

Institution: University of Nottingham		
Unit of Assessment: UoA4		
Title of case study: Tackling the taboo and lack of awareness about menopause and work for mid-life women		
Period when the underpinning research was undertaken: 2013-2019		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s): Professor Amanda Griffiths	Role(s) (e.g. job title): Professor of Occupational Health Psychology	Period(s) employed by submitting HEI: 1992 - present
Period when the claimed impact occurred: 1 st August 2013-2020		
Is this case study continued from a case study submitted in 2014? No		
<p>1. Summary of the impact</p> <p>Research led by Professor Amanda Griffiths has been critical in addressing stigma for an issue that directly affects over half the population. It has transformed lives of menopausal working women in many organisations through provision of the evidence and development of guidelines for national and international bodies. Professor Griffiths led the first large-scale study of women's experiences of menopause at work, the evidence-based recommendations developed by Professor Griffiths were part of the United Kingdom's (UK) Chief Medical Officer report 2015 which focussed on the health of women and associated taboos. Over a decade of research at the University of Nottingham has formed the basis of three influential sets of guidelines about menopause at work for employers, which have been adopted by organisations internationally including Unison and other British trade unions, the National Health Service (NHS), BP International, and employers in Australia.</p>		
<p>2. Underpinning research</p> <p>In the UK, mid-life women increasingly participate in the labour force; from 1993 records show their employment rates have been steadily increasing. There are currently 4,460,000 working women aged 50-64. Menopause is a natural event for all women, a period of hormonal change lasting between 2 and 10 years (average 4 years). This occurs at an average age of 51. For many, there are negative impacts on quality of life. Symptoms reported include menstrual irregularities, hot flushes, sleep disruption, fatigue, mood disturbance, bladder irritability and general malaise. The consensus is that 50% of women experience problematic menopausal symptoms. But when the University of Nottingham's research began, there was little published evidence about their impact on working life. Anecdotal evidence suggested that women were experiencing difficulties that significantly impacted on their quality of life in the workplace, and some permanently exited the labour force because of their symptoms. Some experienced performance-related disciplinary procedures where menopausal symptoms emerged as contributors at late stages in proceedings. A survey of health and safety representatives by the Trades Union Congress found that women reported being ridiculed about menopause symptoms. Employers have a duty to accommodate health conditions and provide adjustments where reasonably practicable. However, where topics are taboo or awareness is low, employees do not disclose problems, support is not available, and they suffer in silence.</p> <p>Professor Amanda Griffiths at the University of Nottingham conducted an unpublished exploratory study with women police officers who reported menopause-related problems that made working life challenging. The majority dared not disclose difficulties or ask for support. Griffiths decided to investigate the issue in a large, systematic study with women in professional, managerial and administrative occupations in ten organisations. This was the first large-scale study of women's experiences of working through menopausal transition in the UK, published in 2013 [1]. Griffiths explored: (i) Does menopause affect women at work, and if so, how? (ii) What support do women need to work normally and productively? In this study, 61 semi-structured interviews informed the design of a bespoke electronic questionnaire completed by 896 women.</p> <p>Findings highlighted that the top five menopausal symptoms negatively impacting working life were psychological: poor concentration, tiredness, poor memory, low mood and decreased confidence. For some, hot flushes were embarrassing and difficult to manage and 40% believed that their work performance had been adversely affected. Others confessed working exceptionally hard to compensate for problematic symptoms such that their performance was</p>		

not ostensibly affected. Equally worrying was that 75% of women were unwilling to disclose menopause-related health problems that affected them at work to their line managers. The majority dared not admit menopause as a reason for absence. Women suggested that the most important change for them would be greater awareness among managers about menopause as a possible occupational health issue. Other suggested improvements included more information about menopause, flexible working hours, sources of support at work and attention to workplace temperature and ventilation. International replications of Griffiths' study report similar findings.

Subsequent studies by Griffiths and colleagues, funded by Wellbeing of Women, were designed to build upon these suggestions. They revealed in more detail what support women require. In **2017**, an online questionnaire was used to collect qualitative data in a cross-sectional study. This highlighted the need for supportive policies, awareness-raising and managers trained to conduct sensitive conversations [2]. Findings from a study in **2019** using semi-structured interviews revealed the need for managers to be both knowledgeable and understanding, thus empowering women to disclose problems and discuss solutions that would help them continue to work normally. Women suggested that a nominated female lead from whom they could seek advice would be beneficial [3]. This study also uncovered specific barriers to disclosing menopause-related difficulties such as male-dominated workplaces, male line managers, embarrassment, fear of negative responses to requests for support, stigma and discrimination.

