Eradicating the **Stigma** From Menopause in the **Workplace**

How employers can offer better support to a high-value, underserved workforce segment.
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Menopause-age women account for over 25% of the workforce. Over 60% state that their menopause symptoms, when uncontrolled, can significantly impact their work performance, leading some even to abandon their careers. This issue affects not only women’s financial stability; the annual cost to businesses has been estimated to be several billion dollars in lost productivity.

Menopause is a reality that will affect every woman at some point in their working life. Unfortunately, due to cultural stigma and an absence of social-political will to make improvements, large swaths of women suffer unnecessarily, mostly in silence. This suffering can extend to negative impacts on health due to inaccurate information and substandard medical care.

Thankfully, there is light at the end of the tunnel; the United Kingdom has become a model worth observing as the youth-focused West grapples with the realities of an aging workforce. They are at the forefront of a movement to implement more significant support for women living and working with menopause. In doing so, they are also reaping benefits such as lower employee turnover and reduced costs associated with employees missing work.

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U.S. employers, in comparison, have some ground to cover. With a quarter of their female workforce within the average age range for perimenopause and menopause, there is a clear opportunity to disrupt current attitudes and do better. This paper aims to provide tips and information to employers interested in creating a more inclusive and supportive workplace.
In Western culture, youth is an obsession. Despite advances won by women, they are still often objectified and valued more for their physical attributes than their capabilities. The preference for youth also means that when employers allocate support for female employees, a disproportionate amount of available funding is spent on pregnancy and fertility. The needs of older women, or even women who have opted not to have children, are routinely ignored.

The bias toward youth has wide-reaching consequences that can impact the length of a woman’s career and her income level. It even affects the quality of medical care and health information she can receive. In a survey conducted by Lisa Health, 50% of women expressed having little to no knowledge of menopause. This somewhat shocking statistic shows that not enough is being done to ensure women have the resources needed to prepare for menopause, manage symptoms, and stay healthy throughout their lives.

Perhaps the most egregious example of misinformation and its devastating aftermath followed a 2002 study linking hormone therapy to an increased risk for heart disease, stroke, and breast cancer. The study has since been reinterpreted, but a generation of women has and continues to shy away from menopause-related treatments.
away from a treatment that could vastly improve the quality of their lives.

Women should be able to trust health professionals to provide them with knowledgeable care. However, based on the results of a Mayo Clinic survey of postgraduate medical residents, there are significant knowledge gaps around menopause that are leading to women receiving less than optimal service.

While most (93%) respondents believed it was very important to be trained to manage menopause, over 30% said they would not offer hormone therapy to a symptomatic woman, even if there were no contraindications. Another 20% reported not receiving any menopause lecture during residency, and less than 7% reported feeling adequately prepared to serve menopausal women.

In a culture where aging is widely devalued, sustaining a high quality of life can be difficult without specific support systems in place. As a woman moves past what her culture deems ideal, she will not only face the typical symptoms that accompany menopause but these symptoms can be exacerbated by stressful situations and the negative signals she receives from society daily.

Author Tracey Cox who studies sexuality and relationships across cultures recently noted:

“The Western world idolizes youth. Other cultures respect old age. We think of menopause as an ending, almost a ‘disease.’ Other cultures think of it as a beginning, transformative—a time of freedom and respect for women.”

Supporting evidence that this dichotomy has a real consequence on women’s wellbeing, Dr. Mary Jane Minkin, a professor from Yale Medical School, reviewed results from a study conducted with 8,200 women and men in North America and Europe, ages 55-65. She found that the severity of menopausal effects varied by nationality. The results illustrate that if menopause symptoms resulted solely from hormonal changes, the experience would be more homogenous worldwide.

A hundred years ago, average lifespans were shorter, and women in the West tended to die not long after menopause. Modern women live longer, fuller lives, and many are experiencing menopause earlier than their ancestors did. Science has also shown that menopause is not an abrupt transition but a life stage that starts with perimenopause and can last a third of a woman’s lifespan. It’s incumbent upon modern society to get real about menopause and for employers to help their female workforce remain healthy, happy, and contributing.
What Is Menopause, and What Are Its Symptoms?

