

Women's reproductive health at work: Newsletter Two

November 2025



Meet our stakeholder group

Welcome to our second newsletter. In this issue, we wanted to create some space to recognise the valuable input from our stakeholder group, including our public representatives. All of our stakeholders have lived experience of one or more of the reproductive life stages we are seeking to improve and we recognise their considerable expertise. Having critical friends throughout our research process is integral to our outputs making sense, and for them to be both useful and useable by those who need them most.



Collaboration and input with stakeholders are integral to the research process. We are fortunate to be working with such an amazing team, whose contributions have shaped the study in meaningful ways. Whether it's spotlighting a salient priority, recommending a hard-to-reach report, sharing examples of organisational good practices, or affirming an emerging insight – stakeholder input is invaluable to the co-creation of knowledge.



Co-investigators: Dr Ruth Abrams (University of Surrey) and Dr Lilith A. Whiley (University of Sussex)

Find out more about our study [here](#).

Spotlighting our process

Collaborating with our stakeholders and public representatives

To date, we have successfully hosted three of the four planned stakeholder meetings. In these meetings we share our findings, and seek feedback from our group. Prior to each meeting, stakeholders receive preparatory materials, including the agenda and interim findings to digest ahead of time.

Acknowledging stakeholder and public representative contributions

Following each meeting, we collate all the feedback we have received from our members and find a way to action it. To show the impact this feedback has on the research, we present back a “You said, we did” infographic. This visual summary emphasises how their valuable contributions and insights have been incorporated into the project. See below for examples from two of our previous stakeholder meetings.



Spotlighting our stakeholders

Here is what our stakeholders have to say about why our research matters...



Championing women's health—including menopause, pregnancy, postnatal and broader wellbeing needs—is a strategic imperative for any organisation committed to equity and excellence. When we design workplaces that support these experiences, we're not only addressing health and inclusion – we're actively closing pay gaps, retaining talent, and fostering higher engagement. True inclusion means recognising the full spectrum of life's transitions and ensuring that every individual has the opportunity to thrive. By embedding this understanding into workplace strategy, we create stronger, more innovative, and more excellent institutions.

Jo McCarthy-Holland, Head of EDI, University of Surrey



It is essential to provide interventions in the workplace to support women who are going through key stages in their reproductive journey, such as pregnancy and menopause. Top of the list is education, not just for women, but for all.

Joyce Harper, Professor, EGA Institute for Women's Health, UCL



I was invited to come on board with this project by our EDI manager. I hope that in our project discussions, I have highlighted concerns for women in the workplace from not only a minoritised background such as myself, but for women full stop who have gone through the menopause with not all the support that they would have liked in place. I have been heartened to know that there are women from a wide range of backgrounds that want to change what is sometimes a very substandard offering in work. I am very interested to see the outcomes of this project and how it is incorporated in work. Thank you for involving me in this. It's passion, drive, and anger at inequality that made this project so worthwhile and interesting for me at a very personal level.

Serge McQuillen, PPI member, Senior Faculty Administrator, University of Surrey



When it comes to women's health, most organisations focus on maternity leave policies and return to work. This research is integral for understanding the ways in which organisations can support women's health in a much more holistic way. So that instead of stigma and taboo, women are empowered and equipped through all the transitions or life events that may occur during their employment.

Rachel Childs, Founder, Parents that Work



Spotlighting our stakeholders



The work that this NHIR study is doing is vital in tackling the inequalities that women suffer in the workplace throughout their reproductive life cycle. By understanding what works for women, employers can better support their staff, leading to increased retention and attraction of women to the workforce, which makes clear business sense.

Natalie Sutherland, Partner, The International Family Law Group LLP



Improving women's health at work isn't just about addressing individual experiences; it is about rethinking the systems, cultures and policies that shape them. When research, leadership and lived experience come together, we can create workplaces where women are supported and valued, improving health outcomes and sustaining good work across all life stages.

Professor Jo Yarker, Co-Managing Partner, Affinity Health at Work and Professor of Occupational Psychology, Birkbeck, University of London



It is wonderful to see growing interest in women's reproductive health in the workplace, with more employers investing in policy and practice. We urgently need a robust evaluation however, of what works, for whom, and in what contexts, to ensure efforts and resources are directed appropriately. This realist evaluation project, led by Dr Abrams and Dr Whiley, will provide valuable insights for practice and set a clear agenda for future research and evaluation.

Krystal Wilkinson, Reader, Manchester Metropolitan University



The breadth of expertise and lived experience have provided me with a real insight and greater understanding of the varied experiences of half the population and has highlighted how under-researched this field really is. I have found the researchers to be professional, supportive and very well organised with effective communication and dissemination of findings. I would be delighted to be involved in any future research carried out by this team into such a vital area of study.

Harriet Brown - Patient and Public Involvement member

The project has been immensely engaging and feels like it has uncovered the tip of a very large iceberg.

Our stakeholders in full

We are grateful to all our stakeholders, public representatives and organisations for offering their time, experiences and insights to this project.

