Motivation Moment - Women's Health Issues and Their Impact

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**INSOMNIA STATISTICS**

- 50-70 million Americans are affected by insomnia
- 10% of those impacted by insomnia go on to develop long-term, chronic insomnia
- 10-30% of people across the world have insomnia
- 40% more women are likely to have insomnia than men

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**SLEEP STATISTICS**

- Each night the average American sleeps 6.8 hours
- 35% of Americans get less than seven hours of sleep each night
- 50-70 million US adults suffer from a sleep disorder
- $411 billion is lost from the US economy annually due to sleep deprivation
And there are a lot of us

1,695,000 women
Health, wellness or something else?
A snapshot of women’s health

Chronic Disease
2020

Currently with asthma
Ever told they have skin cancer
Ever told they have another type of cancer
Ever told they have COPD, emphysema, or chronic bronchitis
Ever told they have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia

Ever told they have a depressive disorder, including depression, major depression, dysthymia, or minor depression
Ever told they have kidney disease
Ever told they have diabetes
Ever told they have pre- or borderline diabetes
Ever told they have high blood pressure (2019)
Ever told they have high cholesterol (2019)
From Northwell Health Katz Institute for Women’s Health:

- Female patients are continuously gaslighted about their physical and mental health.
- Whether it’s heart disease labeled as anxiety, an autoimmune disorder attributed to depression, or ovarian cysts chalked up to “normal period pain,” many women’s health issues are likely to be misdiagnosed or dismissed by doctors as something less critical.
- A published in Academic Emergency Medicine found that women who went to the emergency room (ER) with severe stomach pain had to wait for almost 33% longer than men with the same symptoms.
The “Wellness” paradox

How the Self-Care Industry Might Be Exhausting Women

Self-care has become another “should” on our to-do list.

Self-care teaches us to focus attention outward and attend to relationships with others rather than ourselves. Self-care supports the idea that, as we are, we are inherently lacking something external that we need to be well. Self-care is not something we buy or do that exists outside of us, but rather a way of being in a relationship with ourselves.

Self-care encompasses a lot more than just mani-pedis these days; it’s bloomed into an $18 billion dollar industry: one that’s been capitalized on by almost every other consumer industry: spa, bath, water, beverage, skin care, essential oil, travel, food, home design. You name it. Everybody’s got a hand in the self-care market. Yet, it seems that the more products and services we purchase and practice, the more stressed out and exhausted we become. The more we focus on well-being, the more unwell we actually feel.

So what gives? What’s not working in our self-care model?

The fact is, there’s nothing wrong with self-care or what it offers—who can
The fundamental issue
A snapshot of women

Women’s life stages:
- Childhood
- Puberty
- Maturity
- Menopause
- Old age

Stage:
- First period
- Menopause

Health issues:
- Menstrual disorder
- PMS (premenstrual syndrome)
- Menopause symptoms
- Sexually transmitted disease
- Uterine myoma
- Endometriosis
- Uterine cancer, ovarian cancer, breast cancer
- Lifestyle-related diseases (hypertension, dyslipidemia, obesity)
- Osteoporosis
- Dementia
MATERNAL HEALTH EQUITY: scale of impact

In the developed world, the United States is the most dangerous place to give birth—especially for women of color.

Grasping the extent of maternal health disparities is the first step in being able to provide support to expectant mothers in your workforce.

85%
The vast majority of women in the workplace (85%) will become mothers during their careers.

50K
Each year, 50,000 women suffer from life-threatening pregnancy complications.

↑ 63%
Women in majority Black communities face 43 percent higher rates of severe maternal morbidity (SMM) than women in majority white communities.
Infertility

U.S. births via assisted reproductive technology up more than threefold since 1996

Annual number of babies born due to ART, by mother’s state of residence, 2015

- 1.7% had a fertility policy that met their needs.
- 68% felt their treatment had a significant impact on their mental and emotional wellbeing.
- 54.8% received external support (counselling/cbt).
- 69.5% took sick leave during treatment.
- 83% said COVID-19 had made managing fertility treatment whilst at work easier.
- 72% said that their workplace did not have a fertility policy in place.

Note: Figures reflect only births due to assisted reproductive technology (ART), which the CDC defines as the subset of fertility treatments in which eggs or embryos are handled in a lab. Births due exclusively to other fertility treatments such as artificial insemination or the use of ovulation drugs are not included. Estimated number of babies may be slightly low due to some fertility clinics not reporting data to CDC.

Menstruation

What you should know about periods:

- We spend roughly 2,280 days of our lives on our period.
- 62.8 million people in the US experience moderate to severe cramps.
- 40% have cramp pain so severe, they have to skip work or school.

Endometriosis affects 1 in 10 women.
PCOS affects 1 in 10 women.
20%-80% of women develop uterine fibroids.
Menopause

1 in 10 women who worked during the menopause have lost their job due to their symptoms.