Menopause is the result of a hormonal transition that occurs when a woman's ovaries stop producing eggs. Menopause typically occurs between the ages of 45 and 55 but can also happen to people outside this age range. A person is considered menopausal when she has not had a period for 12 consecutive months, and the cessation of menses is not due to another cause, such as cancer treatment or surgical removal of the ovaries.

Counter to common belief, menopause is not an event that completes all at once. Before actual menopause, women also experience perimenopause or the stage that precedes it; however, menopause is commonly used as a catch-all term to include this transitional phase.

Perimenopause usually lasts seven to ten years but can last as long as 14 years. During this time, ovaries begin to gradually produce less estrogen and progesterone. Estrogen and progesterone are hormones that regulate a woman's fertility and sex drive. They also play a crucial role in regulating bone density, collagen production, brain function, weight distribution, and sleep. As these hormones decline, 80% of women will experience disruptive and unpredictable vasomotor symptoms like hot flashes and night sweats. Other common physical and mental symptoms of menopause include:

- Insomnia
- Fatigue
- Drowsiness
- Brain fog
- Mood swings
- Anxiety
- Depression
- Weight gain
- Vaginal dryness
- Joint pain
- Bone loss

The intensity of these symptoms can be
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We now know that several chronic conditions are linked to menopause symptoms and that menopause symptoms can also exacerbate chronic disease. Perimenopause and early postmenopause is an excellent window of opportunity to help women manage their risk and increase their health span.

influenced by social environment, outside pressure, and the absence of support. Every woman is unique, and a small percentage may breeze through menopause with little problem. However, most may experience acute symptoms that disrupt life and work. Menopause symptoms can adversely affect the ability to work, leading to reduced working hours, underemployment or unemployment, and consequently, financial insecurity in later life.

It’s also important to note that during and after menopause, women’s risk of chronic disease increases rapidly. By age 55, 80% of women have one chronic disease, and 50% have two. It’s a shocking statistic, and we should be ringing the alarm bell much earlier. We now know that several chronic conditions are linked to menopause symptoms and that menopause symptoms can also exacerbate chronic disease. Perimenopause and early postmenopause is an excellent window of opportunity to help women manage their risk and increase their health span.
Social-economic shifts in what was once considered women’s traditional roles mean that women are working longer than ever. According to the U.S. Bureau of Labor Statistics, 41 million women over 40 are currently in the labor force. Menopause-age women account for 26% of the workforce or 55% of all working women.

In many cases, women balance multiple roles as employee or employer, parent, and caregiver to aging parents. By the time they reach midlife, it’s not uncommon for them to be experiencing a full range of social, psychological, and biological stressors.

These can include divorce, emerging health problems, and financial and work-related pressures.

Women are adept at taking on multiple responsibilities and managing them in stride. However, numerous studies show that menopause can cause major disruption to a woman’s work-life. In a survey by the British Medical Association, 93% of women affirmed experiencing symptoms of menopause. Ninety percent said that these symptoms impacted the quality of their lives. In the same survey, women expressed reluctance to mention what they were going through at work out of fear of reprisal.

In a survey by Lisa Health, women experienced a range of effects typical of menopause; 52% had moderate to extreme hot flashes, 70% had moderate to severe brain fog, and 64% reported
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moderate to extreme joint pain. Another 64% mentioned experiencing moderate to severe anxiety, with 70% of women also reporting moderate to severe sleep problems.

In total, 63% of Lisa Health survey respondents said they felt menopause symptoms directly interfered with their work. Among them, the large majority (51%) reported feeling less productive at work, and 19% were affected enough to have also called in sick or left work early. Still, another 8% of the respondents reported taking a leave of absence from work, and 9% had quit their jobs entirely or opted to retire early.

Andrea Berchowitz, an entrepreneur and advocate for women’s health, noted in a recent TED talk that menopause may contribute to gender inequality and a noticeable absence of women in crucial leadership positions. The average CEO is in their late 40s to mid-50s, a time when most women have amassed a wealth of experience and can contribute most to their jobs. This period is also when they may be shouldering the greatest economic burden.

Divorce is common in midlife resulting in reduced financial resources, and young adult children are heading off to college. As menopause symptoms become prevalent, this increases medical costs. Some women may be so busy and under-informed about menopause that they attribute these signs to other causes, delaying appropriate care and significantly raising their medical expenses. Others may simply opt to struggle in silence out of fear that they will be regarded as expendable if they draw attention to their status.

