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By website: [Lodge my submission – Parliament of Australia \(aph.gov.au\)](https://aph.gov.au/submit)

DCA response to the Inquiry into the Issues related to menopause and perimenopause

Dear Committee Secretary,

Diversity Council Australia (DCA) is the independent not-for-profit peak body leading diversity and inclusion in the workplace. Our member organisations are estimated to employ over two million Australians, representing almost 20% of the national workforce.

The impact of menopause and perimenopause on women is a critical workplace gender and age equality issue. Responding effectively to the needs of women experiencing menopause or perimenopause is an essential part of creating an inclusive culture at work.

DCA welcomes the opportunity to provide comment on selected Terms of Reference for this Inquiry, particularly:

- a. The economic consequences of menopause and perimenopause, including but not limited to, reduced workforce participation, productivity and retirement planning; and
- g. The level of awareness amongst employers and workers of the symptoms of menopause and perimenopause, and the awareness, availability and usage of workplace supports.

Given the nature of our work and focus on workplace issues, we defer to experts in other fields to respond to other Terms of Reference. However, we will provide some comments on the experience of marginalised women at work – Culturally and Racially Marginalised (CARM) women, Aboriginal and Torres Strait Islander women, LGBTIQ+ women and women with disability. We will also provide some comment on the need to challenge gender norms and stereotypes, as well as those relating to age and ageism.

A note on intersectionality

DCA recommends an intersectional approach when considering the impacts of menopause and perimenopause on women. DCA's definition of Intersectionality describes how some people experience compounded discrimination due to multiple marginalising and interlinked characteristics.¹ It is critical for legislators, policymakers, and those implementing policies, to understand intersectionality, and take an intersectional approach when implementing such policies.

A note on binary language used in this submission

While gender does not exist only in binary categories, these categories still have very real effects. However, DCA recognises that there are people whose experiences and identities cannot be captured by the use of binary language, and these limitations should be acknowledged whenever binary language is used.

A note on definitions of menopause and perimenopause

There has been confusion and misuse of terminology relating to menopause worldwide. In this submission, DCA accepts the definitions provided by the Australian Menopause Society². In summary, menopause refers to the final menstrual period. Perimenopause is the time period preceding menopause and can last one year after menopause. Some women can experience menopausal symptoms for 5-10 years before their final menstrual period. Once in menopause, symptoms can continue for on average four or five years. Potentially, women can experience symptoms for 15 years in total. There are a number of other related terms that are defined by the Australian Menopause Society covering women who experience early menopause, either naturally or due to medical conditions and/or treatment, and other aspects of menopause.

Comments on the Terms of Reference:

a. The economic consequences of menopause and perimenopause, including but not limited to, reduced workforce participation, productivity and retirement planning

Recent Australian research³ confirms that many women across the country experience symptoms of menopause that can make it harder for them to work. 25% feel that symptoms profoundly affect their daily working lives; 17% reported taking an extended break from work; and women retire earlier than men – 7.4 years earlier on average.

Menopause costs Australian women \$15.2 billion in lost income and superannuation for every year of early retirement⁴.

It is clear that there are very serious economic consequences for women relating to their experience of menopause and perimenopause. But it is important to recognise the complexity of women's experience. Menopause alone is not the reason why women may find it difficult to stay at work. In fact, the lack of high quality empirical evidence on the effects of menopause and perimenopause – exclusively - on workforce participation, productivity and retirement planning in Australia is noted in the Monash Centre for Health Research and Implementation's submission to this Inquiry⁵.

Regardless of the existence of a causal relationship and the lack of empirical data, workplaces play a critical role in mitigating these consequences.

A number of Australian workplaces have recognised this and are implementing changes to improve their workplace culture and working conditions to ensure menopausal women get the support they need. Victorian Women's Trust, Future Super⁶, Sustainability Victoria and ModiBodi are pioneering policies and practices including specific paid leave entitlements.

It is important to appreciate the diversity as well as complexity of the lived experience of women going through menopause and perimenopause. The International 2021 European

Menopause and Andropause Society (EMAS) global consensus recommendations⁷ highlight the “diversity of experience of menopause in the workplace” (Recommendation 4.3), influenced by symptoms and context but also the workplace environment. Menopausal symptoms can cause anxiety and depression which can be exacerbated by unsupportive workplaces. Poor mental health can lead to reduced workforce participation and productivity, and early retirement.

