Menopause and Work in Canada
Unleash the Potential: Menopause at Work

Employers in Canada have an exciting opportunity to create menopause inclusive workplaces. Women over the age of 40 make up one quarter of our workforce and are a key driver of Canada’s economy. The fastest growing segment of working women in Canada are those aged 45 to 55 – the time when most women reach menopause. There is a powerful opportunity for employers in Canada to unleash the full potential of this sizeable workforce demographic by better supporting them through what is a universal experience.

Groundbreaking data produced for this report reveals the staggering impact of the unmanaged symptoms of menopause on employers and on women’s earning potential. Breaking the silence and the stigma of menopause at work isn’t just the right thing to do, it also benefits the bottom line. Women are the backbone of critical sectors, providing much needed wisdom, experience and a deep level of competence. They are mentors to younger employees and important leaders in their organizations. If your workplace cares about attracting and retaining experienced and skilled employees, menopause must be seen as a legitimate workplace issue. If your workplace cares about age and gender equality, or helping women break through the glass ceiling, menopause must be on the agenda.

We encourage you to be part of the Menopause Works Here™ campaign, to download our Menopause Inclusive Playbook™ and to join the Menopause Foundation of Canada as we celebrate women in the prime of their working lives.

“Menopause doesn’t stop during the workday. It’s important employers have the right solutions and tools available to support their employees. We know that individuals rely on their employer benefits to support them through all of life’s stages, including menopause. Employers who invest in their employees see the return – through retention, productivity, and engagement, to name a few.”

- Marie-Chantal Côté, Senior Vice-President, Group Benefits, Sun Life Canada

Janet Ko & Trish Barbato
Co-Founders, The Menopause Foundation of Canada
We hear the stories of menopausal women* every day. They are accountants, retail workers, nurses, engineers, teachers, housekeepers, CEOs, artists and everything in between. They are mothers, caregivers, breadwinners and decision makers. We see how needlessly they suffer.

We hear about the symptoms that are impacting their work and their ability to thrive in the prime of their working lives. We hear from women who change jobs, retire early, don’t take a promotion, all because they could not access appropriate care and treatment.

As members of the Menopause Foundation of Canada’s Medical Advisory Board, we are proud contributors to the movement in Canada that is breaking the silence and the stigma around menopause. As clinicians, we call upon employers to be more knowledgeable and proactive in providing environments that support and retain women in their menopausal years. Together, with the support of qualified health care providers, we are confident we can significantly improve the lives of women throughout their menopausal years and positively impact work in Canada.

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* People who are transgender, non-binary or intersex may also experience menopause, which can be distinct for each person due to age-related hormonal changes or hormone treatments and surgeries.1


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Canada’s working women are a force to be reckoned with

Organizations of all sizes and in all sectors rely on women to get the job done, including the nearly one-quarter who are aged 40+ - the prime perimenopause, menopause and postmenopause years. Today, two million of them are between 45 and 55 - the age when most reach menopause - and this number is projected to grow by nearly one-third by 2040.¹ They are the fastest growing segment of female workers in Canada.

There is a powerful and largely untapped opportunity for employers in Canada to act to unleash the full potential of this sizeable workforce demographic by better supporting them through what is a universal experience - menopause. In the prime of their lives with priceless experience to share and contribute, women aged 40+ are a highly valuable resource employers can’t afford to lose.

Leaving the Workforce in their Prime

There is a 14% drop in the number of working women in Canada between 45 (85.9% work) and 59 (71.9% work).² Compared to a 10% drop for working men.
Menopause: The Staggering Economic Impact*

It is estimated that the unmanaged symptoms of menopause costs the economy $3.5 billion per year.

$3.5 billion

$237M in lost productivity

540,000 lost days of work attributed to menopause symptom management

$3.3B in lost income due to a reduction in hours and/or pay or leaving the workforce altogether

*The Menopause Foundation of Canada engaged Deloitte Canada to assist in providing an economic analysis as part of the Menopause and Work in Canada report. The research was based on Canadian statistics on the labour market and sensitivity analysis was conducted based on studies from the United States and the United Kingdom that evaluated the economic impact of menopause.

The analysis only includes women who are employed full-time in the workforce. However, menopause also affects women in other forms of employment, such as part-time employment and self-employment. Therefore, the impacts of menopause may be greater if all forms of employment are considered.

