

Fertility Matters at Work ...and here's why



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Agenda

Hosts:

Natalie Silverman

Becky Kearns

- what is infertility & why do people need fertility treatment?
- how common is it?
- the patient journey and what is IVF?
- what it means to have to go through fertility treatment and loss
- how it can impact both the individual and the workplace
- how can managers and colleagues offer support?
- policy pointers
- becoming 'fertility friendly'
- Q&A

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What is infertility?

"Infertility is a **disease of the male or female reproductive system** defined by the failure to achieve a pregnancy after 12 months or more of regular unprotected sexual intercourse."

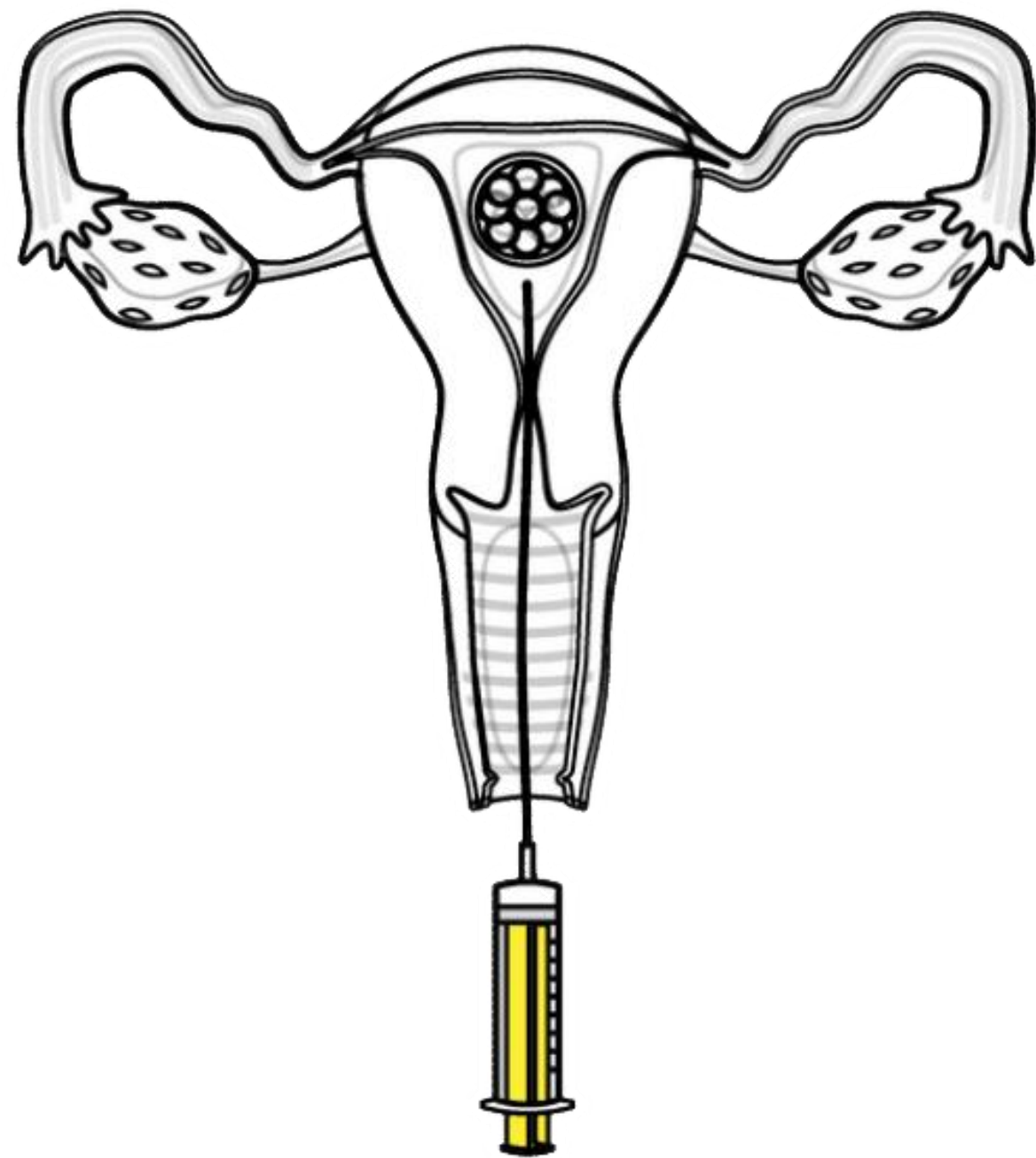
(World Health Organisation)

