



## Clergy Dignity in Ministry

### Clergy Menopause Policy

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## Policy Statement

Every woman's experience of the menopause is different and not every woman will experience menopausal symptoms. However, some women experiencing menopausal symptoms, whether before, during or after this time of hormonal change may need additional consideration and support to fulfil the requirements of their roles.

Every woman's personal and professional circumstances are different. Because of this, it is neither feasible nor desirable to provide a policy with a structured set of specific actions that should be taken when seeking to support employees going through the menopause.

This menopause policy aims to develop and promote an environment and culture that supports office holders experiencing the menopause, so they can feel confident about raising issues relating to their symptoms and asking for reasonable adjustments to be made regarding their workplace environment and/or how they carry out their role.

This policy reflects the Diocese of Blackburn's commitment to ensuring the health, safety and wellbeing of all office holders; as well as its commitment to equality and diversity within the ministerial environment and culture.

This policy aims to:

1. Enable office holders experiencing the menopause to continue to be effective and feel supported in their role.
2. Help Clergy in positions of responsibility, Area Deans and Archdeacons or those to whom office holders are accountable, to understand how the menopause can affect office holders, and how they can support those experiencing the menopause as they carry out their role and perform their duties.
3. Raise awareness amongst office holders to make them aware of their rights and responsibilities with regards their experiencing of the menopause and any menopausal symptoms, as well as the rights and responsibilities of their colleagues.
4. Foster an environment in which office holders can openly and comfortably instigate conversations or engage in discussions about the menopause in a respectful and supportive manner.
5. Highlight the need for all matters relating to an office holder's menopause and any requests for support and/or adjustments to be dealt with sensitively and in confidence and in accordance with the Diocese of Blackburn's data protection policy.
6. Offer assurance to office holders that they can be confident they will not be subject to any disadvantage if they take up any of the support available or request changes to their workplace environment and/or how they perform their duties.



7. Encourage office holders to request to speak to the Dean of Women in Ministry, a member of the BDBF HR team or another appropriate person if they are uncomfortable sharing their personal and sensitive menopausal experiences with those to whom they are accountable.
8. Reassure office holders that a 'need to know' only approach will be taken, keeping to an absolute minimum the number of people who are informed or involved in discussions regarding the provision of support and adjustments.
9. Underline the importance of confidentiality and privacy by all concerned if other church officers need to be involved in the provision of support and adjustments.
10. Raise wider awareness and understanding among all office holders about the menopause.
11. Outline the support and reasonable adjustments available.
12. Help the Diocese of Blackburn be recognised for fostering a supportive ministerial environment and culture across the diocese, enabling the recruitment and retention of office holders experiencing the menopause.

For those office holders who prefer not to discuss their menopause with those to whom they are accountable, they may be asked to give their consent to sharing some information relating to their menopausal experience and symptoms with their Area Dean or Archdeacon to aid in the provision appropriate support.

If office holders are in any doubt as to what their rights are they are encouraged to discuss matters with their Archdeacon or those to whom they are accountable; the Dean of Women in Ministry; or a member of the BDBF HR team.

This policy does not form part of the Statement of Particulars and it may be amended at any time. It may change because of amendments in the law.

This policy is effective from 8<sup>th</sup> September 2023 and shall not apply to any actions that occurred prior to this date.

### **Who is covered by the Policy?**

This policy is intended to apply to all current and new office holders of the Diocese of Blackburn. This includes all clergy holding office under Common Tenure, Qualified Common Tenure and Freehold and applies equally to a Cathedral Clergy, Archdeacons and Bishops.

### **What is the Menopause?**



The menopause is a natural transition stage in most women's lives. It is marked by changes in hormones over a period of time until the woman stops having periods. For some it will be medically induced through surgery or medical treatments. 'Going through the menopause' can take several years. About 70% of women experience a wide range of physical and psychological symptoms and it has been found that approximately 60% of women find their working life negatively affected by symptoms.

Each woman will be affected in different ways and to different degrees over different periods of time, and menopausal symptoms can often indirectly affect their partner, families and colleagues as well.

Some women with pre-existing health conditions, may find that the menopause can aggravate their existing health conditions or even trigger new ones. Menopausal symptoms can in turn also be made worse by any pre-existing health conditions.