Women’s Earning Power Takes a Hit

At the peak of their earning potential, women are opting to take a paycut.

“I reduced my work week from 5 days to 4 days for the last 7 years of my career. Perimenopause was debilitating and each symptom that reared its ugly head challenged my capacity to work full time. The result of that decision impacted my monthly income, my pension, and my advancement opportunities. It was a very difficult decision to make, but with no support, no information, and no understanding of what was happening to my health, I had to reduce my workload so that I had some capacity to figure out my health.”

- Survey Respondent
Laura was in her 40s at the height of her career when she developed debilitating fatigue. She didn’t talk to her doctor, assuming it was chronic fatigue syndrome. Later when she also developed joint pain, the doctor said a lot of women her age have similar problems; there was no mention of perimenopause.

Work became impossible, so at the age of 44, Laura resigned from her estate administration position with a private bank. “That was hard,” she said. “I was really good at my job.”

Laura then developed severe anxiety and sought help from her doctor. She was told that anxiety and menopause were not related. When she started having hot flashes, she found a menopause specialist and was ultimately prescribed menopause hormone therapy.

By then, the damage to her career was done. Laura now works part-time in retail at a fraction of her former salary, minus the pension and benefits of her previous role.

“We know so little about how young we could be when perimenopause symptoms start,” she said. “We need to be taught about it in the same way as we’re taught about our periods.”

Laura wants to see more enlightened human resources approaches at work. “Employee turnover is costly. If they can accommodate a pregnancy, why wouldn't they accommodate menopause?” she said. “We all live longer than we used to, so we have to figure this out.”

With better-informed doctors and businesses, things might have been different for Laura. “I didn’t have to lose my career and endure a decade of suffering debilitating symptoms,” she said.
Where Women Work

Women continue to make up the bulk of historically female-dominated sectors, such as health care/social assistance (81%) and education (69%). They are well-represented in areas like government services (65%), business (64%), and finance (50%); other sectors increasingly rely on women too, including agriculture (30%), construction (29%), manufacturing (29%) and mining (19%).

The dominant age group in some sectors also closely matches the menopause years – 50% of nurses in Canada, for example, are women over the age of 40.
“Through our personal experiences, we are seeing unique challenges that Indigenous people face when going through this stage in their lives. What figures prominently is the lack of medical support for the physical challenges, the lack of psychological support for the emotional challenges, and the lack of mental health support for the challenges to our ongoing well-being.

The Indigenous experience of menopause is multi-layered. Menopause is one of the important stages of life for Indigenous people that has significant spiritual meaning and impacts. Indigenous people face even more challenges to accessing health care and support than the general population. We felt compelled to start important conversations about the menopause transition and find ways to restore knowledge around this stage of life that can empower people in our communities.

The transition to menopause and menopause also has serious impacts on our professional lives. As self-employed professionals, the physical changes have interfered with the ability to make consistent income. Sleepless nights (insomnia, night sweats), episodes of joint pain, and exhaustion are just a few of the menopause effects that result in lost work and lost income. We also define work as unpaid work, for stay at home parents or grandparents who are raising children, or the myriad of work done by volunteers in our communities which keep our communities going in a lot of ways.”

Christi Belcourt, artist (top photo) and Tanya Kappo, lawyer (lower photo). Hosts of “Notokwew Ponkiyokewin - Indigenous Centred Menopause”
Could menopause be the missing link to explain why more women aren’t breaking through the glass ceiling? It’s clear that the age range impacted by menopause intersects with a time of life when women are in or poised for increasingly senior leadership roles. Canada needs more research to find out if this is coincidence or causal.

Women’s Lived Experience:

“I decided in my 20s that I would break the glass ceiling and lead a public company. When the opportunity arose at the age of 55, I had to decline. It would have been impossible to take that job while managing my severe symptoms related to menopause.”

- Patricia
Blindsided in the Prime of their Working Lives

One in two women in Canada say they are unprepared for menopause with less than one quarter of survey respondents believing they are very knowledgeable about the signs and symptoms of perimenopause and menopause. The menopause knowledge gap is real and contributes to millions of women needlessly suffering through symptoms that have a negative impact on their health, their quality of life and their work.