It is crucial for employers to recognize that menopause itself does not impair a woman’s reasoning or logic. The imbalance of hormones in the body may make it more challenging to filter and manage emotions during periods of stress. However, it does not affect the areas of the brain responsible for problem-solving.

Despite abundant misinformation popularized by the media, it’s important for women and their networks of support to know that they have options if symptoms of menopause become overwhelming. These include hormone therapy, cognitive behavioral therapy, science-backed alternative and complementary strategies, and other behavioral and lifestyle changes that involve nutrition, exercise, stress management, and work-life balance.

Women experiencing menopause are likely to be at the peak of their skills, knowledge, and experience, so it’s in an organization’s best interest to do what’s needed to recruit and retain them.
The Cost of Menopause in the Workplace

Untreated menopause symptoms not only have a detrimental impact on the quality of a woman’s life but also have clear economic ramifications for employers.

A study using data from women’s health insurance claims covered by 60 self-insured Fortune 500 companies tracked the economic fallout for menopausal women suffering from untreated vasomotor symptoms (hot flashes and night sweats) and their employers. These women had 121% higher utilization of healthcare resources than women with controlled symptoms. The study linked untreated menopause symptoms to $1,346 greater direct costs incurred per woman per year. Further, women with vasomotor symptoms were 57% more likely to have reduced productivity and missed work days; this led to an incremental indirect cost of $770 per woman per year.

Sleep disruption is another significant symptom of untreated menopause. A study using data from the U.S. Study of Women’s Health Across the Nation (SWAN) showed an unmistakable link between poor sleep and diminished work performance among midlife women. The risk of becoming unemployed was 31% higher for women with menopause-related insomnia symptoms. On a macro scale, this translates conservatively to over $2.2 billion in lost productivity per year for employers.

While hot flashes and sleep disturbance are two of the most prevalent and impactful symptoms on women and employers, there are several others, including fatigue, brain fog, anxiety, and depression, that also contribute to increased healthcare costs, lost productivity, and women exiting the workforce.
As two Western cultures, the United States and the United Kingdom have a lot in common, making them a good catalyst for comparison regarding menopause. While both are youth-focused societies, the U.K. outpaces the U.S. in how menopause is perceived and the amount of support made available to women. In particular, the U.K. is making more significant strides to ensure menopausal women are fairly represented and supported in the workplace.

Major issues that fuel the problematic atmosphere for menopause in the U.S. can be attributed to the secretive way it’s handled—almost taboo to discuss openly—and a flawed healthcare system that routinely fails women. For example, women in the U.S. are three times more likely to die in childbirth than women in other Western countries.

Further, stigma and politics severely compromise reproductive health services in the U.S., leading to further deficits in care. Lastly, privatized health insurance plans are often overpriced and not comprehensive enough to meet a woman’s full spectrum of needs. Support for a proactive approach to menopause barely has a chance in such an atmosphere.

In comparison, the U.K. healthcare system far outranks the U.S. in terms of equability and financial fairness. The U.K.’s nationalized tax-based funding system results in standard care being more evenly applied than in the U.S. Politically, there is more impetus to do what’s better for women; for example, the U.K. has made hormone treatment a low-cost, easily accessible over-the-counter therapy.
On the employment front, while there is still work to be done, the U.K. has been far more forward-thinking. For instance, there has been a recent drive to create a position called “Menopause Champions” within companies to foster more inclusive environments for menopausal women. This coincides with other employer-supported initiatives like providing access to better knowledge, resources, and supervisor training. Compared to the U.S., where the needs of aging workers, in general, go mostly undiscussed, menopause remains a stigmatized topic.

Retaining and recruiting women during their menopause years is not just the morally right thing to do, and it’s also simple math. In the U.S., it costs employers nearly $5,000 per employee to make a new hire, which increases based on role and salary. Losing high-value talent causes major disruption to business operations, and in today's work climate, it's getting harder to attract and retain employees. It's in every employer's best interest to do what's necessary to keep women of all ages happy and productive at work.
In a work-related study, 72% of women said their workplace needed to improve the level of support available for individuals experiencing symptoms of menopause. Because women are often reluctant to bring up the subject to supervisors or push for more and better support and solutions, employers need to be proactive but respectful as they explore how best to do more for their female workforce.

