a



huge amount of talent and experience that is not being supported in the workplace.

BUPA did some research last year that showed that over an undisclosed period of time a million women had already left the workforce because of the lack of support for menopause in the workplace. There was also some more recent research that said in the future up to a million women could also be forced out of the labour market. We are talking about people also losing their livelihoods and when you think about the gender pay gap and a lot of the ways that the discrimination against women compounds in the workplace, these are all part of the same issue.

Q97 **Anum Qaisar:** You touched on flexible working. During the pandemic more and more people started working from home and now have flexible working opportunities. Do you know of any research or statistics that has looked at this particularly in relation to menopause?

Nikki Pound: Yes, actually just back in December one of our affiliates community did a survey of their members who had experienced, or were experiencing, menopause through the pandemic. They found that 67% of the women that they surveyed who had been able to work from home—which is obviously one type of flexible working—wanted to continue to do so as we emerge from the pandemic and go back to different working practices because of how much it supported them to manage their symptoms.

I think it is a really important piece of legislation that we can bring in, in terms of a day one right to flexible working, advertising for working as flexible for in-job adverts and offering it as a working adjustment for people if that is what they want because it will help them manage their symptoms. Again, we are all in agreement that there are overall policies that can support creating a better workplace environment, but what each woman will want will be different.

Q98 **Anum Qaisar:** Claire, if I could come to you. In terms of absences, in replacing employees there can also be a financial cost to businesses in the wider economy. A survey of 1,000 women by Health & Her in 2019 estimated that menopause costs the UK economy 14 million working days per year in terms of time spent alleviating those menopause symptoms. What would you argue are the benefits for businesses and employers of becoming more menopause-friendly?

Claire McCartney: Really good question. There are lots of benefits—firstly a really strong reputational benefit for those organisations that are creating menopause-friendly workplaces. We have heard this is the fastest growing demographic in the workplace. We are in an incredibly tight labour market at the moment; lots of organisations have acute skill shortages. This should be able to help organisations attract and retain predominantly female talent who are often at the peak of their knowledge, skills and experience. Creating a more open culture around this will mean that people will be able to talk about their symptoms and



get the support that they need rather than feeling that they need to have unexplained absences.

We conducted surveyed research in 2019 with over 1,000 women experiencing menopause transition. One of the really telling findings was that 30% of women surveyed said that they were unable to go into work because of their menopause symptoms, but just a quarter of that group actually felt able to tell their line manager the real reason for their absence. If we can create those open cultures, if we can train our line managers to have sensitive one-to-one conversations, then hopefully we will be avoiding a lot of that absence, which obviously costs organisations lots of money. Potentially we will also have less turnover within organisations, which certainly costs businesses lots of money. Equally, support will help women to thrive in the workplace, which is exactly what we want to be taking place.

Q99 **Anum Qaisar:** At the very start you mentioned that reputational impact on businesses. Do you have any evidence to support that in statistics?

Claire McCartney: I do not have any statistics around that, but it is really a no-brainer. If organisations are clearly supporting and saying that they are actively supporting those experiencing menopause transition, then people will feel more likely to want to join those types of organisations and also, really importantly, to stay within their organisations. If they have line managers that listen to them, to support them, then that is certainly going to be the case.

Q100 **Anum Qaisar:** A final question to Deborah. What feedback have you had from organisations that have used your training to improve the workplace for employees experiencing menopause and what impact have you found that has had across those organisations?

Deborah Garlick: Building on the last question and answers, personally we do not think an employer can say that they are an inclusive organisation if they do not take menopause into consideration. Certainly the vast majority, probably 99% of organisations that are doing this, do so because they care about the well-being of their colleagues and they want to help people thrive in the workplace. That is the type of employer we all want to work for, isn't it?

Certainly, I would say that if you are looking for a job, look for an employer that says that they are committed to being menopause-friendly. The benefits that they experience: certainly what we see is colleagues thanking their employers because this is all in the context of there being not just a lack of menopause information or menopause awareness in the workplace; it is actually a societal issue. The employers that step in and say, "This is something important to us and we want to help our colleagues"—that loyalty, the performance, makes them a great place to work.

Q101 **Jackie Doyle-Price:** A question for Deborah. You are absolutely right:



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this is a societal issue and actually society is pretty low down quite a steep learning curve on this in terms of doing it properly.

I am an employer; I want to be a good employer to the women in my workforce and I want to be a menopause-friendly employer and support women who are going through difficult symptoms—where do I start? What is the path in terms of actually building that workplace and that culture?