While everyone’s menopause journey is unique, virtually all women surveyed (95%) say they experience symptoms, with an average of seven symptoms reported. Symptoms can range from the commonly known, such as hot flashes (62%), sleep disturbances (57%) and mood swings (39%), to the lesser known, such as anxiety (32%), urinary incontinence (23%) and heart palpitations (19%).

Of course, symptoms don’t limit themselves to off-work hours. And they don’t discriminate – physiotherapist, doctor, office worker, mail delivery person or hotel desk clerk – what a woman does doesn’t dictate how and when her symptoms will show up.
What’s Happening to Me?

Around age 45, Grace started experiencing dramatic mood shifts. She had no idea what was happening. “It was affecting my home life,” she said. It was also affecting her at work. Anxiety set in, along with mental fog. “What if I can’t think properly again, what if I can’t do my job?” She gained 20 pounds in one year.

With a young child, an ailing mother and a busy job she thought it might be her circumstances. Her doctor prescribed an anti-depressant; it made her feel worse. It was her husband who solved the mystery when his online research found that in the UK, they treated perimenopause with hormone therapy. Grace sought a referral to a menopause clinic and started hormone therapy. “I noticed a shift within three days,” she said. “Moods became more even, hills instead of mountains.” With moods settled, she was able to focus on work and had the energy to work on fitness and weight loss. Without treatment, she believes she would not have been able to continue her career.

Grace wants women’s health to be talked about more openly, like in the UK where her global employer has operations and has put in place a policy to accommodate women going through menopause, including giving days off to help women manage their symptoms. “Women tend to be in their 40s when they hit their career peak and they are working very, very hard,” she said. “I don’t want there to be a stigma or be told ‘Don’t talk about it’. We need to be more human at work now.”

She also believes there needs to be greater awareness among men. “Most men have no clue. There needs to be a sense of psychological safety around this,” she said.
Lack of knowledge about menopause, challenges accessing care, and stigma in the workplace impacts women’s ability to thrive in the prime of their working lives. For too many women, it becomes too much - an estimated 1 in 10 will leave the workforce due to unmanaged symptoms of menopause.
The Stigma of Menopause in the Workplace

Despite its impact, talking about menopause at work remains taboo, with 40% of working women believing there is stigma around the topic. That leaves women feeling alone and silently trying to cope, giving their best to their work without asking for the support that could make a difference.

2/3 (67%) would not feel comfortable speaking to their supervisor about their symptoms

70% would not feel comfortable speaking with HR about their symptoms

48% would be embarrassed to ask for support that could make a difference

Hard Truths

In our culture, menopause is overwhelmingly viewed as negative and is often the butt of jokes. The stereotype of the menopausal woman is unflattering and is fueled by ageism that devalues women as they get older. It’s not surprising that women fear harsh judgment at this time of life.

3 in 10

Women believe others will perceive them as weak, old, or ‘past their prime.’

1 in 2

Women worry that menopausal symptoms could affect their appearance at work
Most women believe menopause inclusive workplaces could have a positive impact on their general well-being; Other clear benefits - helping women break through the glass ceiling (62%), reducing ageism (61%), and retaining top talent (59%).

Supporting women through menopause offers organizations a powerful win-win. The time is now.

Three-quarters of women surveyed would like to see workplaces offer supports, and the most commonly recommended are simple.
Women’s Lived Experience:

Menopause Champion and Changemaker

Darlene didn’t know what perimenopause was until she was in it and then it hit like a storm. She experienced 33 symptoms, including brain fog and lack of sleep. It affected her ability to work and left her feeling alone, helpless and hopeless. She tried to speak to her former manager, but he told her that because it was not something he’d ever go through, he didn’t know how to help her. “There was no support at my work,” she said. “I learned that you do not talk about it due to the stigma.” Darlene felt she had no choice but to leave the role she loved at a federal government agency.

After consulting a pharmacist certified by the North American Menopause Society and her family doctor, Darlene embarked on a program of improved nutrition, lifestyle changes and pursuing her passion for powerlifting. Eventually she tried menopause hormone therapy and stayed with it. She was able to sleep properly and think clearly again, so much so that she returned to work.

Darlene was also inspired to take action.

To prevent other women from enduring perimenopause with little understanding and no support, she created “My Menopause at Work” in the summer of 2023.