Griffiths' research highlighted the need to raise awareness about menopause as a potential challenge for working women's wellbeing, their quality of life and productivity, to challenge the taboo, empowering women to seek support and their managers to provide it. Recommendations included the development of evidence-based guidance to inform organisational policy.

3. References to the research

[1] Griffiths A, MacLennan S & Hassard J, 2013. Menopause and work: An electronic survey of employee attitudes in the UK. *Maturitas: An International Journal of Midlife Health and Beyond*, 76, 155-159. DOI: [10.1016/j.maturitas.2013.07.005](https://doi.org/10.1016/j.maturitas.2013.07.005)

[2] Hardy C, Griffiths A, & Hunter M, 2017. What do working menopausal women want? A qualitative investigation into women's perspectives on employer and line manager support. *Maturitas: An International Journal of Midlife Health and Beyond*, 101, 37-41. DOI: [10.1016/j.maturitas.2017.04.011](https://doi.org/10.1016/j.maturitas.2017.04.011)

[3] Hardy C, Griffiths A, Thorne E & Hunter M. 2019. Tackling the taboo in the UK: talking menopause-related problems at work. *Int J of Workplace Health Management*, 12, 28-38. DOI: [10.1108/IJWHM-03-2018-0035](https://doi.org/10.1108/IJWHM-03-2018-0035)

Grants: Griffiths A & Cox S, 'An investigation of working women's experience of the menopause', British Occupational Health Research Foundation, University of Nottingham, 2006-2009, £43,062. Hunter M & Griffiths A, 'Menopause at work: Development of brief interventions to improve the quality of life of working menopausal women', Wellbeing of Women, KCL, 2015-2018, £170,239.

4. Details of the impact

The pathway to impact started with Griffiths' Nottingham research which formed the basis of the development of three influential sets of guidelines about menopause and work, published by the British Occupational Health Research Foundation, European Menopause and Andropause Society, and Faculty of Occupational Medicine, Royal College of Physicians. These have influenced policy and practice in many organisations and are described below. Between **2011-2020** Griffiths delivered over 30 invited presentations on her research and guidance about supporting working women through menopausal transition to user groups, (e.g., *Trades Union Congress, Royal College of Nursing, Annual Occupational Health Conference*). Griffiths has been interviewed on the topic on 15 occasions by BBC Radio and quoted on the BBC News website, newspapers, and in magazines and publications for practitioners (e.g., *Guardian, Figaro, Good Housekeeping, Occupational Health at Work, Community Practitioner*).

Development of menopause guidelines:

Griffiths developed the **first evidence-based guidance** on the menopause and work in the UK based on her research funded by the British Occupational Health Research Foundation (BOHRF) [A]. This free, on-line guide for managers was published by BOHRF in 2010. The

Menopause Lead for Nottinghamshire Police [B] reported that Griffiths' research and BOHRF guidance "*hit the nail on the head. It had everything in there that our organisation and others should have probably picked up a few years previously*". In 2018, a review of published guidelines about menopause and work in the UK [C], demonstrated that the number of published guidelines about menopause increased incrementally after Griffiths' BOHRF guidelines were published.

Griffiths led a consortium of leading menopause researchers from 11 countries to publish evidence-based European guidance calling for greater awareness by employers of menopause at work, together with sensitive and flexible management to support women who had problematic menopausal symptoms [D]. This guidance, published in 2016, was commissioned by the European Menopause and Andropause Society (EMAS), a major organisation promoting health in mid-life and later life, with worldwide membership and over 40 affiliated societies. All EMAS congresses have since incorporated a session dedicated to menopause and work.

As a direct result of her 2013 paper [1], the UK's Chief Medical Officer (CMO), Professor Dame Sally Davies, invited Griffiths to author a chapter about menopause for the Annual CMO Report 2015, which focussed on the health of women and associated taboos [E]. The CMO spoke on Radio 5 and BBC Breakfast to launch her report and highlighted Griffiths' recommendations about menopause to managers. She was quoted in several newspapers, for example (The Sun, 2015), under the headline '*Britain's Top Doc: Women must be able to talk menopause with bosses*', saying: "*I want to encourage managers to ensure working women feel as comfortable discussing menopausal symptoms as they would any other issues affecting them in the workplace. This will help to ensure that the talent and potential of all women can be realised to the full.*" The CMO concluded in her Annual Report, "*I recommend that the Faculty of Occupational Medicine co-ordinates the production of evidence-based guidelines for employers to ensure that they provide appropriate advice and support to women experiencing disabling symptoms while going through the menopause.*" (Recommendation 14) [E]. The President of the Faculty of Occupational Medicine (FOM), Royal College of Physicians invited Griffiths to co-author these guidelines. They were launched in 2016 with considerable national peak time TV and radio coverage and interviews with the FOM President [F]. The guidelines have been visited on the FOM website (24 Nov 2016 – 07 Dec 2020) on 1,612,096 occasions [G]. The FOM guidelines are now recommended by many major organisations: for example, [NHS Employers](#), the [Chartered Institute for Personnel and Development](#) and the [British Menopause Society](#). The past President of FOM considers that "*the guidance has been a critical step in addressing stigma for an issue that affects over half the population directly and the whole population indirectly*" [F]. To date, just in the UK and Australia, 19 organisations and unions are known to have produced guidance about menopause that are based on, or reference Griffiths' research or guidelines [H].