- Infertility impacts **1 in 6 people** worldwide (WHO)
- Not just couples but individuals pursuing solo parenthood too
 - primary infertility
 - secondary infertility
 - social infertility



Types of treatment

- Medicines
- Surgical
- Assisted Conception



Inclusion and the LGBTQ+ experience

77%

of LGBTQ+ people between the ages of 18-35 are either already parents or are considering having children, a 44% increase over their elders

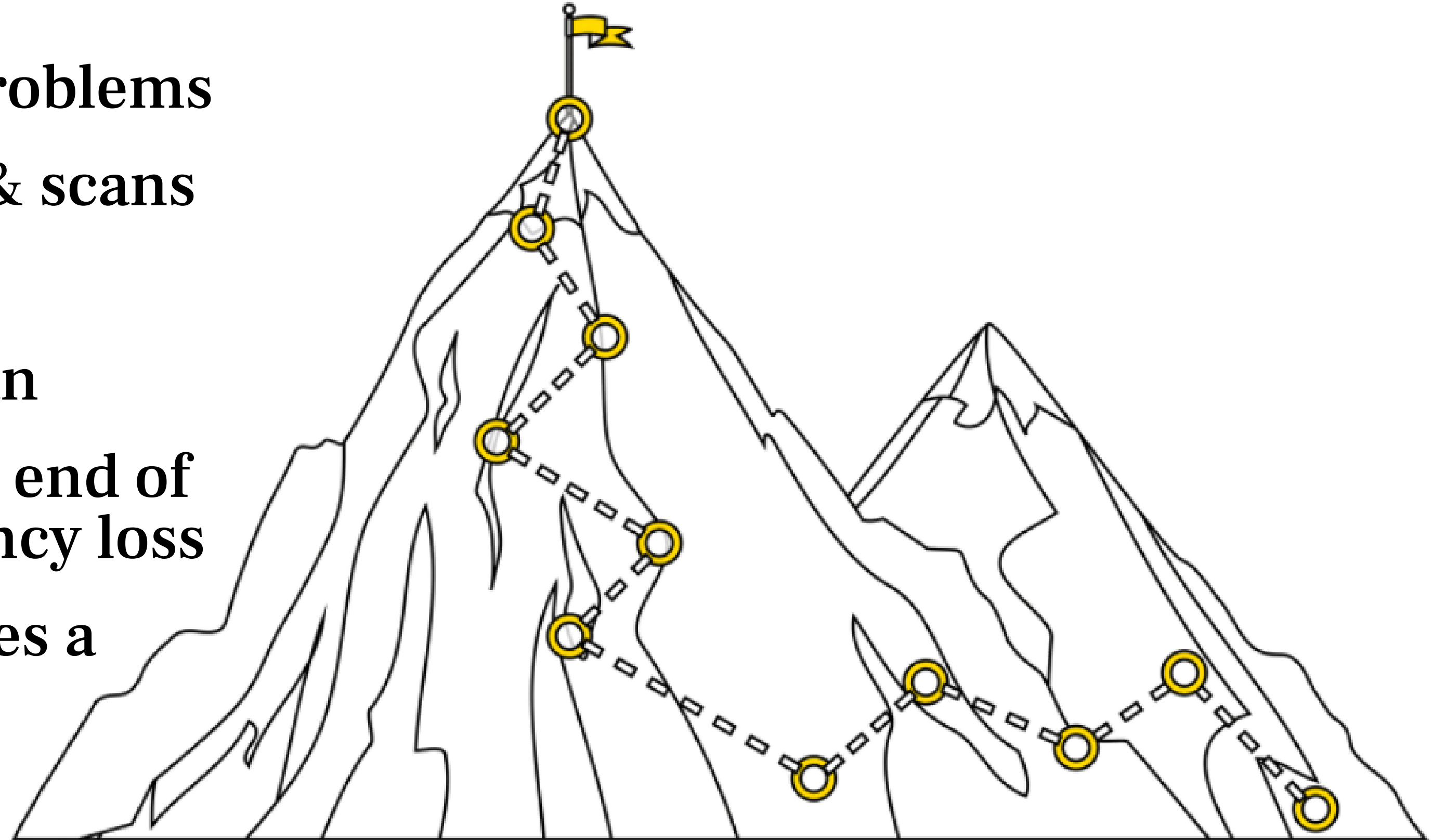
(Family Equality Council)