“My Menopause at Work” is a virtual group on the federal government platform, GCcollab, a collaboration and networking platform open to all Canadian public servants (federal, provincial and territorial), and academics and students (by invitation).

It is a one-stop shop that provides information, resources and peer support to manage the menopause transition at work.

Realizing Darlene’s vision for My Menopause at Work started with a conversation with her new manager. She spoke about her lived experience, how it affected her at work and how My Menopause at Work could assist with talent retention and productivity, putting the federal government in a leading position on the issue. This time her manager was receptive, and Darlene is moving ahead with plans for a kick-off event to mark World Menopause Day on October 18, 2023.
In August 2023, The Menopause Foundation of Canada partnered with the BC Nurses’ Union (BCNU) and worked with Leger to conduct two focus groups with nurses exploring the impact of menopause on their work and careers. We believe the research confirms that menopause is a legitimate workplace issue for the nursing profession. These learnings may also apply to women in other sectors.

The Research: Four characteristics of the profession were identified as having an impact on nurses managing symptoms related to the hormonal changes of menopause:

1. Workplace culture: there is an established norm that you carry on with your job, no matter what.

2. Physical/emotional demands of the job: working on the front lines requires standing for long hours, with little or no time for breaks. Emotionally, nurses are expected to present a calm and collected front to patients, which can be difficult when experiencing uncomfortable symptoms.

3. Scheduling/Shift work: not only are the physical and emotional demands of a 12 hours shift difficult, they can also be a barrier to practicing good habits that help alleviate menopause symptoms.

4. Staffing: nurses feel pressured to take on more work and to work longer hours.

Physical and mental/emotional impacts of menopause at work:
Participants noted they experience debilitating physical and mental symptoms of menopause on the job with top mentions going to hot flashes, brain fog, exhaustion, headaches and body aches. Top mental/emotional symptoms included stress, embarrassment, a lack of confidence and fear of discussing what they are going through with others.

Self-accommodation: Some nurses have chosen to self-accommodate to continue working. Notably, many participants have voluntarily switched jobs (and taken a pay cut in some cases), moving away from bedside nursing to desk jobs. Some have resorted to taking pain medication, using sick time, or excusing themselves from patient care.

In British Columbia

- 48,000 nurses are represented by BCNU
- More than 90% of nurses are women
- More than 50% of nurses in Canada are over the age of 40*

Three nurses who participated in the focus groups on menopause for this report share their perspectives. To maintain confidentiality, their names have been changed.

Facing the same lack of information and understanding of perimenopause, menopause and postmenopause as other women, nurses also have to deal with shift work and the demanding physical and emotional nature of the job. Added to that, their work is complex and can be a matter of life and death as they monitor patients, administer medications and deal with the new and increasing applications of technology. We talked to three nurses who participated in the focus groups for this report, here’s what they said:

The psychological pressure can be intense. Here’s how Sarah, an acute care nurse, described how hectic it is: “Getting your first cup of coffee, it’s often 11 a.m. by the time you get to it, warmed up several times. You don’t get to use the bathroom, you don’t eat, you don’t get breaks. If you have a hot flash, ‘Suck it up princess’ is the attitude I see and hear.”

Add to that, other perimenopause symptoms: “I have brain fog,” Sarah continued. “I feel like I can’t retain information as easily as I could before. I would like to ask for help to do fewer tasks at a time, but I just think our profession doesn’t allow for that. You essentially have to be quiet.”

Heavy bleeding, also common in perimenopause, creates more challenges. Said Priya: “Trying to give medications, sometimes heavy narcotics, you’re bleeding heavily. You wonder ‘Is it showing? Do I bring more uniforms to work?’ It was difficult. I was self conscious.”

Looking forward, providing support within the system presents challenges. Said Leila, “To get support during menopause, I don’t know how it’s even possible in the state of affairs the system is in. It is so short-staffed, so busy, working in conditions that are not ok. It’s just survival every day.”

“This ground-breaking report speaks to how nurses’ working conditions compound the challenges they face in managing their symptoms of perimenopause and menopause at work. Critically, some nurses are self-accommodating, taking pay cuts or reducing hours. During a nursing shortage we are losing highly knowledgeable and skilled nurses in the prime of their careers. Politicians and health-care decision makers need to commit to improving working conditions and accommodation policies to create menopause inclusive workplaces that help contribute to nurse retention strategies.”