## Definitions

- **Menopause** – A natural transition stage in most women's lives lasting from four to eight years, although for some women it can be much longer. Most women experience the menopause between the ages of 45 and 55. It is marked by changes in the hormones and the woman stops having periods. Women may also experience a wide range of physical and psychological symptoms as a result of the menopause.
- **Premature menopause** – For some women, it can be experienced at a much younger age, in their 30s or even younger. This is sometimes called premature ovarian insufficiency. The NHS estimates that 1 in every 100 women will experience premature menopause.
- **Medical/surgical menopause** – There are some medical circumstances that will create an immediate menopause, whatever the woman's age, such as a medically induced menopause to shrink fibroids or when the ovaries are damaged by specific interventions such as treatment for cancer, or when a woman's ovaries are removed as part of a hysterectomy.
- **Perimenopause** – is when you have symptoms of menopause but your periods have not stopped. Perimenopause ends and you reach menopause when you have not had a period for 12 months.
- **Post-menopause** – A term used when a woman's periods have stopped for 12 consecutive months. However other menopausal symptoms may not have ended so soon. Problematic symptoms may continue for years.

## Menopausal Symptoms

Menopausal symptoms may include:



- Hot flushes: a very common symptom that can start in the face, neck or chest, before spreading upwards and downward, may include sweating, the skin becoming red and patchy, and a quicker or stronger heart rate.
- Heavy and painful periods and clots, leaving those affected exhausted, as well as practically needing to change sanitary wear more frequently. Some affected may become anaemic.
- Night sweats, restless leg syndrome and sleep disturbance.
- Low mood, irritability, increased anxiety, panic attacks, fatigue, poor concentration, mental fog, loss of confidence and memory problems.
- Urinary problems: more frequent urinary incontinence and urinary tract infections such as cystitis. It is common to have an urgent need to pass urine or a need to pass it more often than normal.
- Irritated skin, including dry and itchy skin or formication, and dry eyes. Also vaginal symptoms of dryness, itching and discomfort.
- Joint and muscle aches and stiffness.
- Weight gain
- Headaches and migraines
- Menopausal hair loss
- Osteoporosis where the strength and density of bones are affected by the loss of oestrogen, increasing the risk of the bone-thinning disease osteoporosis.
- Side effects from hormone replacement therapy (HRT), a form of treatment for menopausal symptoms for some people (although not suitable or appropriate for all).

## Roles and Responsibilities

### ***The Diocese of Blackburn will:***

1. Signposting office holders to the Pastoral Support provided by the Diocese of Blackburn including the Inter Diocesan Counselling Service and Health Assured support scheme as appropriate.
2. Recording in writing any substantial adjustments to an office holder's ways of working; ensuring an ongoing dialogue between themselves and the office holder and any key church officers; ensuring all agreed adjustments are implemented.
3. Ensuring reviews of the arrangements are conducted to ascertain if they are still appropriate and practicable.
4. Ensuring all policies and procedures take account of the effects of the menopausal symptoms so any office holders experiencing the menopause are not disadvantaged because of their symptoms.



5. Providing guidance and support to parishes when parish representatives (Church Wardens, PCC members etc) are negotiating any significant changes and adjustments to how an office holders performs their duties.

**Office holders are requested to:**

1. Taking personal responsibility to looking after their health, work-life balance and wellbeing, including taking note of good practice and guidance.
2. Contributing to a respectful, open and honest ministerial environment and culture; being willing to help and support colleagues and understand any necessary adjustments a colleague may receive because of their menopausal symptoms.
  - a. Informing their Clergy in posts of responsibility, Area Dean or Archdeacon (or the Dean of Women in Ministry) if they are struggling with menopausal symptoms that may impact on their ministry, so that appropriate support can be provided to enable them to continue to be effective in their roles.
  - b. Seeking any appropriate support through their GP, the Inter Diocesan Counselling Service, Health Assured Scheme or any other external organisations (see page 10).
3. Informing their Clergy in posts of responsibility, Area Dean or Archdeacon if/when their need for any adjustments. Reporting any instances of harassment, victimisation or discrimination experienced because of issues related to the menopause.

**Support and Reasonable Adjustments for Office Holders experiencing Menopause**

The Diocese of Blackburn aims to:

1. Provide as much support for office holders as is reasonably practicable and ensure Clergy in posts of responsibility, Rural Deans and Archdeacons support office holders sympathetically.