The patient journey

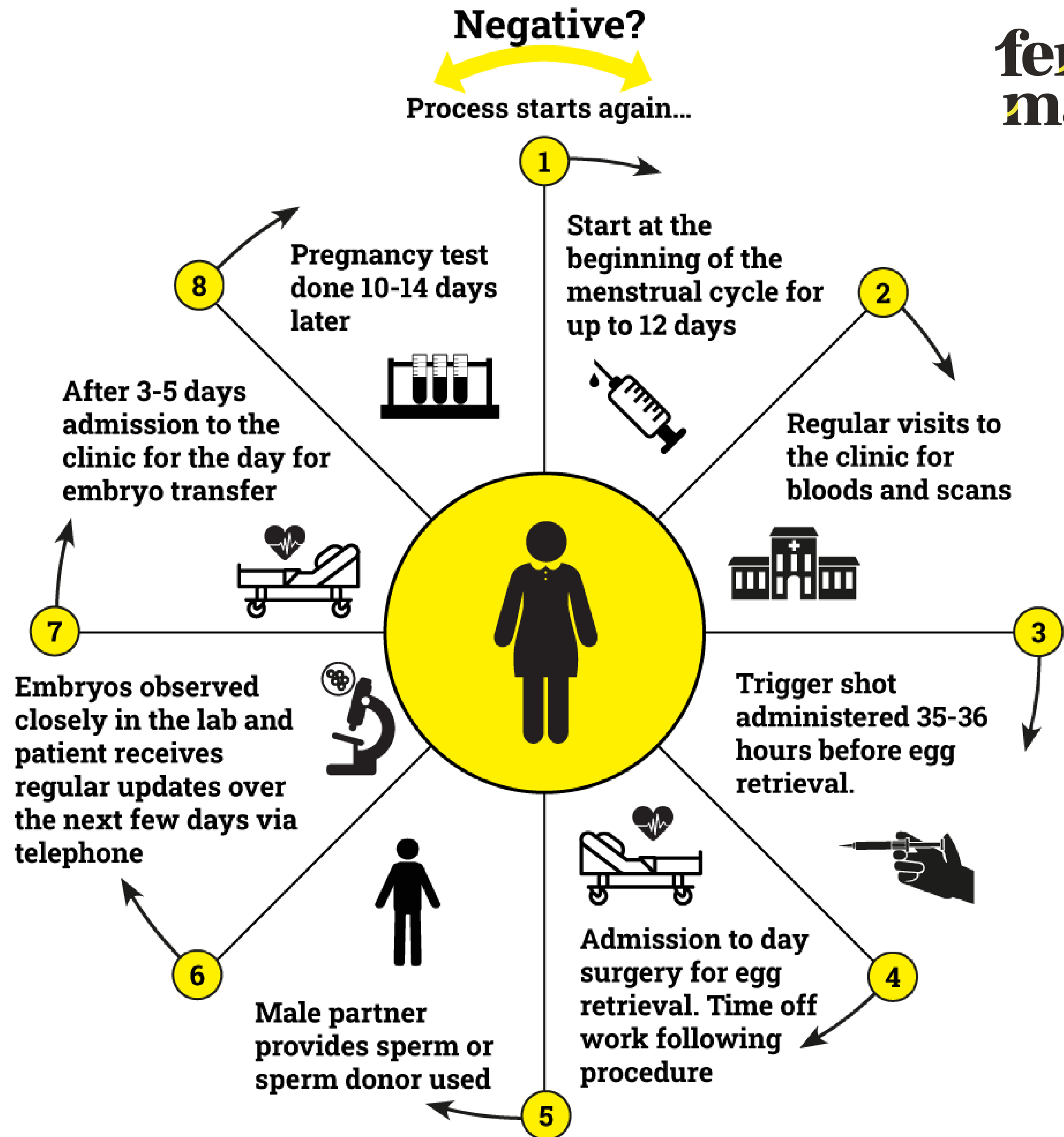
Common misconceptions:

- IVF is the solution to all fertility problems
- Treatment is just a few injections & scans
- Fertility treatment is a 'choice'
- The issue is always with the woman
- A positive pregnancy test isn't the end of the journey - 1 in 4 end in pregnancy loss
- IVF works first time and guarantees a baby



It can be **a long road** for many, with **many hurdles to overcome**

What does a typical IVF cycle entail?



This is a 'typical' IVF cycle but in fact no two cycles are identical and there are differences with fresh IVF cycles vs frozen embryo transfers too.

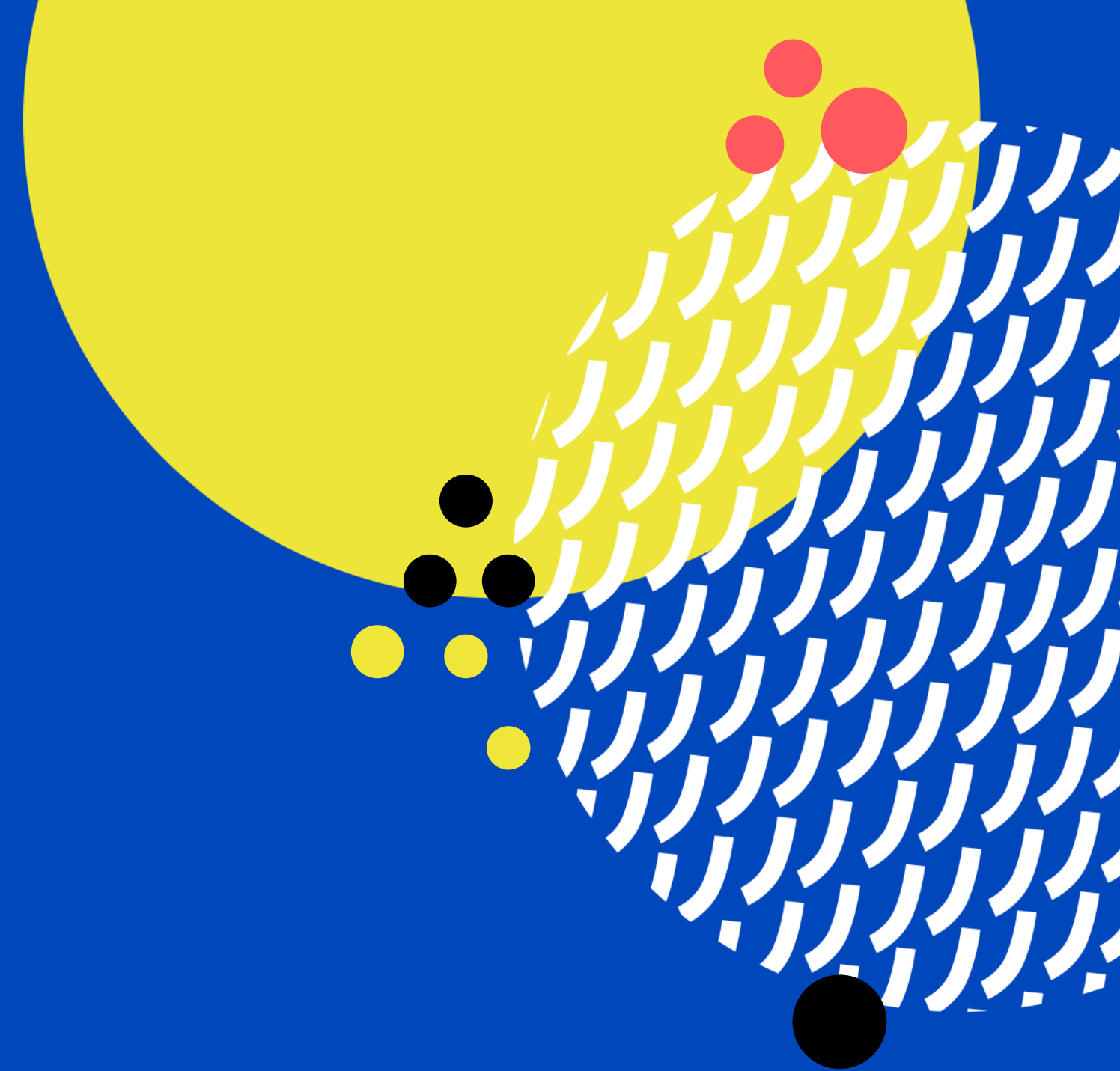
How does it feel?