Stakeholder name	Job Title	Affiliation
Ann O'Neill	Co-Founder	Adora Digital Health
Anne Howard	Deputy Director of Nursing	Peppy Health
Carol Atkinson	Professor	Manchester Metropolitan University
Claire Hardy	Senior Lecturer	Lancaster University
Claire Ingle	Co-founder and Head of Partnerships and Social Impact	Fertility Matters at Work
Georgette Eaton	Clinical Academic Consultant Paramedic	Nuffield Department of Primary Care, Health Sciences, University of Oxford
Harriet Brown	Public representative	
Jean Ledger	Head of Research	Adora Digital Health
Jessica Scott	Academic Fellow	University of Exeter
Jo McCarthy-Holland	Head of Equality, Diversity and Inclusion	University of Surrey
Jo Yarker	Managing Partner	Affinity Health at Work
Joanne Smithson	Head of Implementation & Learning	What Works Centre for Wellbeing (until 2024)
Joyce Harper	Professor	EGA Institute for Women's Health, UCL
Krystal Wilkinson	Reader	Manchester Metropolitan University
Laura Kudrna	Associate Professor in Health Research Methods	Department of Applied Health Sciences, University of Birmingham

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Stakeholder name	Job Title	Affiliation
Libby O'Brien	Public representative	
Natalie Sutherland	Partner	The International Family Law Group LLP
Rachel Childs	Founder	Parents that Work
Rachel Suff	Senior Policy & Practice Adviser - Employee Relations	Chartered Institute of Personnel Development (CIPD)
Rebecca Peters	Senior Policy and Practice Adviser	Chartered Institute of Personnel Development (CIPD)
Serena Sabatini	Visiting Lecturer	School of Psychology, University of Surrey
Serge McQuillen	Public representative	Senior Admin, University of Surrey
Steph Moakes	Health, Wellbeing & Engagement Lead	Berkshire Healthcare NHS Foundation Trust
Victoria Williams	Research Fellow	University of Surrey

Spotlighting the project

Menopause Awareness Month

During Menopause Awareness Month, Dr Ruth Abrams and Dr Lilith Whiley shared emerging findings from the project.

Click in the image to download the infographic.



Project launch webinar

In **June 2026**, we will host our project launch webinar, where we will discuss project findings and other dissemination materials.

If you would like to be added to the mailing list, please contact Andreia at a.fonsecadepaiva@surrey.ac.uk

Publications

1. Editorial: **Supporting women's reproductive health at work**
2. Briefing: **Why HR should make women's reproductive health a priority**
3. Protocol: **Available to access via NIHR**

Women's reproductive health at work: Menopause awareness October 2023

During Menopause Awareness Month, Dr Ruth Abrams and Dr Lilith Whiley share emerging findings from their NIHR funded project on supporting women's reproductive health at work. Here are five evidence-based ways that organisations can support employees who are experiencing menopause.



1. Education

Educational interventions that foster awareness and practical knowledge about menopause can help those experiencing symptoms at work to feel more empowered to recognise and ask for workplace adjustments. As women gain more knowledge, they become more able to reflect on their own needs and confidently discuss them. To learn more about education interventions at work, please read [Geukes et al. \(2023\)](#).

2. Self-help CBT

Self-help strategies in the form of booklets featuring CBT and information about how to manage common symptoms such as hot flushes and night sweats can help to improve employees' coping strategies at work. To learn more about how self-help CBT booklets can help, please read [Hardy et al. \(2018\)](#).



3. Digital apps

Digital apps can provide support across (peri)menopause to reduce the severity of symptoms at work, particularly if the apps feature evidence-based menopause content and personalised support provided by expert menopause practitioners. To learn more about how digital apps can support menopause at work, please read [Schell and Alenamy \(2024\)](#).

4. Adaptable materials

Women need to see themselves in the available support, and feel represented above and beyond their symptoms. Making adaptations to available materials really matters. This includes finding ways to overcome language barriers, and having the presence and support of line managers and colleagues of the same ethnic background. To learn more about some of the ways in which materials can be adapted, please read [Verburgh et al. \(2022; 2020\)](#).



5. Line manager and peer support

Line management support is crucial. When line managers are upskilled (e.g. through training), they feel better prepared in how to start conversations and make adjustments. When women have peers they can confide in, then they feel less stigma and a greater sense of relief. To find out more, please read [Hardy et al. \(2019\)](#) and [Steffan and Potolnik \(2022\)](#).

Sustainable menopause support at work involves raising awareness across the whole organisation and employee groups and creating inclusive and welcoming climates where menopause is normalised. This includes inclusive behaviours, physical and mental health promotion, and welcoming workplace experiences. Sustained impact necessitates structural support and ongoing engagement. This includes senior buy in, policies and practical action.

This research is funded by NIHR grant number: 159142. The views expressed are those of the author and not necessarily those of the NIHR or the Department of Health and Social Care. This infographic was developed in collaboration with the research team, and our project stakeholders. Find out more about our study [here](#).

