



The Bar Council

## BAR COUNCIL EQUALITY & DIVERSITY GUIDES MENOPAUSE: SUPPORTING MEMBERS AND STAFF

Breaking the taboo on the impact of the menopause at work is new, and an area in which the media has led the way.

The starting point for widespread societal change to address any remaining stigma associated with menopause, and to providing meaningful workplace support, is education for individuals, their chambers/employers, the Bar as a whole, judges and professional clients; medical professionals too.

This guide summarises the impact that the menopause can have, and the steps we can all take to support those experiencing menopausal symptoms.

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### 1. What is the menopause?

Menopause is a normal, natural, and inevitable part of ageing for most women. Some who may not identify as a woman, including some non-binary people and trans men may also experience the menopause.

Menopause is defined as a biological stage in life that occurs when hormones change and eventually menstruation stops. Usually, it is defined as having occurred when periods have stopped for 12 consecutive months (for those reaching menopause naturally).

Perimenopause refers to the time during which the body makes the natural transition to menopause, marking the end of reproductive years. It can cause symptoms due to hormone fluctuations, prior to menopause.

In this guide when we talk about “menopause” we mean both menopause and perimenopause.

51% of the population will experience menopause. Yet everyone’s experience of menopause is different – there are many different symptoms as well as different views or approaches on how to manage symptoms.

- 51<sup>1</sup> is the average age for the menopause; the average age for the start of perimenopause is mid-forties. Symptoms usually last around 4 years but can last as long as 14 years.
- Three quarters of women said the menopause had life-changing consequences and over half said it negatively impacted their lives.<sup>2</sup>
- 1 in 4 experience serious symptoms
- 8 in 10 women of menopausal age are in work
- The majority of those experiencing the menopause are unwilling to disclose menopause related health problems

Many who have experienced menopause have struggled with societal stigma, inadequate diagnosis and treatment, workplace detriment and discrimination.

The conversation around menopause needs to be changed for the better. People going through menopause need to feel comfortable to speak openly about its impact and the way legal work is conducted needs to be adapted to meet their changing needs.

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<sup>1</sup> While the average menopause age is 51, it can be earlier naturally or due to surgery, illness, or other reasons.

<sup>2</sup> [British Menopause Society \(BMS\) survey \(2017\)](#)

## 2. What are the symptoms of menopause?

Hormonal changes can result in a wide range of symptoms, both physical and psychological. In research, respondents say the symptoms which have the biggest affect at work include:

- Difficulty sleeping, insomnia or fatigue
- Hot flushes during the day or night
- Low mood, depression, or changes in mood
- Nervousness, worry or anxiety
- Reduced ability to concentrate or focus
- Problems with memory recall
- Migraines or headaches
- Aches and pains
- Irregular and/or heavy periods
- Urinary issues, e.g., increased frequency

The symptoms are often debilitating and can last for a long time, but menopause is not a disability.

Some studies suggest symptoms are not always the direct consequences of hormonal changes during menopausal transition. Instead, a 'domino effect' may occur, where one symptom causes others.

For example, headaches and insomnia can affect concentration; insomnia can be caused by anxiety or night sweats. Hot flushes can lead to stress or loss of confidence, and vice versa. Weight gain can lead to loss of confidence or sleep apnoea.

Overall, the evidence suggests a wide range of symptoms characterise menopause transition. It also indicates negative effects on mid-life women's quality of working life, whatever the origins of these symptoms.

Symptoms can be managed in a number of ways, including medically, with hormone replacement therapy (HRT), with lifestyle changes (e.g., diet & exercise) and/or holistically. However successful management often takes some time to achieve and often symptoms cannot be resolved completely until after menopause.

There is often little support in the workplace for managing menopause symptoms. As a result, some will cut back their hours or responsibilities. Others leave work altogether.

Women experiencing at least one problematic menopausal symptom are 43% more likely to have left their jobs by the age of 55, than those experiencing no severe symptoms<sup>3</sup>

### 3. How can menopause impact on practice?

In 2021, The Bar Council called for evidence on the impact of menopausal symptoms on practice to support our submission into the Women & Equalities Committee' [Inquiry into Menopause and the Workplace](#).

Some of the responses are summarised below.

#### **BARRISTERS' EXPERIENCE: THE IMPACT OF MENOPAUSAL SYMPTOMS ON THEIR PROFESSIONAL ROLE**

...hot flushes day and night. A totally unfit for purpose heating system in my usual Court, [which] means the Court is unbearably hot and trials have had to be stopped as a result. Wearing a suit, wig, polyester gown, and a collar with bib over a shirt in such conditions makes concentrating as an advocate very difficult and looking professional almost impossible.