- Adriane Gear, President, BC Nurses’ Union
Dalhousie University is one of Canada’s leading academic institutions and is stepping up to become menopause inclusive. “We took a leap in 2022 to include menopause as part of our wellness activities and have now expanded to a monthly support group that has grown to more than 80 employees exploring the transition to menopause through discussions around nutrition, advocacy, active aging, mental health, hormone therapy, joint and pelvic health,” said Dr. Shawna O’Hearn, director of Global Health, Dalhousie University.

The support group is creating change across the institution. Menopause is now part of the training for staff and supervisors. Departments are exploring flexible work schedules, making quiet spaces for employees to recharge, and developing strategies to support all team members. “We are also expanding our work to influence the curriculum of medical learners by incorporating menopause into the training of family physicians and advancing discussions across other health profession programs,” added Dr. O’Hearn.

By listening to the lived experiences of its employees, Dalhousie is focused on becoming menopause inclusive to attract and retain a critically important segment of our workforce. “As we open the conversation, remove the silence, and eliminate the stigma associated with menopause, we will create work environments that are open to all transitions of life,” said Dr. O’Hearn.
How Canada Compares:

The UK Leads the Way on Menopause and Work

In the U.K., where it’s estimated one in ten women leave their jobs because of challenges related to menopause symptom management, the country is leading the way in national conversations about menopause and work.

Parliamentarians have taken up the cause, led by the Women and Equalities Committee. Following its 2021 survey that revealed most women experiencing menopause symptoms at work do not seek help, the committee’s 2022 report, *Menopause in the workplace* concluded that menopause is causing the U.K. economy to “haemorrhage talent”.

Recommendations include creating a national Menopause Ambassador; producing a government-led public health campaign; and lowering the cost of HRT prescriptions. The recommendations were met with approval from women’s health advocates, and in January 2023, the U.K. government agreed to some of the report’s suggestions, including publishing guidance on how to support menopausal employees, and enshrining the right to flexible work in law.

In the country’s vast National Healthcare Service (NHS), the push for greater support of menopausal working women has already moved from discussion to action. In November 2022, the NHS released guidance for supporting menopausal workers that includes education for employees, their partners and families, along with peer support and workplace accommodations.

By comparison, in the U.S. workplaces, stigma and silence around menopause persist and there are few legal protections for menopausal workers. One study estimates the cost associated with lost work due to menopause symptoms to be $1.8 billion annually. There are signs of progress, however, and in June 2022 the U.S. Department of Labor’s Women’s Bureau held its first roundtable on menopause and work.

In Australia, where a 2022 study estimated menopause-related early retirement costs women more than $17 billion per year in lost earnings, women’s health advocates are pushing for national action on how to stem the exodus, and a growing number of businesses are listening. Australian unions have also taken up the cause, advocating for paid menstrual and menopause leave to be included in the country’s Fair Work Act.
APPENDIX

i Statistics Canada. Table 17-10-0057-01 Projected population, by projection scenario, age and sex, as of July 1 (x 1,000). https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1710005701

ii Statistics Canada. Table 14-10-0327-01 Labour force characteristics by sex and detailed age group, annual https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=14100032701

iii Statistics Canada. Table 14-10-0023-01 Labour force characteristics by industry, annual (x 1,000). https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1410002301


ix https://publications.parliament.uk/pa/cm5802/cmselect/cmwomeneq/1157/report.html

x https://committees.parliament.uk/publications/33631/documents/183795/default/


Methodology

The survey data in the report was conducted by Leger Canada between August 2 and August 11, 2022, using Leger’s online panel. The survey of 1,023 Canadian women aged 40-60 is representative by region, education, income, and ethnicity among women that fall into this age range. The Deloitte Canada research was conducted in July 2023 and was based on the Leger survey data, Canadian labor market statistics, with sensitivity analysis conducted based on studies from the United States and the United Kingdom that evaluated the economic impact of menopause.
About the Menopause Foundation of Canada

The Menopause Foundation of Canada (MFC) is a national non-profit advocacy organization created to raise awareness of the impact of menopause on women and society. MFC’s mission is to eliminate the social stigma and taboos associated with menopause. The organization is dedicated to closing the menopause knowledge gap, improving access to menopause care and treatment and creating menopause inclusive workplaces. Learn more at MenopauseFoundationCanada.ca

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