"Fertility loss in general and loss of a hoped-for child or family is the loss of something that hasn't happened as opposed to the loss of a loved one about whom there will be memories, maybe photographs, shared experience with others, etc.

As such, fertility loss is very often about intangible things, a hidden loss, a disenfranchised loss, one that isn't understood fully by people experiencing it, let alone friends, family, and acquaintances. It is a loss that doesn't easily find validation and every loss needs to be validated to be grieved".

Gerry McCluskey, Fertility Counsellor

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Bringing the experience to life

Mary Peterson - Addleshaw Goddard



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Organisations aren't recognising fertility as a life-event needing support, because no one is talking to them about it

74% said fertility wasn't recognised or valued by their organisation

42% had no idea who to turn to for support at work

69.5% are taking sick leave during treatment

36% considered leaving their jobs

93% said it had an impact on their career

Only 1.7% had a fertility policy that met their needs

90% reported feeling depressed (FNUK)

61% don't feel comfortable talking to their employer

Employees don't feel comfortable to talk about it, as they don't see it recognised by their organisation

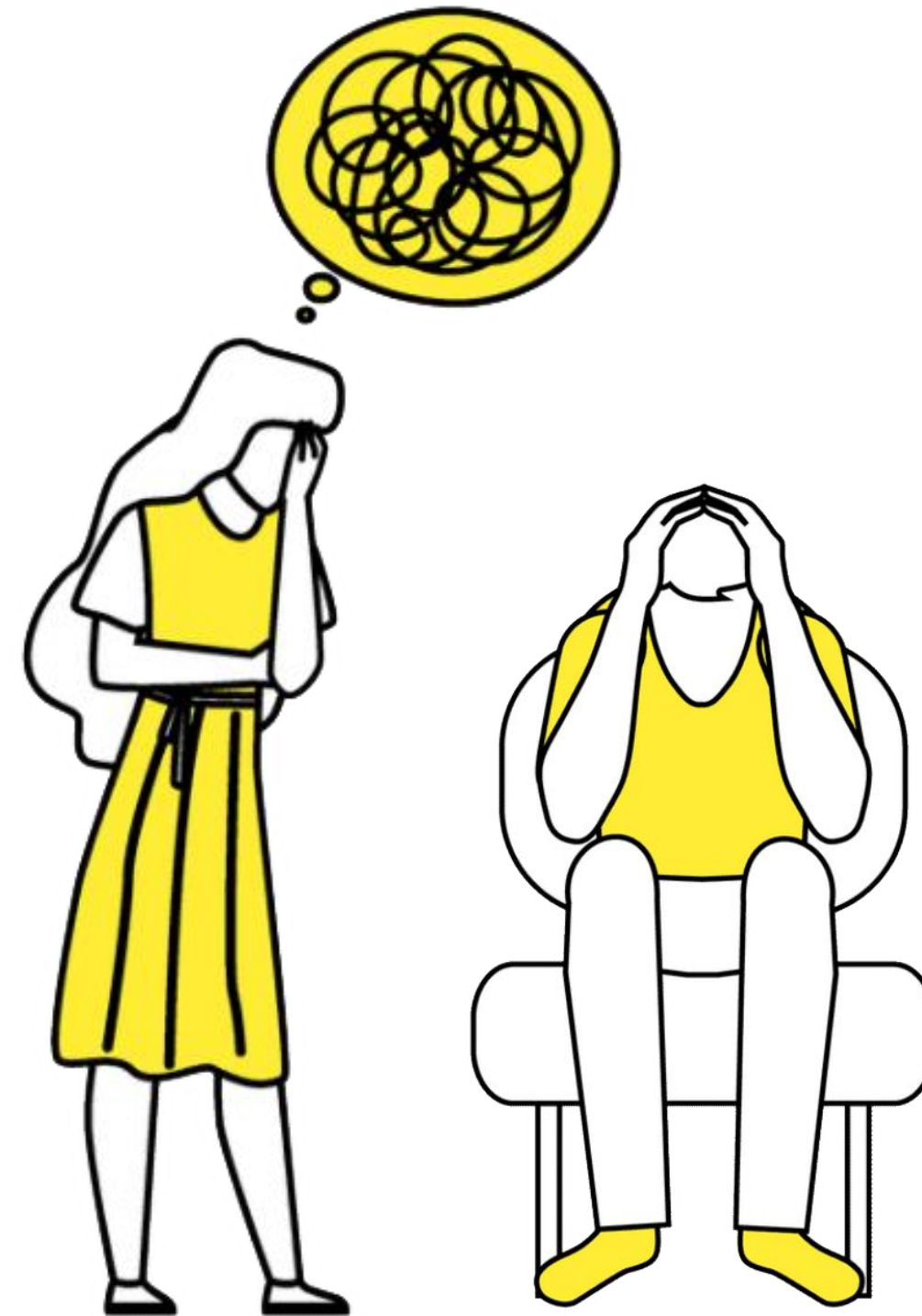
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What are we hearing?