...I have hot flushes, sweating, brain fog, tiredness, occasional difficulty concentrating, feelings of overwhelm and lack of self-esteem and confidence

...The main impact of the menopause for me is on my mental health. I suffer hugely from confidence issues (never an issue when I was younger) - I moved chambers recently, and although my new colleagues were very friendly, I found it hard to integrate because I had less confidence socially than previously, so as a result, I've missed out on building relationships which would assist with my practice.

...I am increasingly less confident in my own abilities and the advice that I give, to the extent that I am considering leaving the Bar.

...I get tired far more easily than I did pre-menopause, which makes travelling to hearings and trials a very daunting prospect, and I get more stressed, and am prone to feeling very down which means it is then hard to motivate to do the work I need to do.

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<sup>3</sup> <https://pubmed.ncbi.nlm.nih.gov/33308643/>

...I had a sudden menopause due to cancer treatment. I feel that my memory and concentration have been adversely affected. My professional confidence and self-esteem have also been impacted.

...at first, my memory was affected [and I] couldn't recall the name of the case/client; where I was on a given day in the diary... After a few months I had to look into HRT, as I seriously contemplated having to give it all up!

...Mainly by a huge crisis in confidence, anxiety, increased stress and stress symptoms, onset of migraines, foggy thinking/brain, aching, lack of energy, emotional. Basically, I spent many years not recognising myself or my life.

...Problematic heavy bleeding being difficult to manage with three-hour sittings, anxiety, indecisiveness, lowered self-confidence, lack of sleep

...Unsympathetic and/or embarrassed judges when a short break is requested to refresher up i.e., to deal with the rivets of sweat pouring down my back

I get very tired. Very heavy bleeding almost daily bar a few days of respite means I am permanently tired and lethargic, but still have to go to work and at a time when CVP hearings can take place, it is very frustrating when for the most straightforward cases, judges insist on counsel attending in person when that could involve hours of travel and very few minutes actually in a courtroom!

...excessive fatigue/self-doubt/anxiety makes it harder to perform the role so [I] need to push harder to get the work done.

...tired all the time and not particularly interested in marketing events - general listlessness

In our survey<sup>4</sup> on this issue, barristers stated they had experienced:

- Outdated gender and age-related assumptions (i.e., based on a derogatory stereotype of an elderly woman)
- A perceived/measured decrease in work or earnings, particularly in comparison with male counterparts at an equivalent career-stage. Felt to be due to a perception that women (commonly from their 40s or 50s) are less energetic/dynamic/driven/focussed than a man at the same stage (who is perceived to be hitting the peak of his powers by way of experience, authority etc.);
- A failure to support a change in working pattern due to embarrassment on the part of managers/clerks/senior colleagues and those needing adjustments (shying away

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<sup>4</sup> Bar Council Survey 2021 – as part of a submission to the Women and Equalities Committee

from discussion of anything with a gynaecological connection is perceived as a major contributing factor);

- Explicit belittling or dismissal of the opinions of women of menopausal age, e.g., putting forcefully expressed or challenging opinions down to “hormones” or the menopause.

#### 4. Why it is important to support members and staff with the menopause

##### DEMOGRAPHIC

- Women aged 50-64 are the fastest-growing demographic in the workplace in the UK

##### LEGAL

- Whilst menopause isn't a named protected characteristic<sup>5</sup>, protected characteristics relevant to menopause are age, sex, and disability.
- Health and Safety at work legislation puts a duty of care on employers - failing to look after members and staff with menopausal symptoms could be argued as breach of this law.

##### ECONOMIC

- Chambers cannot afford to lose skilled and experienced advocates or staff
- Barristers and staff who feel supported are happier, more committed, and productive.

##### SOCIAL

- It's the right thing to do. Many consider resigning due to menopausal symptoms. Given strong evidence that work is a great provider of social support and a source of self-esteem it is important we enable people to stay in work
- The Bar already loses too many talented women mid-career – this has an impact on the number of senior women in the profession, and of the future judiciary – and therefore our ambition and ability to reflect the community we serve.

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<sup>5</sup> Equality Act 2010

## 5. What support can chambers/employers provide?

We want to see Chambers and employers of barristers producing menopause policies and offering menopause support so that barristers (and chambers' staff) are not forced out of the profession as a result of their symptoms.