In summary, EMAS recommendations provide guidance on developing a workplace culture that can effectively respond to and support women experiencing menopause and perimenopause to prevent the economic consequences of reduced workforce participation and productivity and early retirement.

Centring the lived experience of menopausal women is critical in any policy design and implementation process to ensure the complexity of this experience is properly understood. For example, early menopause, occurring spontaneously or as a result of medical treatments, can have even greater impacts. According to the Monash Centre for Health Research and Implementation⁸ approximately 12% of women experience early menopause. Their lived experience will be significantly different to that of older women. Also, the lived experience of women with medically induced menopause is unique and complicated by the health issues that relate to their medical treatment.

DCA’s⁹ research and advocacy highlights the need to pay specific attention to the lived experience of women who are additionally marginalised. Aboriginal and Torres Strait Islander women, Culturally and Racially marginalised (CARM), LGBTIQ+ and women with disability may experience particular economic consequences that are compounded by their experience of marginalisation.

DCA urges caution when developing policy and program responses to the experience of women undergoing menopause or perimenopause in workplace contexts. In the past women were concerned that speaking openly about their symptoms would fuel discrimination, particularly against older women. The Older Women’s Network NSW¹⁰ submission to this Inquiry spoke of this. We strongly recommend that work in this space be informed and framed to support women’s health and productivity and not be used as ammunition to discriminate.

In conclusion, responding to terms of reference a) is challenging because of the complex and diverse nature of lived experience of women experiencing menopause or perimenopause. Women are also experiencing other health issues, possibly undergoing medical treatment, may be younger than most menopausal women, or may also be older and experiencing ageism at work, and maybe be women who experience compounded marginalisation. This makes it essential to centre women’s voices in the development of responses to better support women at work.

g. The level of awareness amongst employers and workers of the symptoms of menopause and perimenopause, and the awareness, availability and usage of workplace supports

The silence surrounding menopause continues to be a major barrier for women accessing support at work. Women feel shame, fear being seen as a burden and concerned that if they are open about their symptoms, this will impact on their career progression. It is imperative that employers and employees become more aware of menopause and perimenopause, their symptoms and impacts on women in a work context. With greater awareness, there is a better chance for increased support in workplaces.

The submission by the Older Women's Network NSW¹¹ to this Inquiry explored the lived experience of women aged 75 years on average. They said that successfully negotiating workplace adjustments such as tinted glass, blinds, fans, uniform modifications, flexible working conditions and end of trip facilities helped them continue to work during menopause. They noted that managers granting these requests were women who were informed and empathetic. As stated in their submission, these days women should not have to actively seek out requests of this nature.

Menopause should be normalised in the workplace through education and awareness campaigns such as the UK 'Let's talk about the menopause' campaign.¹² Creating a workplace environment where women will feel comfortable speaking openly about their experience and are aware of workplace supports is an important inclusion strategy. Centring the lived experience of the diversity of women in the workplace to develop evidence-based responses is critical.

A number of Australian employers have developed specific policies and/or guidance on information, education and support in relation to menopause. Workplace supports include adjustments to working conditions whether they are physical such as fans, ventilation, light, water, or flexibility to work at home or variable hours, and including entitlement to a period of paid leave.

Future Super¹³ has a menopause and menstrual employee policy that they encourage other companies to 'steal'. Their list of progressive 'open source' policies is impressive, ranging from anti-racism, gender affirmation, mental health, parental leave, cultural leave and of course, menstrual and menopausal leave guidelines.

The NSW government has toolkits and resources¹⁴ available on their website to help managers and employees navigate menopause at work. Advice is also available from the Australasian Menopause Society¹⁵ and there are numerous other examples of information and education readily available. There is no shortage of resources on menopause and perimenopause and how women can be best supported. The challenge, it seems, may be the lack of incentive to proactively implement policies and practice.

Finally, there needs to be a greater focus on raising awareness of gender norms and stereotypes, and those relating to age and ageism, in workplaces across Australia. This is consistently identified in DCA's research¹⁶ as posing barriers to women entering the workforce and/or in terms of career progression.