One-third of women have one-third of the private pension wealth impacted by their ability to work during menopause.

14 million menopause symptoms cost the UK economy 14 million working days a year.

Support for menopause at work

98% reported having experienced hot flushes.

75% reported making changes to the way they dressed, including wearing lightweight jackets or cardigans.

59% agreed that it's acceptable to be open with their colleagues about health issues.

54% agreed that their colleagues have been supportive of them as they dealt with menopausal symptoms at work.

32% agreed that they have tried to hide menopausal symptoms in the workplace.

31% agreed that they're comfortable discussing symptoms with their supervisors at work.

12% agreed that they have passed up a more demanding job or promotion because of menopausal symptoms.

11% missed work because of menopausal symptoms (approximately 3 days over the past year).

Managing menopausal symptoms—at work or elsewhere—is a personal and individualized decision that should include a conversation with a healthcare provider to discuss and weigh the available options. For more information and resources about menopause and its symptoms, as well as tips for managing menopausal symptoms at work, visit personalmenopauseanswers.com.

For more information about the survey, visit workingmother.com.

The survey was conducted by the Working Mother Research Institute and Pfizer.
What works?
Talk about it

25% never talk about periods at work.

63% said to normalise the conversation around periods in the workplace.

Menstrual Health
WELFARE AT WORK

Results of FSU survey on Menstrual Health in March 2023 revealed staggering information about how people are coping with menstruation in their workplace.

- 96% would welcome a menstrual health support policy in the workplace.
- 9/10 think menstrual health affects working life.
- Almost half are not comfortable talking about menstrual health in the workplace and 69% say it is due to the gender of their manager.
- More than 1 in 5 say periods are joked about in the workplace.

www.fsunion.org
Menopause matters

What can employers do to support their employees?

Consider developing and implementing a menopause policy
- This can help everyone understand how menopause affects people.
- What support is available to staff.
- What is their business's experience with menopause.
- What flexible working arrangements are available to menopausal employees.

Is flexible working - either on a temporary or permanent basis - something they support in your workplace?
- If someone experiencing menopausal symptoms can change their working pattern to suit when they're at their best, this will not only help them, but enable a business to retain their skills and input into the business.

What changes could they make in the workplace to support menopausal individuals?
- Things to consider include office temperatures, supplying desk fans, access to quiet time-out areas

Workplace champions could be responsible for:
- Running awareness raising workshops
- Providing leaflets, information, support and further resources
- Checking if appropriate Health & Safety risk assessments have been carried out and recorded

Carry out important Health & Safety check for menopausal employees
- This includes:
  - Assessing whether any symptoms are made worse by the workplace or work practices
  - Whether changes can be made to help people manage their symptoms
  - Including these findings in a risk assessment

Appoint a workplace menopause champion
- At Dr Heather Curtis MBE has advocated previously having a single point of contact that someone needs advice, for their support, or just a friendly ear to listen and sensitively to proactively open up the conversation around menopause in the workplace.

Have you trained your managers in supporting a menopause team members?
- Managers need to be aware of what the signs and symptoms of menopause are. Plus, it can add an extra level of comfort for staff knowing that their managers are trained to listen and point them in the direction of more support.

LET'S TALK MENOPAUSE

Join the conversation #MenopauseAtWork

SIX IN TEN

Menopausal women have a negative impact on their work.

- Small things can make a big difference, find out how at cipd.co.uk/menopause

DID YOU KNOW?

- Memory loss
- Difficulty sleeping
- Anxiety
- Headaches
- Depression
What would you say?

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What word, phase or statement would you like to say about your health at work?

Nobody has responded yet.

Hang tight! Responses are coming in.
Things are changing
Research and awareness are growing

Women face unique challenges in the workplace, particularly when it comes to their health. Depending on their symptoms, certain conditions like periods, pregnancy and menopause can make it difficult just to show up to the office. That’s why the prevalence of remote work over the past three years has helped women feel like they’re enacting with a more...
It’s an equity issue

Menstrual Equity and the Workplace

August 2, 2023, 3:00–4:00 pm ET

Join the Department of Labor’s Women’s Bureau and guest speakers:

- Jennifer Weiss-Wolf, Executive Director of NYU Law’s Birnbaum Women’s Leadership Network
- Marcy L. Karin, Professor and Director, Legislation-Civil Rights Clinic, University of the District of Columbia David A. Clarke School of Law
- Sasha Goodfriend, Executive Director of Mass NOW
- Vanessa Carman, President of the SMART Union Women’s Committee

This roundtable will feature speakers from a range of different backgrounds discussing menstrual equity and why it’s a relevant conversation for the workplace. The event will outline accommodations employers can provide to support workers who menstruate and how these overlap with the other phases of employees’ lives.
The motivational moment

• We can make this better
  • Say it
  • Support it
  • Share it
Thank you