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Northern Care Alliance
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WELL WOMEN IN THE WORKPLACE: SHAPING STRATEGY FOR KEY HEALTH ISSUES



THE CHALLENGE

Whatever their purpose or sector, it's down to employers to ensure their people can perform to the full extent of their abilities – to be the best they can be. But, for women in the workplace, this is not always the case. Shortfalls in policy can leave employees affected by a range of women's health issues without adequate information, acknowledgement or support.

Recognising this shortfall, the Northern Care Alliance NHS Foundation Trust (NCA) – an integrated health and social care group with 22,000 staff across Greater Manchester – initiated their *Well Women Strategy*. The strategy group came together in partnership with Manchester Metropolitan University to better understand the current picture of women's health-related wellbeing in the organisation, starting with four priority areas: endometriosis, fertility treatment, pregnancy loss and menopause.

After initial progress – including a menopause policy and externally-delivered menopause training – the strategy group then commissioned the research team to deliver two bespoke surveys – one for staff and one for line managers – which offered both quantitative and qualitative response options. The staff survey focused on awareness of the NCA's provisions, views on the organisation's culture and personal experiences, while line managers were asked about their general perceptions, confidence and competence, support from HR and the provisions they had offered and thought suitable.

WHAT WE DISCOVERED

The research team distributed the surveys across December 2022 and January 2023, and received 1,268 responses, including more than 40,000 words of open response from employees – reflecting the depth of feeling around these issues.

Most people across the organisation felt they worked for a family-friendly employer (60% of staff and 83% of managers), though less felt this was true for employees trying or struggling to start a family (23% of staff and 53% of managers).

There were concerns about the availability or awareness of relevant information, with more than half (55%) of staff unaware of their legal rights around women's health at work. Similarly, while both staff and managers were broadly aware of policies around menopause transition, many did not know if there were provisions for pregnancy loss, endometriosis or fertility treatment.

Some staff raised concerns around confidentiality when discussing women's health issues, though most (63%) said they would feel comfortable disclosing an issue to their manager, with slightly fewer (53%) comfortable telling HR. Half said they would feel comfortable making a flexible working request due to a women's health issue, and 43% thought such a request would likely be approved.

Positively, an overwhelming majority of managers felt motivated to provide support for each of the issues (80-90%) and most felt they were aware of the women's legislative entitlements. However, many managers also said they lacked the confidence, authority, training or time to offer their staff the right support.

A common theme throughout the responses was how mental health challenges associated with women's health issues in the workplace were insufficiently addressed. And, in line with research on women's health issues in the workplace more broadly, the responses from those with lived experience of issues around complex fertility journeys, menstrual health and menopause transition showed that more can be done.

A few key highlights included:

Those with **endometriosis** seldom received counselling, flexible working or paid time off, and 52% said they could not find information about their rights.

“ **...it's not deemed as a severe situation and people don't understand how debilitating it is, so I just get on with it.** ”

However, of the women's health issues explored, it was the most likely to result in an Occupational Health referral.

65% of those undergoing **fertility treatment** felt more could have been done to support them. Although just over half felt their manager was willing to help, over a third did not think their manager understood what to do.

“ **My manager lacks empathy and has previously disclosed confidential information to the team... I felt quite harassed by the policy and how it was handled, and it wasn't dealt with very sensitively.** ”

While they were the most likely to be offered flexible working arrangements, this was still only true for 22%.

Of the respondents who had experienced **pregnancy loss**, 44% felt it was a taboo subject in the workplace. Although emotional support and sensitivity were not common features among any of the groups, it was least evident for those who had lost a pregnancy.

“ **The availability of a range of different support options, including flexible hours/home working/counselling, etc., would be most beneficial as every loss is different.** ”

For those going through **menopause**, 53% felt they were unable to take time off needed, while almost 60% relied on unpaid medical appointments. Of all the groups, they were the most likely to feel disadvantaged or treated negatively – with 20% saying this.

“ **It is not taken seriously and not understood. It is laughed about and easily dismissed.** ”

You can read the detailed quantitative and qualitative findings in the full research report on the Manchester Metropolitan University website – including more on issues around organisational culture, the role of HR support and how each of these key issues impacts work.

