

The menopause: a looming disability for half of the population

*Lack of confidence in managing menopausal symptoms in the workplace has accounted for the intent to resign, abandoned pursuits of promotional opportunities, and the avoidance of new project tenders. Women, trans, and non-binary people experiencing the menopause at work are often at the peak of their skills, experience, and careers, so there is a strong business case for supporting them through the process. **Odessa Hamilton** and **Gina Osman** suggest that companies make reasonable adjustments that are, in many ways, simple, of negligible cost and non-imposing.*

Organisational policy is founded on a thinly disguised misogyny, such that it ignores the biological processes experienced by over half of the population ([Karin, 2019](#)). The constriction or dilation of blood vessels that present in the sudden overwhelming sensation of heat, heart palpitations, hypertension, hypotension, dysfunctional sleep, clouded concentration, unusual indecision, diminished confidence, and unanticipated feelings of panic or anxiety. These are among a constellation of symptoms associated with the menopause; a biological process recognised widely for its vasomotor symptomatology (e.g., hot flashes).

Within the UK alone, approximately 3.5 million women are at risk of menopausal symptoms, and three-quarters of them form part of the UK workforce ([Brewis et al., 2017](#)). It is equally important to acknowledge that while it is experienced predominantly in women, trans and non-binary people are also impacted by these issues; constituting a problematic source of gendered inequalities at work ([Sang et al., 2021](#)).

The biology

Menstruation is a biological cyclic process regulated by hormones. As women age, an egg will not be released during some cycles, which causes hormone levels, such as oestrogen and progesterone, to fluctuate. These fluctuations trigger the perimenopause, a stage that proceeds the menopause. Thus, the menopause is frequently defined as 'the last period'. It starts a process of depletion in oestrogen levels that can last up to thirty years transitioning into post-menopause. Although the age range can vary greatly between individuals, age at natural menopause across different sociodemographic groups spans 47-53 years, with an average age onset of 46 years ([Briggs, 2021](#)).

However, one in 10 women have premature or early onset with no underlying medical reason. Despite popular belief, the menopause has been experienced by women as young as 17 ([Hickey et al., 2017](#)). We cannot, therefore, predict when it will start, its duration or its severity, but it is an inevitable process of ageing in women, trans and non-binary people.

All-cause mortality

Along with some of the earlier mentioned symptomatology, the menopause is associated with low energy, an overall feeling of malaise and pains, along with a more severe risk of all-cause mortality (that is, death from any cause), cardiovascular disease, type 2 diabetes, osteoporosis, and, thus, fracture. Equally harmful are the potential cognitive psychological impacts, with increased risk of depression, low mood, irritability, anxiety, panic attacks, reduced concentration, and lapses in memory or recall difficulties ([Hardy et al., 2018](#); [Mirsha et al., 2019](#)). While some might experience physical symptoms, others might suffer cognitively or psychologically – many could experience both, whereas few may experience neither, at least to any substantive degree. It is difficult to set a barometer of experiences because the menopause presents in a number of ways, varying in levels of severity, with unpredictable temporal ranges.

The perception of control and idiosyncratic experiences of stress can additionally influence the severity of symptoms. For these aforementioned reasons, and the inevitable symptomology, Davies v Scottish Courts and Tribunals Service confirmed that menopausal symptoms can qualify under the protected characteristic of a disability under the Equality Act 2010 ([HM Courts & Tribunals Service and Employment Tribunal, 2018](#)). Although the menopause and perimenopause are not explicitly protected under this Act, unfair treatment for these reasons can be interpreted as discrimination by sex, disability or even age ([Equality Act 2010](#)).

Negative self-identity

A recent study conducted by [Steffan \(2021\)](#) explored differential experiences, along with how women construct their work identity around their experiences of the menopause at work. Women who did not fully understand their menopausal transition engaged in negative, self-deprecating discourse about their menopausal experiences. Moreover, sensitivities around how others perceived them during this stage in their life, together with their own maladjustment, created an overall negative self-identity. In numerous cases menopausal onset was uncertain, women had shared a disconnect with their body, and an overall feeling of unpredictability, which left them feeling that there was something wrong with them personally. In many ways, the menopause affects confidence but not ability. Yet this lack of confidence alone could curtail a promising career ([The Fawcett Society 2020](#)).

Moreover, when symptoms are believed to be embarrassing or shameful, the stigma contributes toward gendered ageism at work ([Grandey et al., 2020](#)). This is particularly troubling, because women, trans and non-binary people are already more likely to experience sexism, ageism, social and economic consequences, higher social marginalisation and overall lower self-esteem than their counterparts ([Sang et al., 2021](#); [Steffan, 2021](#)). Experiences of exclusion or discrimination may also intensify for those on the intersect of other forms of discrimination, particularly for those with pre-existing conditions or disabilities, which can impact motivation, performance, and overall quality of life. This is a noteworthy concern, given that ~657 million women across the globe are aged 45–59, with approximately half contributing to the labour market during their menopausal years ([Rees et al., 2019](#)). Regrettably, the numbers on the trans and non-binary groups are less clear.