"No policy. I was told that it was 'optional' like a boob job or Invisalign."

"I was told "I can't put in writing, what if I have 6 employees in the same year all needing treatment?"

"I just got lucky. I could have had another boss and likely would have left and been unemployed."



"My work had no policy and I felt really vulnerable. My workplace told me I had to make all the time back from my appointments, which were 2 hours from my home. I told them I couldn't because it was too stressful and they really put pressure on me to make it back."

"Was told my egg collection is an "elective procedure" so take holiday for it."

Why are employees reluctant to disclose?

- “I was worried my manager would think I wasn’t committed to my job anymore”
- “I didn’t want to miss out on the promotion I’d been working towards”
- “I felt ashamed and embarrassed, worried what others may think”
- “I shouldn’t have to disclose something so personal and then face intrusive questions”
- “I didn’t feel I would be understood in a male dominated environment”
- “The stigma of putting anything in your life ahead of your job”
- “The lack of legal protection”

Fertility and employment law

- There currently is **no statutory right** for time off for appointments related to fertility treatment
- For any absence relating to egg collection a woman **will be protected against any unfair treatment on the grounds of sex discrimination**
- **From the date that the embryo is implanted the person is classed as pregnant and so is protected by law**
- **The Equality and Human Rights Commission** recommends that employers treat time off for fertility treatment sympathetically and suggests putting policies and procedures in place to support employees.

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Employee support pathway

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Policy

The first thing an employee will likely look for is policy and entitlements. It's important that this is accessible, inclusive and appropriately placed.



Access to psychological support

Access to counselling support through EAP



Awareness

Open conversations, education and awareness raised to create psychological safety.



Signposting

Providing signposting to credible external support can be helpful.

Internal Support

Access to internal support via peer to peer fertility advocates or existing networks.



Manager support pathway

Policy with guidance
Provide guidance as to how to implement written policy and what discretion managers may have.



Training
Provide access to training on how to support team members.



Awareness
Open conversations and awareness raised to create a culture of understanding.



Signposting
Access to signposting to direct team members to specialist support.