**Assessments for reasonable adjustments**

Clergy in posts of responsibility, Area Deans and Archdeacons may need to consider reasonable adjustments. The areas to consider are:

- The ministerial environment including temperature and ventilation.
- Access to adequate toilets, sanitary provision and washing/changing facilities. • Access to drinking water.
- Adequate working times and break times. • Workload and work patterns
- Bullying and harassment.



Office holders who are experiencing menopausal symptoms can apply for the following adjustments to support them in a workplace setting (where their main workplace is outside of their accommodation provided by the Diocese):

- Control over environmental factors: such as the provision of desk fans on request; review of office seating plans so affected office holders can be near the window or open doors, or away from direct sources of heat such as radiators; fitting blinds to windows.
  - Provision of greater access to chilled drinking water.
  - Access to toilets, sanitary provision and changing/washing facilities for office holders to change clothes during the working day.
  - Flexibility around the taking of breaks, or increased breaks during the working day, in which case the office holder may need to arrange cover as necessary for these breaks.
  - Flexibility around attending relevant medical appointments.
  - Temporary changes to the office holders' duties, such as undertaking fewer highvisibility activities, such as giving formal presentations or running meetings as it can be difficult to cope with symptoms such as hot flushes.
  - Flexibility around working times if an office holder is affected at particular times of the day.
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- Depending on the severity of the office holder's menopausal symptoms and the changes needed to manage these symptoms other church officers may also need to be informed or included in any discussions, this may include church wardens, PCC members, church workers and official volunteers. Where this is the case, every effort will be made by the Clergy in posts of responsibility, Area Dean, or Archdeacon to make this process as tactful and sensitive as possible.

### **Self-management for Office Holders experiencing the Menopause**

Office holders experiencing menopausal symptoms are encouraged not to suffer in silence. They are encouraged to consider:

- Seeking medical advice from a GP or other relevant health care professional.
- Discussing symptoms with their Clergy in posts of responsibility, Area Dean, Archdeacon (or Dean of Women in Ministry) and request appropriate ministerial environment or work pattern adjustments.

Office holders are encouraged to make healthy lifestyle choices that may help with some of the symptoms, such as:

- Eating healthily and regularly: research has shown a balanced diet can help in alleviating some symptoms.





- Drinking plenty of water.
- Exercising regularly: to reduce hot flushes, improve sleep, boost mood and maintain aerobic fitness levels.
- Not smoking: to help reduce hot flushes and the risk of developing serious conditions.
- Ensuring alcohol intake is within recommended levels and cutting down on caffeine and spicy food all of which can trigger hot flushes.
- Having access to natural light.
- Staying cool at night: wearing loose clothes and ensuring the bedroom is well ventilated to help with hot flushes and night sweats.
- Ensuring adequate rest and relaxation to reduce stress levels and improve mood.

### Further Guidance and Information

For further guidance and information on the symptoms and for advice on how to manage the symptoms please refer to the following links:

- British Menopause Society (BSM): [www.thebms.org.uk/](http://www.thebms.org.uk/)
- Daisy Network: [www.daisynetwork.org](http://www.daisynetwork.org)
- Menopause Matters: [www.menopausematters.co.uk](http://www.menopausematters.co.uk)
- NHS information:  
[www.nhs.uk/conditions/menopause](http://www.nhs.uk/conditions/menopause)  
[www.nhs.uk/conditions/earlymenopause](http://www.nhs.uk/conditions/earlymenopause) • NICE guidelines on 'Menopause: diagnosis and treatment':  
[www.nice.org.uk/guidance/ng23/ifp/chapter/About-this-information](http://www.nice.org.uk/guidance/ng23/ifp/chapter/About-this-information)
- The Menopause Exchange: [www.menopause-exchange.co.uk](http://www.menopause-exchange.co.uk)
- Women's Health Concern: [www.womens-health-concern.org](http://www.womens-health-concern.org)



## **Appendix One: Guidance to facilitate discussions between Office Holders and Clergy in posts of responsibility, Area Dean or Archdeacon (or alternative contact).**

Every woman's experience of menopause is different and some women may not have realised they are going through the perimenopause or menopause stage. Because of this it is not feasible to give a structured set of specific actions to take or questions to ask.

However this guidance should help inform a conversation. This guidance can be used when:

- An office holder wishes to speak about their symptoms.
- An office holder just wants to talk about how they are feeling/ what they are experiencing (they may not recognise themselves as being symptomatic).