Organisational impacts

Those experiencing the menopause at work are often at the peak of their skills, experience, and careers, so for sake of their wellbeing, retention, talent attraction, and the organisation's overall performance, there is a strong business case for supporting them through the process, particularly at a time of national recovery ([Knox, 2019](#)). Within an occupational context, a lack of confidence in managing menopausal symptoms has accounted for an intent to resign, abandoned pursuits of promotional opportunities, and the avoidance of new project tenders ([Steffan, 2021](#)). The menopause can also translate into the workplace through absence and other economic metrics ([Brewis et al., 2017](#)), affecting both life and work outcomes ([Grandey, Gabriel & King, 2020](#)). Without adjustments, productivity, for example, can fall by up to 60% in those experiencing the classic vasomotor symptoms alone. In monetary terms, this equates to at least £1,500 per person each year ([Beck, Davies & Mathes 2017](#)).

According to research undertaken by the [CIPD \(2020\)](#), 65% of women reported symptoms that affected their concentration, 58% experienced heightened stress, and 52% felt less patient. The [Standard Chartered and Financial Services Skills Commission \(2021\)](#) found that a quarter of those who menstruate consider leaving the workplace due to the associated stigma, while only 22% disclose menopausal difficulties to their managers. In a small online poll, we found that 27% of respondents said that they would hide difficult experiences with the menopause at work, with 36% saying it depends on the company culture. 128,000 women, or 1 in 10 employees, working in the financial services sector are currently going through the menopause. For almost half of employees experiencing the menopause, it makes them less likely to want to progress in their role. For a quarter it is the reason they are more likely to retire early.

Intention to leave is clearly a problem because recruitment is far more costly than workplace adjustments. The cost of turnover, finding a suitable replacement, and new-starter training, is estimated at as much as 33% of an annual salary ([Otto, 2017](#)). An employee who earns £26,000, for instance, would cost an organisation over £34,500 if they were unable to retain them. These recruitment and training costs outweigh the likely cost of adjustments ([Brewis et al., 2017](#)), which could be as low as £20. Organisations should consider these impacts to offer better protection to individuals from discriminatory practices at work, to reduce unnecessary financial spend, and also for reasons of risk management given the rise in menopause-related tribunal cases.

Reasonable adjustments

Ignoring menopausal issues can be costly to organisations from an equity and reputation standpoint. Such costs can be negated through a number of impactful policy changes and adjustments that are, in many ways, simple, of negligible cost and non-imposing. Risk assessments have exposed a relationship between workplace design and the severity of symptoms. In addition, poor workplace design, such as a hot work environment, coupled with the loss of oestrogen as a result of the menopause, can further increase other health risks, such as cardiovascular disease ([Carter et al, 2021](#)).

[Hickey et al., 2017](#) suggests several interventions to alleviate symptoms, including regulating building temperature control, repositioning desk assignment for ventilation, the provision of desk fans, and delivering programmes to enhance physical activity. As it pertains to uniforms, ensuring they are thermally comfortable will reduce the severity of hot flushes ([Rees et.al, 2021](#)), as will dress codes that are flexible. Latest recommendations encourage employees to take breaks to manage symptoms, especially for those in customer-facing roles.

Flexible working arrangements, hybrid working, working time autonomy, and working from home should all be permitted where possible ([Jack et. al, 2016](#)). Autonomy over work and working times will improve absence management, since working time lost during symptomatic phases can be independently rescheduled. An overall assessment of working patterns and the occupational environment, with the impacts of menopausal symptoms is encouraged to find an optimal working arrangement that is mutually convenient for organisations and employees alike. Furthermore, encouraging employees to participate in policy design is well advised ([Rees et.al, 2021](#)).

There are various other cost-effective, pragmatic changes, such as the development of an established list of external support services for self-referral, and general information dissemination to increase awareness. It has further been proposed that menopausal-related health care should be covered by health insurers (where provided), and menopause-related absence should be recorded separately from other absences on an overall attendance record.

Finally, basic training, internally delivered or outsourced, should be provided to all line managers to understand symptoms, stages, and the implications of menopause, together with legislation around it. This does not mean that managers are expected to become experts in the menopause, but rather that they will be able to comprehend its basic premise and the potential repercussions for the employee, themselves, and the organisation as a whole. Adjusting the workplace will ultimately impact all employees positively resulting in higher quality of life, increased engagement and performance ([Rees et.al, 2021](#)). Since the menopause is experienced exclusively by women, trans and non-binary people, not making some of these most basic accommodations could be construed as discriminatory and could result in preventable costs to the organisation. Putting the menopause on the agenda in the workplace means retaining irreplaceable talent and experience. An inclusive workplace will have happier, healthier employees, which ultimately means they will be more engaged and productive.



Notes:

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