Development of menopause guidelines by other organisations:

Griffiths' research and guidelines have been used by many organisations as a foundation for their guidance and policies. The [Royal College of Nursing](#) guidance in 2019, for example, references Griffiths' research [1], chapter in the CMO Report [E] and BOHRF guidance [A]. They include Griffiths' recommendations to promote greater awareness of managers about the menopause as a possible occupational health issue for women, increase flexibility of working hours and working arrangements, improve access to informal and formal sources of support and consider improvements in workplace temperature and ventilation. Examples of some other organisations that refer to Griffiths' work (UNISON, Trades Union Congress, Royal College of Midwives, Nottinghamshire Police, BP International) are provided below. These developments, together with testimonials, demonstrate the significance and reach of Griffiths' work.

UNISON:

Unison is the UK's largest union, with 1,300,000 members, over 27,800 representatives and stewards, based in 3,800 organisations. Most members are women. In June 2013, UNISON used Griffiths' BOHRF guidelines to create their own guidelines for union representatives about supporting women through the menopause [I]. Since the launch of the guidelines, 1,191 hard

copies of the UNISON menopause guidelines have been ordered by UNISON branches and there has been a total of 1,648 downloads of the UNISON menopause guidelines from their website (Dec 2020) [J]. Training programmes for UNISON representatives and ‘menopause cafés’ (informal support groups) were developed [J]. A UNISON representative reports how the guidelines raised awareness and were helpful for representatives, women and managers [K]. They gave an example: *“We found that the guidelines not only enabled us to robustly support our member, they also afforded her ‘authenticity and ‘validation’ for the very real symptoms she was suffering from, but which her manager had hitherto persistently ignored and, astonishingly, sometimes reviled. [After using the guidelines] there was a sea change in the manager’s attitude. They at last, began to listen, to acknowledge and to understand. Our member’s sense of relief that she was finally actually being believed was inestimable.”*

Trade Union Congress (TUC):

The TUC, a national trade union federation with 48 affiliated unions with 5,600,000 members, used Griffiths’ BOHRF guidelines [A] to create their own guidelines in **November 2013** [L]. TUC Wales, representing 78,000 employees, developed a toolkit for their trade union representatives on how to support women which included the BOHRF recommendations. They used Griffiths’ EMAS recommendations [D] to develop the first NHS Wales Menopause policy [M].

Royal College of Midwives (RCM):

The RCM has 48,000 members, 99% of which are women, with one third in their 50s-60s. They used Griffiths’ BOHRF guidelines to create their own menopause guidance in **2015**. The RCM’s Employment Relations Advisor reports that the BOHRF guidance was *“incredibly helpful”* in the development of their guidance [N]. Workshops on supporting women at work during menopause, based on these guidelines, have been run for over 100 RCM representatives. The guidance has proved helpful to *“start a conversation”* with an affected member of staff. The RCM state that, *“The guidelines have supported **awareness raising and facilitated open discussion on a previously taboo subject. Since the publication of the guidance, the menopause at work has become much more widely discussed in the NHS and across trade unions**”* [N]. Feedback from managers reveals the guidance has been beneficial in helping them unpack performance management issues and has *“helped them to recognise that when they are managing sickness and /or performance, that menopause symptoms could be part/all of the issue”* [N].

Evaluation of menopause guidance and policy by Nottinghamshire Police:

Griffiths was invited to advise Nottinghamshire Police on their menopause policy and guidance, the first of their kind in the Police Service, implemented in **2017**. In an evaluation in **2020**, police employees viewed the policy and guidance positively, saying they had raised awareness and tackled taboos about menopause [O]. Examples of their views about its impact are:

- *“I think it was a word nobody talked about. It certainly **brought it out in the open**. I know now that people can **openly talk about menopause**.”* (Female employee).
- *“I think women feel probably more **confident to go to a line manager, a supervisor, and talk about [menopause]**...And you even hear it now, walking around a building, ‘Oh I’m having a hot flush’. So definitely I think the **culture is changing**.”* (Female Employee).
- *“I think there’s something to be said about just saying, ‘This is the menopause... These are the kind of symptoms women can go through and what can you do to **support somebody who should be a valued member of your staff.**’ It’s about **getting the best from them**”* (Male Manager).