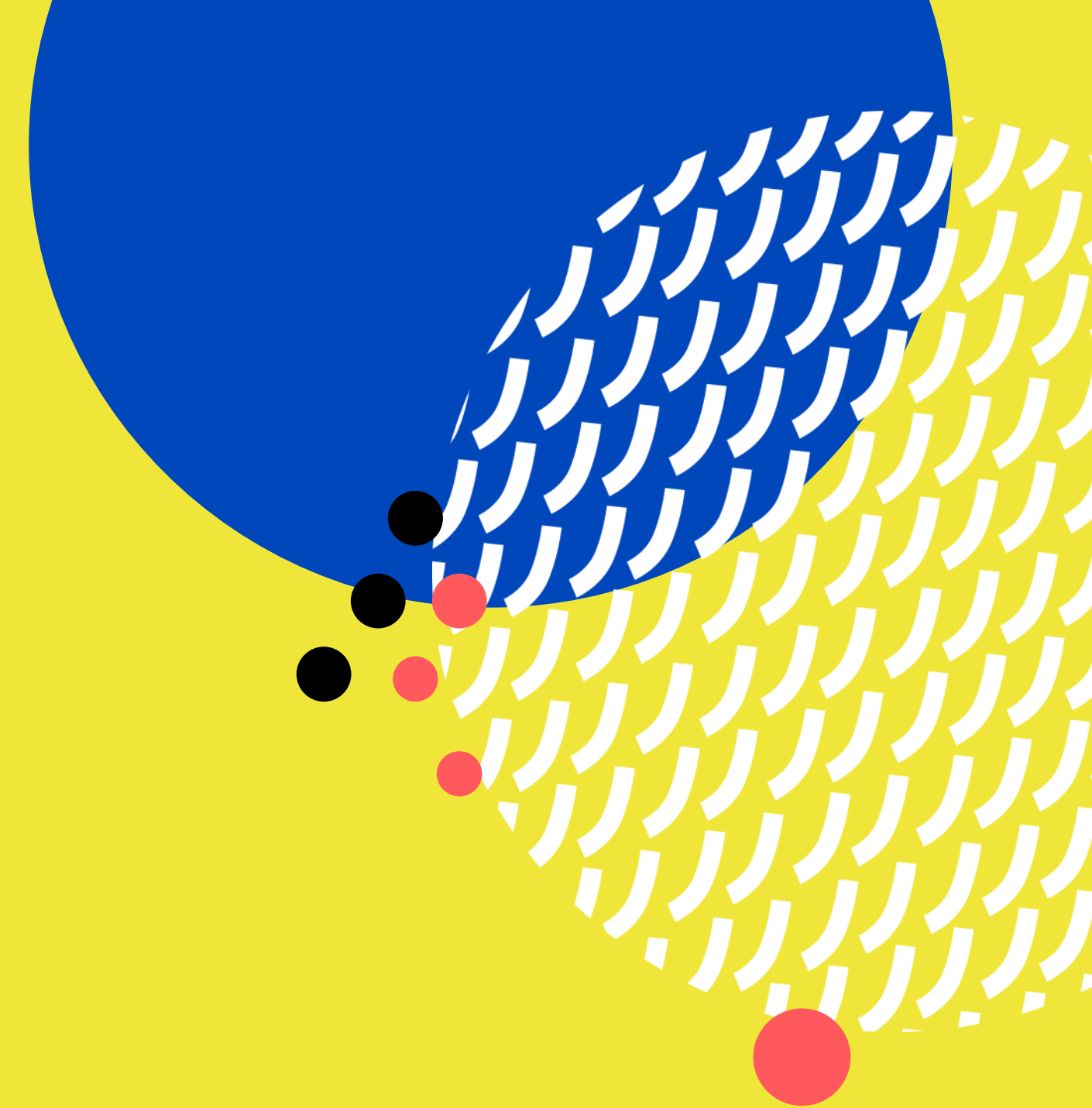


Internal Support
Access to internal fertility advocate or peer to peer support network for advice or signposting.