Deborah Garlick: It is a really good question because organisations are different and so are their approaches to this. I would say, for the majority of organisations: please do start with talking to your colleagues about it. What we see are some employers that will say, “We are going to run an event on menopause and see what the response is” and the response is often phenomenal. They are pushing on an open door to open up the conversations, but they do not necessarily know that until they start the conversation.

Other employers: we have seen an employer that wanted to train everybody within that organisation within a month. They wanted to do a really big campaign so they created their documents, their policy, the training, they got colleagues involved, they got line managers involved, and they all had a really big conversation about it. Bearing in mind that this is a cultural issue and we are talking about cultural changes, it is unlikely that it will be a one-hit wonder. This is not a campaign that you can just roll out there and think, “This is going to change hearts and minds.” It does take time.

The best employers put the frameworks in place. They might start smaller and continue listening to their colleagues, building on the experience of that and appreciating some people will be coming into this organisation already struggling. We were talking to one yesterday who has introduced menopause into their induction programme for new joiners because, “As soon as somebody joins the organisation we want them to know that if they are struggling with menopause, come and talk to us”.

Or there will be people coming to menopause for the very first time who may not have necessarily paid that much attention to the menopause stuff that was out there before but as they come closer and closer to it they might do. It is over a period of time, and we will often say, “You’ve got a policy; that is absolutely great. How are you going to bring that to life? How are you going to make sure your colleagues feel comfortable talking about it and will ask for the support?”

I would also add that all employers are different—there are different communities within employers and you have to take that into consideration. If you have office workers or factory floor or stores or for that matter communities who, from a cultural perspective, find it difficult to talk about menopause, you need to build that into your programme as well.



I am sure we will come on to diversity and inclusion later, but it is having all of the raft in place. The more you involve your employees in building your plan, or the passionate individuals that will come forward and say, "I will share my story, I would like to be part of this, I will help get this off the ground", the more difference you will see.

Q102 **Jackie Doyle-Price:** Presumably, that is also the employer helping employees look after their own well-being because we are, again, back to the societal change—there are still a lot of women are suffering adverse symptoms of menopause that do not necessarily realise that is what it is. Just a general openness within the workplace will help women look after themselves.

Deborah Garlick: Absolutely, and thinking about roles and responsibilities, it is the organisation's job to create that culture, to put the support in place.

Jackie Doyle-Price: It is occupational health.

Deborah Garlick: I have a responsibility as an individual to look after my well-being, but I really appreciate the fact that employers are stepping in. It is very often the basic facts—ages, stages, symptoms and solutions—that people do not understand. The age is still a little bit of a myth; many of us seem to think it is higher than it is, so appreciating that this is what I could experience and this is when it could happen for me takes some of the mystery out of it.

Q103 **Jackie Doyle-Price:** Claire, do you have any advice as to where an employer starts?

Claire McCartney: It does not need to be a scary prospect for employers, and I think that all employers can do something, whether they are large or small. It does not have to be cost intensive or resource intensive either.

Within our guidance we recommend three pillars. The first one is about opening up the culture, just as Deborah has been saying—providing opportunities for people to talk about the menopause. The second area is just having that supportive framework in place. It could be a specific menopause policy, but the menopause could be referenced in some of your other policies, you could have specific guidance, advice. But it is really important that employees know where to go to get that support, and that that message is really clear.

The third area, which we have all spoken about before, is developing line managers' understanding and awareness. Beyond that even, it is about good people management skills. It is about developing our line managers to be able to have sensitive one-to-one conversations. That is going to be beneficial for everyone, particularly anyone suffering from any health condition but including those with menopause symptoms, because creating that open culture will mean that they are able to get the support that they really need.



Q104 **Jackie Doyle-Price:** Deborah, can you perhaps tell us some of the more innovative things you have seen employers do in the quest to be menopause-friendly?

Deborah Garlick: I have already mentioned the desk fans, and that was innovative—getting rid of all of the process that was stopping people. There are some of the things that individuals do in organisations as part of their campaign; this again comes back to listening to what is getting in the way for your colleagues.

We were working with one of the big supermarkets and the project team came up with, “These are what we think are the reasonable adjustments”. But when we started to engage locally in stores, they were coming up with things like, “In our store, those experiencing hot flushes can replenish the freezer aisle.” We would never have come up with that one. The organisation did follow it up actually, with one of the colleagues wearing their new menopause-friendly shirt. They sent us a cracking photograph with the caption “You can put the heating on now.” So the colleagues were coming up with their own ideas.