THE EVIDENCE FOR CHANGE

While the surveys revealed a broad recognition of the NCA's work to drive awareness and develop policy in certain areas, they also highlighted several areas to address – from availability of information and perceptions of confidentiality to inconsistencies in support and uncertainty across management when dealing with women's health.

To meet these challenges, the research team offered a range of recommendations across three broad areas:

Policy development – bespoke policies (in separate documents) should be implemented for each featured area. These would make clear the employer's stance and the employees' rights, on issues including time off, flexibility, adjustment, support and more. Allowing for each employee's experience, these policies should be flexible, determined in dialogue and regularly revisited. This should be mirrored in support provided to employees, which should also be discussed, agreed and regularly reviewed.

Education and communication – the NCA should implement ongoing awareness-raising activities across the organisation, giving staff, management and HR teams the understanding and confidence to better support colleagues, while fostering a culture where these issues can be discussed. Any policy developments should be widely shared to make both staff and managers aware of their responsibilities, while targeted communications via specialist staff networks can address barriers to access. Finally, 'Champions' for each of the health

conditions could be appointed, giving employees a ready source of information and the issue a clear voice.

Training – Line managers should be equipped with skills and knowledge around sensitivity, language and intersectionality – the latter acknowledging how an individual's identities can compound challenges in dealing with health issues. This training should also consider how to bridge the gap between written policy and practice barriers, at all levels. Meanwhile, HR teams should also be given training on women's health issues, raising their confidence and competence.

ISSUES AROUND INCLUSION

The survey results highlighted potential issues around inclusion and intersectionality – as the response was limited in its diversity, with most of the data coming from white women. While disability and various sexual orientations were apparent, there was a low response rate from ethnic minority staff and managers, and from male managers.

To meet the needs of different staff groups, it's essential that any policies or provisions account for the intersection of ethnicity, sexual orientation, (dis)ability and other factors that may compound challenges and discrimination linked to gender and health.

As such, policy should be inclusive and accessible, recognising LGBTQ experiences, cultural differences and the needs of men and partners. Likewise, training for line managers around women's health in the workplace should focus on sensitivity, appropriate language and intersectionality. Finally,

the research team recommended that, alongside broader channels, targeted communications for ethnic minority staff, LGBTQ staff and employees with disabilities might be useful, perhaps via specialist staff networks – both to ascertain and to address specific concerns.

The issues raised in the research have already prompted discussions with the NCA's equalities team and staff networks – with further work underway to understand issues around engagement and to explore further action the strategy group should take next.

SHAPING STRATEGY

The research partnership, findings and recommendations provided a solid foundation of evidence for the NCA to develop activities and initiatives for the Well Women Strategy, including a series of measures:

- **Three new policies:** Bespoke policies have been developed around fertility treatment, pregnancy loss and endometriosis & menstrual health.
- **Clear voices:** Menopause Advocates were appointed in April 2023, with twice-monthly awareness sessions booked out until the following December. Meanwhile, Endometriosis champions have been trained by Endometriosis UK and are developing sessions for staff.
- **Communications:** There is now a Well Women Strategy page available on the NCA intranet, providing a central point of information for managers and staff. There are also regular Well Women items in the staff newsletter, highlighting issues and resources, together with a pulse survey question to gauge awareness of the strategy.
- **Learning:** External partners have delivered awareness-raising sessions, on fertility treatment and pregnancy loss including sessions on male perspective, childlessness and LGBTQ issues. The NCA is also in the process of developing a session for HR and Managers around the whole Well Women Strategy, including the detailed findings from the research and available resources.
- **Case Studies:** A pair of Endometriosis Case Studies have been collated and included in the Wellbeing and Attendance Management Policy (which applies to NHS organisations across the Northwest), ensuring that practical experience informs the employer's approach to women's health – while raising awareness of the strategy beyond the organisation.

The NCA are continuing their Well Women Strategy and looking at other areas of support such as Domestic Abuse, Sexual Assault and New Parent Support. They are also working on a Well Men Strategy.

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