We encourage chambers to:

1. Adapt or develop policies to encompass menopause, e.g., ensure that a workplace wellbeing policy includes recognition of the menopause<sup>6</sup>;
2. Train/educate all members and employees of chambers (not only those experiencing or likely to experience symptoms) on the menopause;
3. Tailor relevant policies (e.g., an absence policy for staff) to accommodate the menopause as a fluctuating life event and/or health condition;
4. Encourage a positive attitude towards flexible working patterns for all, including those experiencing the menopause;
5. Communicate a positive approach and attitude to the menopause e.g., by setting up a buddy system/encouraging peer-to-peer discussions and genuine conversation;
6. Consider environmental changes (which might also be embedded in policy) e.g., introduction of desk fans or air conditioning.

### **TIP**

Menopause related training is widely available and key personnel at least should undergo menopause training - whether organised by the Bar Council, any Bar-related organisation, or any other provider - so that sufferers know that the "go to" people have a decent understanding of the issues and have engaged in discussions about menopause and its management in the workplace

In order to ensure a truly inclusive environment it is important to ensure that policy recognises menopause can affect those who do not identify as women. Any policies should acknowledge this and state that it is not only those identifying as women that may be affected, and the understanding, acceptance and flexibility shown to women experiencing the menopause should be shown to others.

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<sup>6</sup> See Appendix 1: Menopause Policy Template

## 6. Pitching support appropriately

**Don't make assumptions.** Menopausal symptoms and the degree of support required varies. Support should be tailored to an individual's needs and wishes. Not every woman in her 50's experiences menopausal symptoms, not all symptoms are because of the menopause. It's also important to bear in mind that the symptoms are personal and can be embarrassing, so sensitivity is required in discussions.

Bear in mind that not everyone wants HRT or advice about yoga - so don't make assumptions about their symptom management and don't make suggestions!

| DO   | DON'T   |
|--|---|
| <ul style="list-style-type: none"><li>• Ask how you can best help</li><li>• Talk openly and supportively about menopause</li><li>• Follow any process your chambers has established</li><li>• Keep an open mind and be flexible</li><li>• Provide support and focus on the solution</li><li>• Maintain confidentiality</li></ul> | <ul style="list-style-type: none"><li>• Make assumptions</li><li>• Shy away from talking about menopause</li><li>• Share personal information without consent</li><li>• Address performance without considering health issues</li><li>• Give medical advice (but do suggest relevant support)</li></ul> |

### PRACTICAL TIPS TO HELP A CONVERSATION (CLERKS/PRACTICE MANAGERS/COLLEAGUES)

- *"How are you?"* is a simple effective opening question. The important next step is to wait and listen fully for the response.
- Find a suitable time and quiet place for your discussion.
- Avoiding comments such as *"I'm sure it will pass," "cheer up" "things could be worse"* or anything else which minimises the concerns of the person. During periods of high stress, we tend to lose rational thinking and fatigue may lead to an inability to think clearly.
- Listen without making comparisons to your own experience (such as *"I know how that feels"* ).
- Ask *"What can I do to help?"* The person may not have an answer immediately and simply knowing that there is someone willing to support them (in



whatever way) is often a huge relief. Practical offers of assistance can be very welcome.

- Be patient – people may not want to open up immediately but knowing that you are open to listening is likely to encourage discussion when they are ready.
- If faced with tears, frustration or anger it is natural to feel uncomfortable or feel the need to provide comfort. It can also be upsetting. Emotional expressions can be a very cathartic and it is advisable to simply allow the person to express themselves without interruption. Let the person know that it is okay.
- Maintain confidentiality. Except for ethical situations where you may be obliged to disclose concerns, reassure your colleague that the discussion is in confidence.

## **TIPS FOR BARRISTERS**

If you are a barrister, experiencing menopause symptoms and want to discuss its impact on you with your clerks/practice manager, it can be helpful to take the following approach.

- Think about what support or adjustments you may find helpful at work, and what action you feel comfortable taking. This could include, for example:
  - Reduced or different working hours
  - More remote working, fewer in-person conferences/hearings
  - Taking a short period of leave
  - What can be done if you have a particularly bad day (or night) and feel you can't go to work
  - What can be done if you find yourself in difficulties with symptoms whilst at Court
  - A fan for your room/desk, or adjustments to the air conditioning or ventilation
  - Availability and adequacy of toilet facilities
  - Availability of cold drinking water

- Professional coaching, to regain professional confidence or plan adjustments working practices
- Is there someone else in chambers who is going through or has recently been through menopause and may be able to share some wisdom from their own experiences?
- Bear in mind that your needs may change as your symptoms fluctuate

And then....speak to someone at work to discuss the support that chambers can provide:

- consider who you feel most comfortable speaking to about adjustments – one of your clerks, your practice manager, your head of group? Would it help to have a friend/colleague with you for that discussion, e.g., if you are feeling particularly vulnerable or are concerned the reception may not be supportive?
- form an action plan together and make sure you both have a note of it
- arrange to speak to them again after a month or so to review how things are going and whether any different adjustments would help. Continue to meet periodically, to ensure that you receive the support you want.

