

Universal Access to Reproductive Healthcare

December 2022

Finance Sector Union

National Secretary: Julia Angrisano
2/341 Queen Street
Melbourne VIC Australia 3000

Ph: 1300 366 378

E: fsuinfo@fsunion.org.au

www.fsunion.org.au

This submission was prepared by FSU National Policy Officer Angela Budai.

Universal Access to Reproductive Healthcare

Contents

Executive Summary	3
Background.....	3
Introduction	3
Sexual and Reproductive Health Literacy	4
Recommendation 1: That the Australian Government invest in the production of guidelines for workers and employers about menstruation and menopause and recommended workplace modifications to assist workers to manage their symptoms.....	5
Recommendation 2: That the Australian Government fund a large scale research project to ascertain the impact of menstruation and menopause on Australian workers and their workplaces	5
The Availability of Reproductive Health Leave for Employees	5
Recommendation 3: The Workplace Gender Equality Agency Employer of Choice for Gender Equality Citation holders should be required to provide a period of paid leave for workers who are unable to work due to symptoms associated with reproductive health	6
Recommendation 4: The Australian Government should consult with relevant unions about the introduction of paid reproductive leave for federal public sector and independent agency workers.....	6
Recommendation 5: The Workplace Gender Equality Agency should require employers to report on whether they provide any paid reproductive leave, the quantum they provide and the update of this leave by their workforce.....	6

Executive Summary

The Finance Sector Union (FSU) has recently started campaigning for the introduction of various forms of paid leave to enable workers to better manage their reproductive health. The FSU this year developed a guide for FSU members to utilise when negotiating access to various forms of leave with their employers. While developing this guide it became obvious that there is an urgent need to increase reproductive health literacy in the workforce. There are particularly low levels of health literacy when it comes to the experience of workers who are going through menopause. Taboos and stigmas are preventing workers and managers from understanding the needs of workers who are struggling with the symptoms of menstruation and/or menopause as well as those who are undergoing fertility treatments.

It is unlikely that without a government funded education campaign levels of sexual and reproductive health literacy will remain low. Our primary and secondary schooling system may be the only time that Australian residents are provided with detailed accurate information about their sexual and reproductive health. It is vital for both the sexual and reproductive health of Australian workers that they understand the causes and symptoms related to their reproductive lifecycles. To increase the sexual and reproductive health literacy of adult Australians the government ought to fund an education campaign that provides resources suitable for distribution at workplaces. These resources should include fact sheets and written material as well as resources that can be shared electronically. Training modules for human resource managers that covered how to identify and support workers struggling with symptoms relating to their reproductive health would help to reduce the stigma and taboos that prevent workers asking for support.

It is important that the Federal Government take the lead and set the example for “best practice” provision of reproductive health leave. It was the public sector that took the lead in the provision of “maternity leave” that was later followed by large employers in the private sector and is now available to all Australian workers via the government funded scheme. It is vital that the government take the lead in this space and consult with their workforce and relevant unions before introducing “paid reproductive health leave” for all workers who are unable to work as a result due to symptoms related to their reproductive health.

Background

The Finance Sector Union (FSU) is a registered industrial organisation under the *Fair Work (Registered Organisations) Act 2009*. FSU represents members in the finance and insurance industry in Australia. This industry consists of approximately 537 700 employees nationwide (approximately 4% of the workforce) with women making up approximately 50.2% of the total number of workers within the sector¹.

Introduction

Employers in the finance industry include some of the largest, most profitable employers in the Australian economy and include Banks, Insurers and Superannuation Funds. Finance sector employers were some of the first large private companies to introduce private paid parental (then called maternity) leave schemes in the late 1980s and early 1990s. Today over 80% of finance workers who work for companies with more than 100 employees have access to private paid parental leave schemes² and 21 employers in the industry hold the Workplace Gender Equality Agency citation as Employers of Choice for Gender Equality³.

Employers in the finance industry compete to attract workers and they often do this by introducing working conditions that workers will find attractive and that set them apart. Workers in the finance industry also face

¹ <https://labourmarketinsights.gov.au/industries/industry-details?industryCode=K>

² https://data.wgea.gov.au/industries/27#carers_content

³ <https://www.wgea.gov.au/what-we-do/employer-of-choice-for-gender-equality/current-eocge-citation-holders>

one of the largest gender pay gaps that sits at 29.5% of total remuneration (2021)⁴. The gender pay gap is relevant to any discussion about access to reproductive health care as it is exacerbated by the early exit into retirement of workers⁵ who struggle to balance managing both their reproductive health and employers who lack the flexibility to provide reasonable adjustment to work design.

This submission will focus on two of the terms of reference, the first focus will be on “e. sexual and reproductive health literacy” and the second focus will be on “h. availability of reproductive health leave for employees.” The submission will outline some of the issues faced by finance workers at various stages of their reproductive life. The first section will highlight some of the impacts on workers of managing their reproductive health and the solutions recommended by the FSU for employers to better support these workers. The second section will outline the type of leave and support currently provided by some of the employers in the finance industry and recommend options that employers could provide to assist workers to better manage their reproductive health.