The Menopause Lead from Nottinghamshire Police confirmed that the menopause policy has also contributed to improvements in the physical work environment such as cold fresh water in all stations, desk fans, and options in uniforms to accommodate hot flushes. It has helped employees take the menopause more seriously such that it is less commonly regarded as a topic for jokes. People can now discuss problems more easily. She is aware of examples of adjustments such as flexible working and shift changes that have *“helped women stay in jobs that they love that they might otherwise have left”* [B].

Examples of international impact

BP International:

The Vice President for Health and Chief Medical Officer at BP International consulted Griffiths on the development of BP's guidance and practices around menopause [F]. BP have over 70,000 employees in more than 65 countries. Over 50% are female. The FOM guidelines were incorporated into BP's global guidelines for managers and staff in 2020. BP communications promoted them by video and a Yammer channel (674 people viewed the guidelines on the launch post). They have an active menopause support group, regular communications and webinars. One employee commented "*Wow... this is so refreshing. The video is brilliant! We need to continue to have these kinds of conversations and remove the stigma.*" The VP for Health at BP considers that "*Professor Griffiths' work has played a significant role in this change and to the topic being far less a 'taboo' than it was ten years ago*" [F].

Australia:

In Australia in 2019 Griffiths' research and guidelines were "*central references*" used by the Associate Dean for Research Impact and team at Monash Business School, Monash University to inform the development of an online Menopause Information Pack for Organisations (MIPO) [P]. This is a free, on-line resource to support organisations in making their workplaces supportive and enabling environments for menopausal women. MIPO has been promoted through media engagement (national TV and radio in Australia), women's health bodies (e.g., Australasian Menopause Society) and organisational presentations (e.g., Commonwealth Bank of Australia, Australian Nursing and Midwifery Federation). The MIPO website forms a key part of the training programme for managers, rolled out over a period of 12 months for 91 managers. They confirm Griffiths' "*research and recommendations have been extremely useful... shaping our menopause training sessions for various organisations. Her contributions have helped us raise awareness of the menopause at work and train managers in supporting women*" [P].

5. Sources to corroborate the impact

[A] British Occupational Health Research Foundation (BOHRF), 2010, *Work and the Menopause – A Guide for Managers*. British Occupational Health Research Foundation. https://bohrf.org.uk/downloads/Work_and_the_Menopause-A_Guide_for_Managers.pdf

[B] Testimonial from Menopause Lead, Nottinghamshire Police, November 2020.

[C] Hardy C, Hunter M & Griffiths A, 2018. Menopause and work: an overview of UK guidance. *Occupational Medicine*. 68(9), 580-586. DOI: [10.1093/occmed/kqy134](https://doi.org/10.1093/occmed/kqy134)

[D] Griffiths A et al, 2016. EMAS recommendations for conditions in the workplace for menopausal women. *Maturitas*, 85, 79-81. DOI: [10.1016/j.maturitas.2015.12.005](https://doi.org/10.1016/j.maturitas.2015.12.005)

[E] Griffiths A & Hunter M 2015. Psychosocial factors and the menopause: The impact of the menopause on personal and working life. In: SC Davies, Ed., *Annual Report of the Chief Medical Officer 2014, The Health of 51%*. London: Department of Health, 109-120.

[F] Testimonial from Vice President for Health, BP International and past President of the Faculty of Occupational Medicine (Royal College of Physicians), December 2020.

[G] Email from Faculty of Occupational Medicine's Communications Manager, December 2020.

[H] Organisations' and trades unions' guidance referencing Griffiths' research and guidelines.

[I] UNISON, 2013 'The Menopause and Work: A Guide for UNISON Safety Reps'. <https://www.unison.org.uk/content/uploads/2013/06/On-line-Catalogue204723.pdf>

[J] Email from National Officer, UNISON, January 2021.

[K] Testimonial from UNISON Representative, National Health Service, January 2020.

[L] Trade Union Congress, 2013, 'Supporting Working Women through the Menopause.' https://www.tuc.org.uk/sites/default/files/extras/supporting_women_through_the_menopause.pdf

[M] NHS Wales, 2018, *Menopause Policy*.

<https://www.nhsconfed.org/-/media/Confederation/Files/Wales-Confed/Wales-Employers/FINAL-NHS-Wales-Menopause-Policy-19-Dec-18.pdf>

[N] Testimonial from Employment Relations Advisor, Royal College of Midwives', August 2020.

[O] Confidential Final Report for Nottinghamshire Police, 2020, *Menopause Policy Evaluation*.

[P] Testimonial from Associate Dean for Research Impact, Monash Business School, Monash University, November 2020.