## 7. FAQs

### Is menopause protected under law?

There is poor awareness of both health and safety and equality law relating to menopause. Current law does not specifically protect those going through the menopause. More fundamentally, the law does not offer proper redress to those who suffer menopause related discrimination. The menopause is not in itself a protected characteristic under the Equality Act 2010. However, other protected characteristics (e.g., sex, disability, or age) could be engaged to protect those experiencing menopause from discrimination in the workplace. There have already been some successful Employment Tribunal claims on the grounds of direct sex discrimination relating to discriminatory responses to perimenopausal symptoms.<sup>7</sup>

To fit within the statutory framework - as currently drafted - often requires analysis and classification of menopause as a disability, but this can be reductive and inaccurate.

For staff, employers have a duty to ensure the health, safety, and welfare of employees at work (including a duty to minimise, reduce or where possible remove workplace health

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<sup>7</sup> see e.g. *Merchant v BT Plc*; [Davies v Scottish Courts and Tribunals Service](#); *A v Bon Marche*.

and safety risks for employees) and must generally assess health and safety risks for employees. A properly conducted health and safety risk assessment for those experiencing menopause is likely to include consideration of additional factors such as temperature and ventilation, rest areas, and access to cold drinking water. The risk of not ensuring compliance with relevant health and safety regulations is that employees could suffer injuries or further ill health as a result of poorly adjusted work conditions; this in turn could result in a breach of those regulations and a claim.

Are chambers required to have a Menopause Policy by the BSB?

There is no regulatory requirement for chambers to have a menopause policy.

## 8. USEFUL SOURCES OF INFORMATION

General menopause information:

- [NHS Menopause Conditions](#)
- [NICE Guidance](#)
- [British Menopause Society](#)
- [Women's Health Concern](#)
- [Henpicked Menopause Hub](#)
- [Menopause matters](#)

Articles:

- [The Menopause should not be case in a negative light](#)
- [Let's Talk about Menopause at the Bar](#)
- [Can the Bar Deal with The Change](#)
- [Why every business needs to care about the menopause](#)

**EQUALITY, DIVERSITY AND SOCIAL MOBILITY COMMITTEE  
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## APPENDIX 1: SAMPLE POLICY

**Chambers may choose to have a stand-alone policy for menopause or to incorporate elements of the below into other relevant policies e.g., a wellbeing policy.**



### MENOPAUSE IN CHAMBERS

#### 1. Introduction

Menopause is a natural part of life; however, it isn't always an easy transition. Whilst not everyone going through the menopause suffers with menopause symptoms, supporting those who do will improve their experience at work and benefit the workplace.

The menopause refers to the time when periods stop, and the ovaries end their reproductive function. Perimenopause is the period leading up to this. Menopausal symptoms usually start in the mid-forties and continue for several years.

Menopause can have an impact on how someone does their work and their relationship with colleagues. Again, the symptoms may not be consistent and can vary between individuals and from day to day. Unfortunately, there can be little understanding of the issues and little support for those undergoing menopause, especially in the workplace.

We need to be able to openly discuss the menopause, what it is and the impact it has in the workplace. We want to normalise conversations about this subject and reduce the stigma around it that some can feel. To support this, we will offer training as required.

**The following is intended as guidance for members (including pupils) and staff, providing information about how menopause may impact, and support you might be able to offer. We acknowledge that everyone is different and can be affected in different ways, but we trust that all might find it useful.**

#### Our policy principles

The aim of these policy principles is to:

- Let you know that we are aiming to create an environment in which colleagues can openly and comfortably instigate conversations about menopause symptoms, and the effect of these at work.
- Ensure everyone understands what menopause is and how it can affect colleagues and are aware of the support available.

- Ensure that members and staff suffering menopausal symptoms feel confident to ask for support should they need it, as well as any reasonable adjustments to allow them to work more comfortably.
- Reassure colleagues going through Perimenopause that we will always take a sympathetic and supportive approach and will consider the impact menopause could have on them.
- Equip members of chambers (including pupils) and staff with greater knowledge of the impact, and effects, of menopause.