Begin by educating yourself on the subject. For example, you’ve taken the first significant step in getting informed by reading this paper. Understand that while women experiencing menopause want to be supported, that support shouldn’t be invasive. One good way to gather insights about women’s needs in your organization is to distribute an anonymous survey. Once you have this information, below are a few suggestions for various ways you can begin to improve your workplace to make it menopause-friendly.

- **Establish an inclusive culture.** There is already a strong movement underway in many organizations to foster a more diverse and inclusive workplace. If your company hasn’t begun such an initiative, this may be the perfect opportunity. In an inclusive atmosphere, women should feel free to express their needs and what they may be experiencing without fear of reprisal.

- **Secure executive and board support.** Cultural shifts need to have full buy-in from company leadership to be successful. Start a conversation with your organization’s executives and Board of Directors about the
findings highlighted in this paper. Draw attention to the fact that midlife women are a valuable talent pool worthy of investment.

- **Provide managerial training.** In work surveys, building awareness and sensitivity among supervisory staff was a frequently cited request from women. In particular, there is a need for knowledge about how physical work environments impact menopause and exacerbate symptoms. Also, skills training around employee/manager communication and consideration about what types of communication are helpful and desired versus what’s not can reduce the potential for embarrassment or discomfort.

- **Establish more flexible work schedules.** Since menopause symptoms can contribute to women missing work, consider implementing more flexible work schedules that include the ability to work remotely. Update policies that allocate time for sick days and extended leave to be more supportive.

- **Provide health information workshops.** As noted earlier in this paper, 50% of women are poorly informed about menopause, how to discuss it, and how to control its symptoms. Providing quality information will help empower your female workforce so they are in a better position to advocate for themselves.

- **Empower women with technology.** Women in the workplace entering or experiencing menopause are a demographic firmly dominated by Generation X and late Boomers. Gen X women, in particular, are women who grew up with tech and are extremely comfortable using it. As a group, they have no intentions of being passive about menopause and are actively seeking solutions to ensure they have a more comfortable mid and later life than their mothers and grandmothers did. Introduce an easy-access digital health empowerment platform like the Midday app and our Midday Work-Life Balance Program, which provides an end-to-end solution for women who want to take control of their menopause and healthy aging journey.

Midday leverages artificial intelligence (AI) and sensor technology to track a woman’s menopause progression and symptoms to...
deliver personalized insights and science-backed therapeutic recommendations for menopause and healthy aging. Women also have access to virtual care with menopause experts, hormone therapy decision support, a broad range of evidence-based interventions ranging from holistic programs to clinical support, on-demand education, and a product marketplace. It’s a convenient evidence-based, comprehensive solution for busy women with wide-ranging and changing needs.

Some of the above recommendations may be considered part of a comprehensive initiative that will be implemented over time, and others can be accomplished in a shorter time frame.

**Things that you can do immediately:**

- Begin educating yourself on the impacts of menopause in the workplace
- See how you can extend your existing healthcare support beyond pregnancy and fertility
- Start the conversation about how to make the workplace more menopause supportive in the broader context of gender equality
- Provide access to a technology-based personalized solution like the [Midday app](#) and the [Midday Work-Life Balance Program](#)
Conclusion

Menopause is not an ending to a woman’s vitality and ability to contribute. It’s simply a biological transition from one point of life to the next. Instead of being treated as a closeted secret, it should be easy to discuss, like any other aspect of being human.

Workplaces concerned about diversity, equity, and inclusion should consider menopause as an issue affecting their employees’ potential to be fully present and do their best work. Menopause usually begins right when a woman is reaching a peak in her skills and knowledge, and smart employers will do whatever they can to support and retain this high-value demographic.

As a champion for menopause and healthy aging, Lisa Health’s Midday digital health solution empowers women during this complex life stage. It provides them with the support they need to take control of their menopause and healthy aging journey, helping them look ahead to a future that’s bright.

If you have any questions about how we might be able to help you establish a more inclusive menopause-supportive workplace, reach out to us via email, or visit our website.

About Lisa Health

Lisa Health creates advanced technology solutions for menopause and healthy aging. The company’s Midday app is the first to use AI and sensor technology to illuminate the menopause life stage and support women with an end-to-end platform for personalized evidence-based and science-backed insights and therapeutics, including access to menopause specialists at Mayo Clinic. Midday sees the bright future of women’s health and is paving the way for that future now. More information at https://midday.health.