Similarly with line manager sessions. I will be really clear—line managers can often be very frightened about talking about menopause; they do not want to get it wrong. It is not just lack of knowledge and confidence. But in one of the sessions that was run by a HR team, they got the line managers into the training and the line managers doubled the number of reasonable adjustments that they thought they could offer, because they were thinking about their own experience.

Claire mentioned lack of cost. These programmes very rarely cost a lot of money. At the Queen Elizabeth Hospital in King's Lynn, the menopause champions wear T-shirts that say, “Ask me about the menopause”. The same goes for South Tees, and that is great for raising awareness. It is good for colleagues and patients. One of the menopause champions said that they were stopped on the way home from work as well.

Those things are very innovative: tiny little things. One that I know cost £100 to do strikes me as innovative: Burness Paull did a pass-it-on along with Kingsmill Hospital, where they just bought 10 books about the menopause. There was a register and the idea was that somebody said, “I want to borrow this book”. They read it and they looked to who was next on the list and they passed the book on and had a conversation about it. That was really great for understanding that you are not on your own, and there were these spontaneous conversations that would not have happened before. That was £100 and a little bit of admin. We are seeing a lot of those sort of innovative ideas from lots of passionate champions. They are great for coming up with good ideas on what is going to work for us.

Q105 **Jackie Doyle-Price:** I think you are right; people are too scared more than anything else. But as you say, it can actually be value for money if you are stopping absence by making reasonable steps. Claire, you had



your hand up.

Claire McCartney: I agree with absolutely everything that Deborah said and it was really interesting to hear all of those examples, so thank you, Deborah. Another perspective is about organisations developing small inclusivity signals. We might go on to talk about avoiding stigmatisation of women experiencing menopause transition, but I am thinking very broadly around what adjustments can we make in the workplace that actually are going to be beneficial for everyone, including those experiencing menopause transition. That could be reviewing the temperature in the room if people are in the physical workspace, ensuring that there are more staggered breaks, access to quality restrooms, access to water or adjustments to uniforms. Everyone having that in mind can help to create a better environment for everyone, and perhaps take away that particular spotlight on those experiencing menopause transition.

Q106 **Jackie Doyle-Price:** Nikki, earlier you mentioned that we lose a million women from the workforce. It occurred to me as you were making those comments that in recent decades we have spent a lot of effort trying to get women employed into what were traditionally male occupations—I am thinking about engineering or working environments that still remain very male, actually. Is there any evidence to suggest that it is exactly those kind of people who are leaving the workforce, or is there no pattern?

Nikki Pound: I would have to go away and look at that in terms of what the data is, but because of the fact that it is a million women, I think it is everywhere. Certainly when we have consulted our affiliates on this we get responses from right across the workforce.

In our consultation response, we included evidence from USDAW, the retail union, particularly because they have done a more recent survey of their community, which covers sectors from banking through to steel—it is across the board.

We have definitely found from affiliates where women are working in more male dominated sectors, such as transport for example, that there are maybe not additional barriers, but certainly things like a lack of consideration for really basic things that you might think should be commonplace in most workplaces that have not been considered.

Jackie Doyle-Price: That is a nice way of putting it.

Nikki Pound: That does speak to a lack of awareness in some of those industries, but the experiences that women have, and the discrimination that they face, is across the board. That is certainly borne out by the general figures and the breadth of experience that we get told about through our affiliates.

Q107 **Kate Osborne:** Good afternoon, everyone. You touched on the importance of inclusion, so I just wanted to ask a couple of questions around that if I may. We have heard that there are specific challenges in



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the workplace for particular groups of employees experiencing menopause—for example, LGBT+ people.

Nikki, the submission from the TUC said that “Trans, intersex and nonbinary people experiencing menopause symptoms may also face difficulties in getting their symptoms taken seriously at work. Concerns about stigma and prejudice may present barriers for them in raising these difficulties, particularly if they have not disclosed their trans status.” How would you advise employers to ensure that any guidance or policies are inclusive and supportive of these groups?

Nikki Pound: It is a lot of what we have already been talking about, actually. In terms of when employers are making commitments through a policy or a framework—however that might be—it is about highlighting what the menopause is, who it affects across the board, how people may have different identities but still be affected by it: all the different ways in which it can affect different groups and how different groups may face other barriers because of a fear of discrimination on the basis of their gender identity.

I know you have heard in previous sessions from, for example, Karen Arthur from Menopause Whilst Black, who talks about the racism that many women face in the workplace, which compounds their experience as well when they are seeking help for menopause. I think it is about highlighting what menopause is, all the different people it affects and how.