Things for the Clergy in posts of responsibility, Area Dean or Archdeacon to do:

1. Allow adequate time to have the conversation
2. Find an appropriate, comfortable and private space to talk
3. Encourage them to speak openly and honestly
4. Discuss ways in which they can be supported (see symptoms below)
5. Agree actions, and how to implement them.
6. Ensure that this record is treated as confidential and is stored securely.
7. Agree if and how other members of the team or colleagues should be informed, and by whom
8. Ensure that time is agreed for a follow up meeting. Don't rely on quick queries during chance encounters or at other meetings.

Things for the Clergy in posts of responsibility, Area Dean or Archdeacon not to do:

1. Raise the menopause or use the term without the office holder doing so first
2. Belittle, judge or joke about the office holder's symptoms or feelings



## **Appendix Two: Support for office holders**

Clergy in posts of responsibility, Area Deans and Archdeacons are not medical professionals and they are not expected to have answers to questions about menopause treatments or the causes of the menopause, etc. However, they can help those suffering from symptoms by making even small adjustments. The list below is not exhaustive but should be considered as part of a conversation.

### ***Hot Flashes***

- Consider temperature control for their work area, such as a fan on their desk (allowing them to sit or work near a window, or away from a heat source).
- Encourage the wearing of loose and relaxed clothing.
- Provide access to a rest room for breaks if their work involves long periods of standing or sitting, or a private quiet area if they need to manage a severe hot flush.
- Provide regular breaks in meetings.
- Allow online meeting attendees to turn off their cameras.
- Provide an outdoor space at office locations for work and breaks.
- Provide easy access to drinking water.

### ***Heavy/light periods***

- Have permanent access to washroom facilities at offices.
- Ensure storage space is available for a change of clothing.

### ***Headaches***

- Have ease of access to fresh drinking water.
- Offer a quiet space to work in offices.
- Offer noise-reducing headphones to wear in open plan offices and support the use of these. • Allow time out to take medication if needed, and for this to take effect.

### ***Difficulty sleeping***

- Consider flexible working, including late start times, particularly if someone is suffering from a lack of sleep.
- Make more use of home working options.

### ***Low mood/mood swings***

- Agree time out from others, when required, without needing to ask for permission.
- Identify a 'time out space' for them to be able to go to 'clear their head.'



- Encourage office holders to make use of the available support services, including the Health assured employee assistance programme.

### ***Loss of confidence***

- Ensure regular 1-2-1's with the office holder and encourage them to make use of the Pastoral Support available.

### ***Poor concentration***

- Discuss if there are times of the day when concentration is better or worse and adjust working pattern/practice accordingly.
- Review task allocation and workload.
- Encourage the use of notebooks, apps, or software (e.g. Office 365 planner) for lists, action boards, or other memory-assisting equipment or resources.
- Offer quiet space(s) or times to work.
- Offer noise-reducing headphones to wear in open offices.
- Discuss how interruptions could be reduced. • Have agreed un-interrupted time to catch up with work.

### ***Anxiety***

- Encourage the office holder to make use of the Pastoral Support available.
- Allow time away from their work to undertake relaxation techniques.
- Support them in undertaking activities such as breathing exercises, or physical activities such as going for a walk.
- Be aware how your own management style may contribute to their anxiety levels, e.g. scheduling things at the last minute, forgetting to include them in emails or conversations, not communicating effectively or passing on critical information in a timely fashion, etc.

### ***Panic attacks***

- Agree time out from others, when required, without needing to ask for permission.
- Be able to have time away from their work to undertake relaxation techniques.
- Undertake calming activities such as breathing exercises or going for a walk.

### ***General***

- Discuss whether they have visited their GP. Depending on the discussion, this may be the next step to suggest, particularly if the areas of difficulty are sleeping, panic attacks or anxiety.



- Consider whether it may be helpful to refer specific issues to the HR Team who may be able to arrange for an Occupational Health referral to give specific advice regarding the workplace.
- Ensure they are aware, and know where to find details, of the Pastoral Support services.
- Ensure they are aware of and encourage them to visit the Clergy Wellbeing section of the diocesan website. which has useful information to help manage wellbeing.
- Encourage them to keep up to date with, and participate in, any wellbeing activities, and to join any menopause network or group.
- Discuss with them if they have a trusted colleague who they discuss any of the above with, informally and in confidence.
- Schedule a time to meet again.