

Being a fertility friendly employer



**Emma Ogden,
Consultant,
SUMS Consulting**

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It is thought that around 9 to 15% of people in the UK struggle with natural conception; and treatments such as IVF can be emotionally draining, time-consuming and costly.

Employees often avoid sharing their fertility journey with their employer due to the fear of repercussions, such as being overlooked for promotion or being made redundant. Others do not feel comfortable sharing confidential or sensitive details about their treatment, especially when there is no guarantee of a successful outcome.

This thought piece is based on a personal perspective. It highlights some of these challenges and provides practical advice and guidance on how to support positive fertility in the workplace.

SUMS is a membership-based higher education consultancy, a registered charity and not-for-profit organisation that provides expert consulting to universities across all professional service areas.

Emma Ogden, SUMS Consultant, shares insight on the importance, application, and use of positive fertility discussions at work.

With expertise covering almost all areas involved in Human Resources, the team at SUMS Consulting would be happy to help. If you wish to discuss further or need any information, please contact SUMS Consultant Emma Ogden at e.l.ogden@reading.ac.uk



Introduction

Working as a HR professional for several years, I have supported many conversations regarding family-friendly needs. However, on reflection, I never had anyone come to me asking for guidance or support for going through fertility treatment.

The silence on this topic is not because it is not being experienced, but perhaps that there is more of a stigma or taboo, a lack of recognition, and fears that individuals facing it may have.

Personally speaking, I have endured two rounds of IVF before being lucky enough to fall pregnant. Working throughout this process was not easy. I decided to keep my treatment a secret from my family, friends, and work colleagues as I did not want to have to discuss what was such an emotionally challenging and physically taxing period of my life. I am very fortunate that SUMS is such a flexible employer which enabled me to manage my own diary and take the stress of juggling my workload with the time-off required for the many appointments, scans, and tests.

I appreciate not everybody is lucky enough to do this. The impact on mental health can be significant; balancing the demands, pressures and emotions relating to fertility treatment, seeing colleagues go through their own exciting pregnancy journeys while grieving for what might never be.

A survey run by Fertility Matters at Work in 2020¹ found that 72% of respondents said that their workplace did not have a fertility policy in place, with 69% needing to take sick leave from work during their fertility treatment. Comments made by respondents highlighted a lack of employers' knowledge of the fertility process, people hiding the real reasons they were off sick or using annual leave to cover days off. This thought piece aims to raise greater awareness about the topic and to provide some thoughts on how organisations can become fertility-friendly.

Why is this important?

The Fertility Matters at Work research identified that 42% of respondents state that their work performance declined due to balancing treatment and work, and 36% considered leaving their employment during that time. There are also additional barriers to IVF for lesbian, bi women and trans people².

There is beginning to be more openness and transparency about infertility. Influential women are coming forward to discuss their own infertility struggles, such as Michelle Obama and Emma Thompson. There is a rise in private members' bills on fertility and miscarriage rights, and more charitable organisations providing greater guidance and support. All these factors reinforce that having clear policies, processes and communications are critical to becoming a fertility-friendly employer.

Drivers for changing support for fertility

It is important to think about fertility now and be ahead of the curve, given the amount of external attention and conversations within parliament already underway.

¹ The research is available [here](#).

² Guidance on this is available [here](#).

These include:

A. The Fertility Workplace Pledge

A new Fertility Workplace Pledge was launched in November 2022, designed to benefit individuals and couples going through fertility treatment. The Pledge forms part of a wider effort to tackle the perceived negative stigma surrounding fertility treatment, with aims of:

1. Supporting those juggling employment while undergoing fertility treatments.
2. Alleviating any fear of being negatively impacted by their career.

Large employers such as the Co-op, NatWest and Channel 4 have signed up to the Pledge, which requires a commitment to:

1. Raise awareness by appointing fertility ambassadors who can begin internal conversations and promote available support.
2. Ensure line managers are trained so that they understand the realities of treatment and can support colleagues through the physical, mental, and financial impacts.
3. Make information (including a workplace fertility policy) accessible to create an open culture free from stigma.
4. Allow staff to request flexible working so they can attend appointments (in the same way they would for antenatal appointments). The Co-op have offered paid leave in this instance.

B. The Women's Health Strategy

The Women's Health Strategy, published in July 2022 has awarded £1.97 million to 16 organisations to help support women who experience reproductive health issues in the workplace³. The organisations, inclusive of Fertility Network UK and Mind, will support women's reproductive wellbeing and aim to help them remain in and return to the workplace.