Again, back to the line manager training, I think it is about having really well-trained line managers who have good people skills and can do that one-to-one engagement and understand how to have conversations sensitively and compassionately, and keeping that space and culture open. Also, really practical things like having been trained in how to do gender-sensitive risk assessments and how to bring in all those intersecting characteristics into those processes and knowing how to do it.

Q108 **Kate Osborne:** Deborah, can ask you the same question?

Deborah Garlick: I think there are different things around diversity and inclusion within the organisation for menopause. First of all, we often see people saying that menopause affects half of the population. It does not; it affects us all. It affects half of us first hand and the other half of us at some time through our relationships, whether that is with a partner, family member, friend or colleague. There are lots of different ways to look at this.

You mentioned communities who may struggle more, and I would ask what content are you including? Are you including LGBTQ? Are you looking at same-sex relationships? Some organisations will include andropause as well as menopause in their policies, or other life stages. That is absolutely key.



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For me, another one is in terms of language—making sure the language that you use is fully inclusive. That is for everyone; plain English works really well for everyone in terms of how simple it is. You can also make sure that it is written in the first or second person. This is not just for menopause; this is for other policies as well. This is a trend. It makes it warmer. The “I”, “you”, “we” naturally de-genders policies and guidance documents and, therefore, makes it more accessible to all.

While we are on language, one of the things that we have experienced in the last six years is that—because every employer is going to have to look at all of its communities—for so many, English may not be the first language. We have seen some great examples where employers have appreciated that certain communities, maybe the BAME communities, prefer to read or hear about menopause in their own language.

One recent example was where those individuals said, “I do not feel I am in a safe space if there are men in the room. I need this to be women only,” and they had a translator there. That was fabulous. It is not just thinking about communities like that, but also thinking about how you reach people on your factory floor who may not have access to your intranet or an app that you give. How do you reach those people so you are making sure that you are shining the light on absolutely everything?

One thing that I do regularly remind people of is that menopause is a misunderstood subject. It is starting to change now, but think about visual imagery in this as well. Is it inclusive? Do you have different images? One I saw recently was of a woman in her 80s walking a dog. To me that said, “This is why we think the age of menopause is so much older than it is.”

I will hand over to Claire because one of the extra things is those with hidden disabilities who we need to consider around ability to access the information. We can educate, but we have to make sure people can access the information in a way that is right for them. Sorry, Claire. I always ask Claire about this particular subject.

Claire McCartney: Thanks, Deborah. Just briefly, I completely agree with what Deborah is saying in terms of inclusive language, that nobody feels side-lined, and that everyone knows how to get the access that they need. I think we need to recognise that the menopause will impact upon women at different ages, and not to make assumptions there; those from different ethnic backgrounds; those with disabilities—as Deborah says—which will be visible and nonvisible; and trans and nonbinary employees. It is really important that people talk to individuals who are experiencing the menopause. They are going to be experiencing it in different ways, so take the lead from the individual. I also wanted to raise a point around the cultural perspective as well.

We know that within some cultures it can be viewed as inappropriate or very uncomfortable to talk about the menopause, so I just want to say



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that no-one should feel forced to talk about the menopause if they do not want to. We know the symptoms can be highly personal.

For us, it is about creating an organisational culture and the onus should be on the organisation to create an open and supportive culture should people want to talk about it. The other thing—which Deborah also touched upon—that I think is really important is making the systems easy for people to get support, taking away the red tape so that people do not have to necessarily out themselves in order to get that support. It should be really easy to be able to get that. Those are just my observations.

Q109 **Kate Osborne:** Nikki, did you want to come in and add anything?

Nikki Pound: Yeah, just to say I completely agree with that. I think something that was also touched on is in terms of the response as well. Once people have had those conversations with a menopause champion or their line manager it is about making sure that the support that you offer is right for that person and it is not a one-size-fits-all approach because everybody will want something that suits them and that works for their symptoms and their situation.

Again, that is where you can really make it inclusive by making sure that your line managers and the culture that you create respond to the individual's needs, but in a culture that is collective, and that is about creating a good workplace environment. I think it is right that we should not be forcing a particular approach or a particular way of managing things on anyone. It should be led by them.

Chair: Thank you very much. Can I thank all three of our panellists for the evidence that you have given this afternoon? If there is anything at any point you would like to add that you feel we have not asked you or you want to make us aware of then please do feel free to send it in to us in writing. I am going to suspend the meeting for five minutes whilst we put the new panel into the hotseat.