1. INTRODUCTION

The NHS defines menopause as a natural stage of ageing at which a woman has not had a period for one year. In the UK it occurs at the average age of 51 years, although it can begin much earlier or later for some women. In 2018 there were 1,146,757 women over 50 years living in Scotland, 35% of which were aged 50-59. This suggests that a significant proportion of today’s population is going through the menopause transition at any one time, yet, there is a distinct lack of awareness of women’s experiences and needs in current policy frameworks. We therefore warmly welcome this debate in the Scottish Parliament as a crucial step forward in creating a gender equal Scotland where women and girls’ experiences are made visible.

Social stigma and sexism have resulted in the menopause being undiscussed, despite the fact that it affects almost all women at some part of their lives and impacts their health, economic and social inequality. Engender has recently embarked on a research project to determine what gaps exists between women’s lived experience and existing support structures, looking primarily at health and workplace policy. In this briefing we set out some of the key available information gathered in the project to date as well as a brief summary of the project aims.

2. MENOPAUSE AND HEALTH

When going through the menopause transition, women can experience a series of symptoms such as changes in the intensity or frequency of their periods, hot flushes, low mood, and anxiety amongst others. Symptoms can begin months and even years before the menopause and last around four years after the last period or begin abruptly after a surgery such as hysterectomy. The frequency and severity of symptoms vary for each woman and depend on many different factors. Up to 65% of women in UK experience menopause transition symptoms, up to 45% find them distressing and around 10% report them as severe. Studies in Scotland have found around 57% of respondents experience symptoms, with 22% finding them severe.

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1 NHS. Menopause [Internet]. nhs.uk. 2017 https://www.nhs.uk/conditions/menopause/
3 https://www.nhs.uk/conditions/menopause/
“problematic”\textsuperscript{5}. Age at which menopause occurs can influence subsequent health, for example women who experience menopause earlier have a higher risk of osteoporosis and cardiovascular disease while women who experience it later have an increased risk of breast cancer\textsuperscript{6}.

The taboos around menopause may in fact contribute to experiences of symptoms, based on comparisons between different societies and cultures. Menopause as a taboo and gender norms and expectations on older women could be worsening the experience for women. For example, women from London report higher rates of hot flushes and night sweats compared to women living in Japan and China. The difference seems to be related to the combination of diet, lifestyle, climate, and women´s roles and attitudes to aging\textsuperscript{7}.

Mental health can also be affected during the menopause transition, including common symptoms such as mood swings, anxiety, and depression. Evidence suggests that this could be the result of a combination of previous life experiences, biology and the social changes of mid-life. Critical changes happening in mid-life are highly gendered, such as caring responsibilities for older parents, and diminishing caring roles with regard to adult children growing up and leaving home, as well as health challenges that may increase or intensify in middle age. This combination seems to increase the presence of mental health problems in middle-aged women\textsuperscript{7}. However, Scotland’s Mental Health Strategy contains no references to menopause and just four references to women, two of which concern perinatal mental health.\textsuperscript{8}

3. MENOPAUSE IN THE WORKPLACE

A combination of factors including demographic changes, women´s increased financial need as life expectancy increases and policy changes such as increases in state pension ages have resulted in women working later into life and therefore more commonly working while experiencing menopause transition symptoms. Data from the DWP showed that the largest increases in employment rates during the last 30 years were for women aged 60-64 (from 17.7 to 40.7%) and women aged 55-59 (from 48.6 to 68.9%)\textsuperscript{9}.

Transition symptoms can negatively affect women´s economic participation and exacerbate economic inequality. Inadequate ventilation, lack of access to appropriate toilet facilities, cold drinking water, crowded workspaces, and unsuitable uniforms can all exacerbate menopause symptoms\textsuperscript{12}. In a study that recruited

\textsuperscript{8} Scottish Government Mental Health Strategy 2017-2027
\textsuperscript{9} Department of Work and Pensions. Employment statistics for workers aged 50 and over, 1984 to 2015
women from 10 UK organisations, 50% singled out the negative effects of transition-related tiredness on work\textsuperscript{10}. Women may be more reluctant to talk about their symptoms to men or younger colleagues and managers and feel that those around them are unsympathetic\textsuperscript{12}. In a TUC survey of 500 safety representatives, a third cited embarrassment or difficulties in discussing the menopause with their employers and one in five mentioned criticism and even harassment from their managers\textsuperscript{11}.

While there is well-understood advice, support and resources on pregnancy and returning to work after maternity leave for women and managers the same is not true of menopause because managers consider it is a personal issue\textsuperscript{11}. Policies in place to support women experiencing menopause at work are few and far between, although a couple of examples can be found at the South Lanarkshire Council\textsuperscript{12} and the TUC\textsuperscript{13}.

4. MENOPAUSE MATTERS: MENOPAUSE PROJECT

Engender is currently developing a study to identify the support needs of Scottish women experiencing the menopause transition and map the existing support services and policies to guide future recommendations to improve them or create new ones.

We want to identify the gaps between what women say they need and the existing services and policies so that future developments can be more responsive to women’s lived experience. The study will include an online survey for women and interviews with key stakeholders involved in providing support services or developing policies in Scotland.

To find out more about the research involved in the project, more information is available on Engender’s blog\textsuperscript{14} or please contact Elena Rodríguez Sánchez at elena.rodriguez@engender.org.uk, who can provide further information about the survey and interviews.

FOR FURTHER INFORMATION
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ABOUT US
Engender is a membership organisation working on feminist agendas in Scotland and Europe, to increase women’s power and influence and to make visible the impact of sexism on women, men and society. We provide support to individuals, organisations and institutions who seek to achieve gender equality and justice.

\textsuperscript{10}Griffiths, MacLennan, Hassard (2013) Menopause and work: An electronic survey of employees’ attitudes in the UK

\textsuperscript{11}Trade Union Congress. Supporting working women through the menopause. Guidance for Union Representatives

\textsuperscript{12}http://www.southlanarkshire.gov.uk/press/article/1962/support_for_women_employees_with_menopause

\textsuperscript{13}https://www.tuc.org.uk/resource/supporting-working-women-through-menopause

\textsuperscript{14}https://www.engender.org.uk/news/blog/menopause-matters-an-assessment-of-the-support-needs-of-scottish-women-experiencing-the-me/