Recommendations:

- The Inquiry adopt the [Global consensus recommendations on menopause in the workplace: A European Menopause and Andropause Society \(EMAS\) position statement - ScienceDirect](#)
- The Inquiry recommends the collection of workforce data on intersectionality to better understand the impact of menopause and perimenopause on women at work
- The Inquiry centre the lived experience of menopausal and perimenopausal women in considering policy and program responses to better support women at work
- The Inquiry recommends that work in this space be informed and framed to support women's health and productivity. Caution should be exercised to ensure that work in this space is not used as ammunition to discriminate against women
- The Inquiry acknowledge the great diversity of experience that women have, particularly women who are additionally marginalised such as Culturally and Racially Marginalised (CARM) women, Aboriginal and Torres Strait Islander women, LGBTIQ+ women and women with disability

- The Inquiry acknowledge the diversity of experience that younger women and women who are under medical treatment and their experience of early menopause and the complexity of factors at play that impact on their workplace experience.
- The Inquiry recommends to the government that addressing workplace issues for women experiencing menopause and perimenopause should be a priority policy reform to encourage organisations to become proactive in this space.

Relevant DCA Research and Resources:

- [Let's Share the Care at Home and Work \(2019\)](#) explored how the gender impact of caring is an important driver of the gender pay gap and called on the government to ensure affordable, available and accessible universal childcare, thereby enabling women and men in Australian families to 'share the care' more equitably.
- [The State of Flex in the Australian Workforce \(2021\)](#) showed that the stigma around care, gender and flexible work continues and there remains a significant gap in the uptake of flexible working between men and women.
- [She's Price\(d\)-less \(2022\)](#) updated a series of reports on the gender pay gap and identified three top drivers of the gender pay gap: gender discrimination, care, family and workforce participation and type of job. This report called for action to address wage inequality in feminised industries and increasing the availability of childcare and decreasing its cost to help close the gender pay gap.
- [DCA's National Gender Equality Strategy submission](#) (2023) surveyed our members and received an unprecedented response of over 800 employees. Amongst the key themes that emerged were that the government should lead by example and provide universal childcare to address the gender pay gap; parental leave and childcare continue to challenge women's economic equality, as did traditional gender norms concerning work and care and undervaluing feminised or caring occupations.

Please feel free to contact myself or Jacqueline Braw, Senior Advocacy and Government Relations Manager on Jacqueline@dca.org.au, should you require any further information about this matter.

Yours sincerely



Lisa Annese
Chief Executive Office

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- ¹ Diversity Council Australia (V. Mappedzahama, F. Laffernis, A. Barhoum, and J. O'Leary). *Culturally and Racially Marginalised Women in Leadership: A framework for (intersectional) organisational action*, Diversity Council Australia, 2023.
 - ² [What is menopause? - Australasian Menopause Society](#)
 - ³ Jean Hailes for Women's Health. *Australian women's attitudes to menstrual and menopausal leave. A report from the 2023 National Women's Health Survey*. [Attitudes-to-menopause-and-menstrual-leave-NWHS.pdf \(jeanhailes.org.au\)](#) [National Women's Health Survey | Jean Hailes](#)
 - ⁴ The Conversation, January 23, 2024. [Symptoms of menopause can make it harder to work. Here's what employers should be doing \(theconversation.com\)](#); [Australian Institute of Superannuation Trustees - Submission in response to: Measuring what matters \(treasury.gov.au\)](#)
 - ⁵ [Sub 34 - Monash Centre for Health Research and Implementation \(MCHRI\).pdf](#)
 - ⁶ Diversity Council Australia Future Super case study. [Inclusive Employer Case Study: Future Group - Diversity Council Australia \(dca.org.au\)](#)
 - ⁷ EMAS 2021 Global Recommendations on Menopause in the Workplace. <https://emas-online.org/menopause-in-the-workplace/emas-2021-global-recommendations-on-menopause-in-the-workplace/>
 - ⁸ [Sub 34 - Monash Centre for Health Research and Implementation \(MCHRI\).pdf](#)
 - ⁹ [DCA Research - Diversity Council Australia](#)
 - ¹⁰ [Sub 9 - Older Women's Network NSW \(2\).pdf](#)
 - ¹¹ [Sub 9 - Older Women's Network NSW \(2\).pdf](#)
 - ¹² [Menopause and the workplace | London South Bank University \(lsbu.ac.uk\)](#)
 - ¹³ [Future Group's Open Source Policies and Guidelines - Public - Confluence \(atlassian.net\)](#)
 - ¹⁴ [Menopause in the workplace | NSW Government](#)
 - ¹⁵ [Menopause and the workplace - Australasian Menopause Society](#)
 - ¹⁶ [DCA Research - Diversity Council Australia](#)