We acknowledge that menopause can affect those who do not identify as women. This policy recognises that it is not only those identifying as women that may be affected, and the understanding, acceptance and flexibility shown to women experiencing the menopause will be shown to others.

## 2. Definitions

**Menopause** is defined as a biological stage in life that occurs when hormones change and eventually menstruation stops. Usually, it is defined as having occurred when periods have stopped for 12 consecutive months (for those reaching menopause naturally).

**Perimenopause** is the period, usually lasting several years, prior to menopause when the hormonal balance fluctuates and becomes unstable. In general, the body produces less oestrogen, and also less progesterone and other hormones responsible for regulating the menstrual cycle, leading to fluctuating physical and emotional changes. However, this process doesn't happen overnight, and can take several years – usually 4-5 but sometimes up to 15 – during which symptoms can vary and change.

**Post-menopause** is the time after menopause has occurred, starting after periods have stopped for twelve consecutive months.

## 3. Symptoms

Not everyone undergoing menopause will have symptoms or need help or support. However, 75% of those in menopause do experience some symptoms, and in 25% of cases these symptoms are considered severe.

Symptoms vary hugely in duration, severity, and potential impact. We recognise that everyone's experience of the menopause will be different but some of the most common symptoms experienced are as follows:

- Hot flushes
- Night sweats
- Sleep disturbance
- Irregular periods including heavy bleeding
- Weight gain and/or increased appetite

- Genito-Urinary problems for example vaginal discomfort, urinary frequency/incontinence
- Digestive problems
- Problems with memory
- Difficulty concentrating
- Joint and muscle pain
- Headaches
- Abnormal sensations such as tingling, electric shock sensations, burning sensations, itchiness
- Hair loss
- Dizziness
- Loss of confidence, difficulty making decisions or problem solving
- Low mood and irritability, feeling “down” and lacking in motivation and drive
- Mood swings
- Anxiety, constantly worry about things, feelings of being overwhelmed, panic attacks
- Tearfulness
- Forgetfulness and brain fog
- Tiredness and lack of energy, general feeling of sluggishness
- Reduced patience and tolerance
- A general feeling of “not being yourself,” that there’s something not quite right

#### 4. **Possible effects on work**

Effects on work can include:

- discomfort at work
- fatigue at work
- reduced engagement with work
- reduced job satisfaction
- reduced commitment to the organisation
- higher sickness absence
- an increased desire to leave work altogether
- difficulty with time management
- reduced emotional resilience
- impaired ability to complete tasks effectively
- adverse impact on relations with colleagues/feeling professionally isolated
- loss of professional confidence
- embarrassment around colleagues

#### 5. **Support we can provide**

We recognise that not everyone will be comfortable disclosing menopause-related difficulties to those they work with. However, members should feel welcome to discuss

difficulties, and the support that can be provided, with their clerk, practice manager, head of group or head of chambers and should expect a sympathetic ear and a flexible and supportive response.

Any such discussions will be in confidence.

We aim to provide an open and supportive culture that allows the provision of practical support to those going through menopause.

## **6. Practical help**

We recognise that symptoms can fluctuate and are a temporary so will not last forever. We will be led by the particular member of chambers (or pupil) or staff member in terms of what supportive measures they feel will help.

Practical ideas to think about include:

- access to fans
- good ventilation including windows which open and blinds that can be drawn
- ability to control temperature via air conditioning or heating
- access to cold drinking water to allow better management of hot flushes.
- clean, well-equipped, and comfortable toilet facilities near workstations, with appropriate sanitary disposal bins and feminine hygiene products, for anyone experiencing heavy or irregular periods or urinary incontinence.
- working environment: a reduction of exposure to noise to help reduce fatigue; quiet workplace rest areas, to aid relaxation when needed.
- alterations to working hours or case load
- last-minute cover when/if needed
- periods of leave if/when needed
- access to counselling services, whether via chambers or via the Wellbeing at the Bar Hub
- support in finding a “buddy”
- support in engaging with professional coaching to regain confidence
- anything else you think of that may help you

## **7. Conclusion**

As a result of the above information, chambers will now ensure implementation of the recommendations contained within this document, thus making it a policy, with the aim of providing facilities and a working environment which is supportive of colleagues as well as raising awareness throughout chambers by distributing this document to all members (and pupils) and staff.

## 8. Further support and information

- [NHS Menopause Conditions](#)
- [NICE Guidance](#)
- [British Menopause Society](#)
- [Women's Health Concern](#)
- [Henpicked Menopause Hub](#)
- [Menopause matters](#)