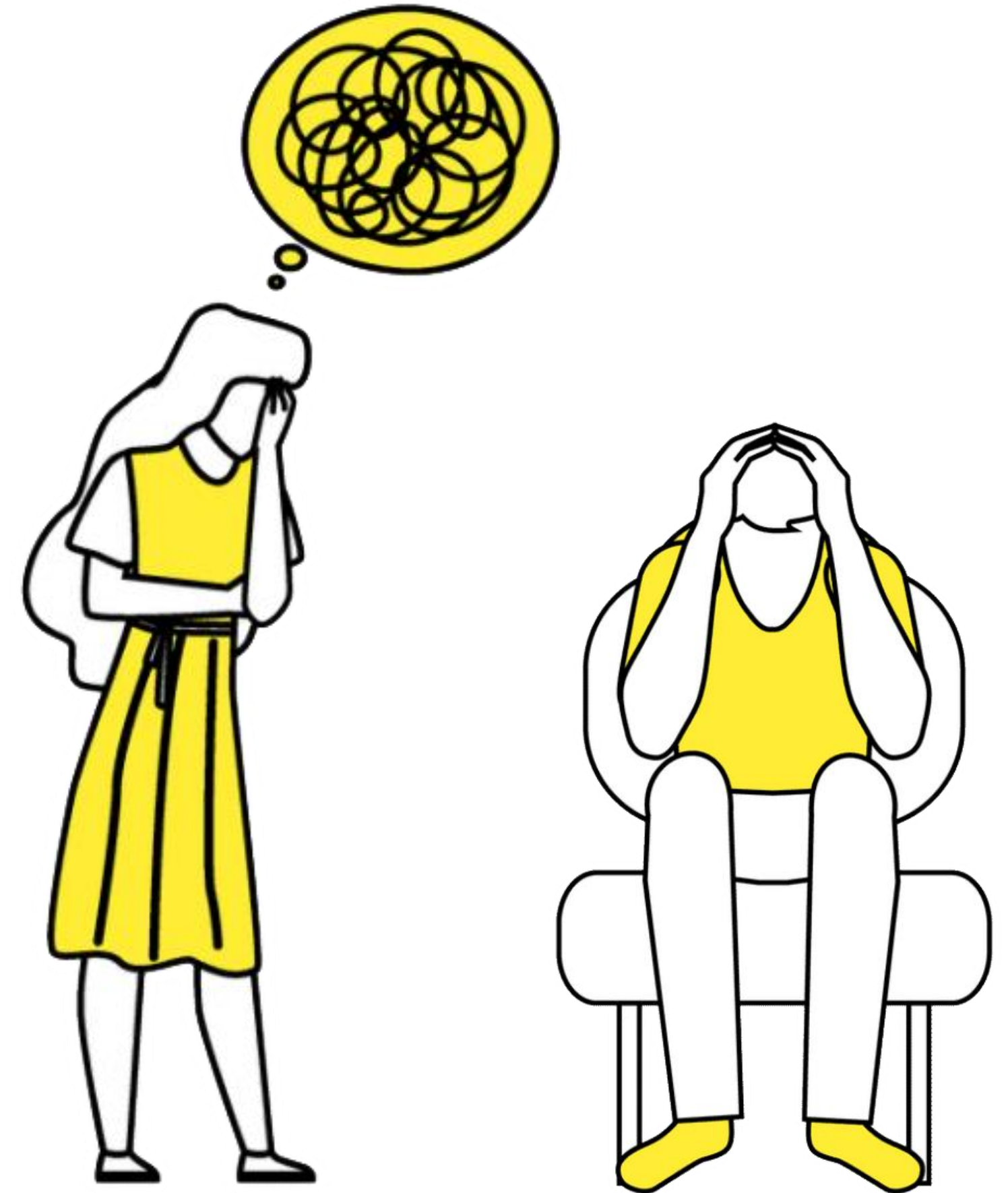
Policy Pointers

- Accessibility
- Entitlements
- Process
- Confidentiality
- Inclusivity
- Language
- Flexible working / Reasonable adjustments
- Focus on emotional support
- Signposts to further support
- How can you make the policy live and breathe?



How can employers offer support?

- Listen and empathise
- Find out what support they need
- Explore options for flexible working and reasonable adjustments
- Support practically on a day to day
- Confidentiality is key
- Take a long-term view
- Be mindful of daily triggers
- Don't ask intrusive questions
- Try not to give unwanted 'advice'



Becoming *Fertility Friendly*

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- Supportive culture fostering openness
- Policy and guidance is a good starting point
- Flexibility is key
- Education and awareness is vital
- Offer access to internal and external support networks



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Q&A



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