The objectives for the strategy should enable:

1. Women to feel able to speak openly about their health and to be confident that they will be supported by their employer.
2. Women to feel supported at work when experiencing women's health issues.
3. Women's work colleagues to feel better equipped to support them by the provision of information and awareness.
4. Employer's to be better equipped to support female employees and implement best practice.

C. Employment Law changes

Fertility Treatment (Employment Rights) Bill

A private members' bill has been proposed which would seek to give employees the legal right to have time off for appointments related to fertility treatment. If approved, care will need to be taken that any policies adopted, or benefits provided are inclusive and applied consistently to avoid inadvertent discrimination claims. In all cases, employees undergoing IVF or other assisted reproduction treatments should be treated sensitively and confidentiality maintained. Institutions should explore support mechanisms, such as internal staff networks, educating managers and employee assistance programmes.

³ Guidance about the Health Strategy and funding is available [here](#).

Miscarriage Leave Bill

Currently, miscarriages that take place before 24 weeks and ectopic pregnancies do not give rise to statutory pay entitlements. The private members' bill is seeking to make provision for paid leave for people who have experienced miscarriage.

Understanding the challenges of fertility treatment

Understanding the challenges of fertility treatment, thinking about how to support and respond to disclosures made by employees, as well as broader actions to take, will all contribute to being more fertility-friendly.

Firstly, it is important to recognise that infertility and subsequent treatment is not a choice. A truly inclusive, fertility-friendly employer should place just as much importance on pre-conception as it does supporting those with children. When done well, there will undoubtedly be a positive impact with employee engagement, attraction, and retention.

For those going through fertility treatment, there are different challenges faced, which include:

1. Identifying the fertility problems and any associated health conditions (including changes to their health and lifestyle, taking medication and any procedures required).
2. Logistical challenges such as:
 - a. Attending multiple clinic appointments, often arranged with little notice.
 - b. Being able and available to take sensitive phone calls from clinics.
 - c. Storing medication and/or finding somewhere to take medication (such as injections).
3. Physical challenges, such as:
 - a. Surgery (such as the egg retrieval procedure).
 - b. Injections with medications and hormones, with several side effects (for instance enlarged ovaries which causes discomfort and bloating, poor sleep, and hormone imbalances).
4. Emotional challenges, through the stresses, hope and possible grief experienced throughout the journey.
5. Strain on relationships, struggle with disclosure and feeling excluded from certain conversations at work (e.g., when colleagues talk about families or children).
6. Financial challenges, especially if funding is not available through the NHS.

Key recommended actions

It is important to remember that not all fertility journeys are the same so approaches will need to be flexible to adapt to individual needs. Some key actions to take include:

- Sign the Fertility Workplace Pledge. While it is voluntary, it acts as a demonstration of the increasing awareness within the UK workforce of the importance of supporting women's health in the workplace. It also aligns with proactive interventions to enable gender equity, talent retention, and ensuring that those undergoing fertility treatment deserve the same legal rights and opportunities to those undergoing a 'normal' pregnancy.
- Having an accessible policy or procedure in place for Fertility. This should not be an appendix within a Maternity policy but a stand-alone document which clearly articulates the employers' position and rights that the employee has. This should be supported with a review of any other conflicting or complementary policies, awareness raising and educational content.
- Consider fertility advocates or allies, who understand the process and can support employees and line managers with application of the policy and guidelines.
- Train and educate managers on how to communicate policies, procedures and reinforce through open dialogue, regular check-in and one-to-one conversations to enable employees to raise concerns. A study by Manchester Metropolitan University found that without training, managers reported stress, feeling of powerlessness and extra work when dealing with the issue⁴. This should be coupled with sensitivity, respecting the need to keep things confidential, when needed, and ensuring counselling or Occupational Health support is in place.
- Not every employee will choose to disclose their fertility journey, irrespective of the support or guidance in place. However, there are elements which might influence an employee's decision to disclose, such as not expecting their line manager to be supportive, concerns that their commitment or desire for progression may be impacted or expecting a negative reaction. Considering these concerns, alongside ensuring consistent and continued support, irrespective of the amount of time the treatment takes, is critical, as well as support for those who have more difficult or emotional journeys. There is a need to ensure that the lines of communication remain open.
- Make it easier for employees to be able to attend appointments, especially at short notice. This may be enabled through increased flexibility of working from home and working hours, regular discussions around workload and agreed separate processes for sickness absence monitoring.
- External guidance and signposting through workplace schemes (such as EAP) or charitable organisations who can provide specific guidance and support for staff.

⁴ Information about the research is available [here](#).