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Inquiry into the Issues related to menopause and perimenopause

The Tasmanian Government welcomes the opportunity to provide a submission to the inquiry into the Issues related to menopause and perimenopause.

As Minister for Women and the Prevention of Family Violence, I welcome the terms of reference of this inquiry given the impact menopause and perimenopause can often have on women. These impacts are not constrained to women's individual health and wellbeing. They can extend to their ability to participate in the workforce and in daily life, which has broader economic and social implications for themselves, their families, social networks, financial security, and national productivity.

Menopause and perimenopause are times of normal, endocrinological change in women's lives. While many women experience limited change, and some women may experience an improved quality of life with menopause, there are also some women who experience significant disabling symptoms.

Women in the menopausal age group are some of the most productive members of our communities. Many are engaged in paid work whilst maintaining families and homes. Women in this age group are often caring for both children and teenagers, may be supporting young adult families with infants and young children, and may also be assisting older parents and family members.

At the time of the 2021 Census, women aged 45 to 54 years made up 10.2% of the total labour force in Tasmania, and 40% of the total labour force aged 45 to 54 years.¹ Many women of this age are at or approaching the peak of their career, and extended absence or early retirement poses further risks to organisations in terms of loss of skills and corporate knowledge.

Some industry sectors will be impacted more than others, with women overrepresented in Health Care and Social Assistance Education and Training in particular. Women (all ages) make up 77.1 per cent of the total Health Care and Social Assistance workforce of which women aged 45-54 account for 16.9 per cent. In Education and Training women make up 70.8 per cent of the total workforce, of which 17.2 per cent are aged 45-54.

¹ ABS 2021, Census of Population and Housing
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In a report from the 2023 National Women's Health Survey, 19.5 per cent of Tasmanian respondents reported they needed to take an extended break or stop work or study as a result of menopause-type symptoms.²

While there is increasing awareness of the impacts of menopause and perimenopause and growing advocacy for legislated supports and/or leave entitlements, broadly speaking there appears to be limited employer awareness and support available to help women manage the symptoms and impacts in the workplace.

In 2021, Circle In and the Victorian Women's Trust surveyed over 700 people³ about their experience of menopause in the workplace. Key findings include:

- 83 per cent said their work was negatively affected;
- 58 per cent of those who experienced menopause said managing work during their menopausal transition was 'challenging';
- 48 per cent of all respondents struggled with a drop in confidence at work, and 30 per cent reported they felt distracted or disconnected from their workplace;
- 43 per cent said they'd lose focus in long meetings, and 41 per cent felt the need for fresh air more often;
- 16 per cent said they felt the need to turn down some work opportunities;
- 45 per cent of respondents said they considered retiring or taking a break from work when their menopausal symptoms were severe, and 28 per cent of those respondents went through with it: *'That's one in eight women experiencing menopause who stepped out of the workforce due to their symptoms, and another two in eight who would do so if they could afford to.'*

In addition, a recent article published by Women's Agenda⁴ points to the following workforce impacts:

- Research from Macquarie University estimates 10 per cent of women leave work prematurely due to the effects of menopause.
- Research also shows that when women leave work prematurely due to the impact of menopause it costs Australian companies more than \$10 billion a year.
- In October 2022 the Australian Institute of Superannuation Trustees estimated that menopause costs female workers \$17 billion each year in lost earnings and superannuation, based on an estimate of 25 per cent of menopausal women experiencing 'debilitating symptoms leading to long-term absences from work or forcing them into early retirement'⁵.

It is clear the impacts of menopause and perimenopause on women's economic participation can be significant. Efforts to increase employers' awareness of menopause and perimenopause symptoms is required to enable environments where adverse impacts experienced by women can be openly discussed. Women experiencing disabling symptoms should feel safe to share their experiences with their employer and know they will be supported to continue their participation in the workforce.

As well as a supportive work environment, ensuring equitable and accessible health care for women experiencing menopause and perimenopause is also vitally important. Most menopause-related care is delivered in the community by primary health (GPs, or special-interest primary care services providing care in women's health). Within the Tasmanian Department of Health (DoH), services provided by

² *The impact of symptoms attributed to menopause by Australian women.* Co authored by the Australasian Menopause Society, Women's Health Research Program (Monash University) and Jean Hailes for Women's Health. Available at: <https://www.jeanhailes.org.au/research/womens-health-survey/menopause-in-australian-women> (accessed 11 January 2024)

³ Circle In, supported by the Victorian Women's Trust 2021, *Driving the change: Menopause and the workplace* Available at <https://circlein.com/report-menopause-and-the-workplace/> (accessed 11 January 2024)

⁴ Brianna Boecker October 2021, *This World Menopause Day, here's why inclusive workplaces need menopause support* Available at: <https://womensagenda.com.au/life/womens-health-news/this-world-menopause-day-heres-why-inclusive-workplaces-need-menopause-support/> (accessed 11 January 2024)

⁵ Menopause estimated to cost women more than \$17 billion. Media release. Australian Institute for Superannuation Trustees. Available at: www.aist.asn.au/Media-and-News/News/2022/Media-Release-Menopause-estimated-to-cost-women-more-than-17-billion (accessed 11 January 2024) 23/557563/2

medical specialists, including obstetric, gynaecology and endocrinology, are focused on managing severe presentations, such as heavy bleeding and possible malignancies. There are also a range of private obstetric, gynaecology and endocrinology services available in Tasmania.

Access to specialists can be variable depending on geographical location, and there are workforce challenges for these specialties within the State. DoH is working to address challenges of workforce and access to public health services in rural areas through the *Long-Term Plan for Healthcare in Tasmania 2040 and Health Workforce 2040*.

Currently, there are a limited number of prescription products for treating menopause available on the Pharmaceutical Benefits Scheme (PBS). The newer transdermal products (such as EstroGel, combinations with Microgenised progesterone and Premarin), oral forms containing norethisterone or drospirenone as the progesterone, and alternatives such as tibolone are not included on the PBS. This can have a particularly detrimental effect for women on lower incomes who may find treatment unaffordable and so continue to live with disabling symptoms. In addition, hormone replacement patches have been unobtainable at times due to drug company manufacturing issues.

All women require access to preventative health measures as part of healthy ageing, particularly heart health and bone maintenance. We encourage the inquiry to also consider access to other supports and healthcare through either public or private services depending on availability and nature of presentation, including:

- Mental health plans for psychology support
- Access to pelvic floor physiotherapy
- Access to allied health services, including dieticians and bone health
- Access to other investigations, such as Medicare-rebated bone density assessments

It is important to note in relation to Medicare-rebated bone density assessments, that these are only available in a very limited number of clinical conditions, even though all postmenopausal women are at risk of osteoporosis/osteopenia.

Under *Equal means Equal: Tasmanian Women's Strategy 2022 – 2027*, the Tasmanian Government is working to create a Tasmania where women have equal access to choice, opportunity and resources to participate in our economic, social, political and community life. Enabling women experiencing menopause and perimenopause to participate in the workforce and have improved health and wellbeing is an important part of this.

As our population ages, hearing and learning from the experiences of women in the menopausal age group is vitally important.

Under *Equal means Equal*, I am developing a Gender Impact Assessment process to support the Tasmanian Government to apply a 'gender lens' to the design and implementation of budgets, policies, programs and services. It is our vision that through this toolkit the needs of all women at every stage of life will be considered throughout the policy and budget cycle. The findings of the Inquiry will be valuable for enhancing the utility of the toolkit and providing guidance to agencies about the diverse impacts of menopause and perimenopause.

I look forward to the findings from the Inquiry to help raise awareness about issues related to menopause and perimenopause, and to inform opportunities for addressing them.

Thank you for the opportunity to provide feedback. For further information please contact Courtney Hurworth, Acting Deputy Secretary, Community Partnerships and Priorities Division, Department of Premier and Cabinet at

Yours sincerely

 Hon Jo Palmer MLC
Minister for Women and the Prevention of Family Violence