Sexual and Reproductive Health Literacy

There is a problem with a lack of literacy about sexual and reproductive health in our community. In recent years, the FSU has been finding that this lack of literacy is hindering workers capacity to both ask for and receive adjustments to their work when issues pertaining to their reproductive health are impacting their work. Recently the FSU has produced a policy document to support our claims for the introduction of Menopause and Menstrual Leave provisions in Enterprise Agreements⁶. The details of the work-related adjustments the FSU is seeking will be outlined in the next section below. In producing this policy framework, we realised that there has not been a lot of research conducted about the impact of reproductive health on Australian workers.

In 2019 the Victorian Women’s Trust (VWT) published “About Bloody Time”⁷ which contained results of a survey they conducted where they asked 3400 girls and women about their experiences of menstruation and menopause. More recently in 2021 the VWT published the e-book “Ourselves at Work”⁸ which drew on this research to provide recommendations about how employers can create a positive menstrual culture at work and overcome the taboo and stigma attached to menopause and menstruation. The “Women and Work Research Group” at the University of Sydney has also established “The Body@Work Project” to examine how workplaces can be more inclusive for workers. There have not been any in-depth studies on the reproductive health literacy of Australian workers. The VWT research highlights the lingering stigma and taboo attached to discussion of reproductive health, particularly the discussion by workers who menstruate and/or who experience menopausal symptoms of the impact that their symptoms have on their ability to perform their work. This taboo means that there are exceptionally low literacy levels about the symptoms that workers struggle with, and the simple work modifications that can be taken to improve the productive of these workers. The lack of literacy is not limited to workers who do not experience symptoms and their managers, but there are workers who are experiencing symptoms without any idea as to the cause:

“I felt agony in my chest whenever I was due on my period, my breasts were really sore to the point where I convinced myself that I had a breast tumour” Senior manager in rail and infrastructure⁹

⁴ https://data.wgea.gov.au/industries/27#pay_equity_content

⁵ A note on language. Trans women and trans men may also experience symptoms of menstruation and menopause. As a result, this document uses the gender-neutral term “worker” or “employee” when discussing reproductive health. The only exception to this is when direct quotes from other sources are used.

⁶ <https://www.fsunion.org.au/wp-content/uploads/2022/11/Menopause-and-Menstrual-Leave-Policy-Framework.pdf>

⁷ <https://www.vwt.org.au/projects/about-bloody-time/>

⁸ <https://www.vwt.org.au/wp-content/uploads/2021/12/Ourselves-At-Work-DIGITAL-V5.pdf>

⁹ <https://av.sc.com/corp-en/content/docs/Menopause-in-the-Workplace-Impact-on-Women-in-Financial-Services.pdf> pg 11

“If I’d know what I was going through, I may have chosen not to stand down from our senior leadership team. I just thought I couldn’t hack it anymore, I was no good at my job, and I chose to stand down” Middle manager in banking (former senior leader)¹⁰

In the United Kingdom, a study of 2400 finance workers’ experience of menopause was undertaken by the Financial Skills Commission and Standard and Chartered, “Menopause in the Workplace: Impact on Women in Financial Services”¹¹ and it found that 10% of the workers in the finance industry are going through menopause. It found that the cultural taboos mean the impact of menopause is hidden, that the industry is losing talent due to workers exiting the workplace rather than asking for modifications to their work and that with the right support, workers will stay and progress in the industry. The VWT publications¹² also suggest that workplaces will retain highly skilled workers if they break down the taboos linked to menopause and menstruation. Mutual understanding among not only workers who experience symptoms, but their colleagues and managers will assist workplaces become more pleasant, welcoming, and productive places for all workers.

“I couldn’t understand why it wasn’t talked about more, and why I hadn’t really known about the impact on so many women”¹³

“I know menopause is a powerful time, but I don’t think as a society we support the transition for most women. We also need to be better educated about the process”¹⁴

The FSU guide recommends that workplaces provide information to their workforce about menopause and menstrual symptoms so that workers who experience them and their managers recognise the symptoms. It recommends that people managers be trained in recognising symptoms and understanding the benefits to workplace productivity of providing support to these workers. It also recommends that employers provide a suite of flexible options that workers can take advantage of to assist them to manage their symptoms, or take time away from work if that is what is required¹⁵.

Recommendation 1: That the Australian Government invest in the production of guidelines for workers and employers about menstruation and menopause and recommended workplace modifications to assist workers to manage their symptoms.

Recommendation 2: That the Australian Government fund a large-scale research project to ascertain the impact of menstruation and menopause on Australian workers and their workplaces

The Availability of Reproductive Health Leave for Employees

The finance industry is one of the largest and most profitable in Australia and invests considerably in providing employment conditions to attract and retain workers. There are currently 20 employers in the finance industry that hold the Workplace Gender Equality Agency (WGEA) Employer of Choice for Gender Equality Citation¹⁶. This citation program is designed to “encourage, recognise and promote organisations’ active commitment to

¹⁰ Ibid pg 14

¹¹ Ibid

¹² <https://www.vwt.org.au/wp-content/uploads/2021/12/Ourselves-At-Work-DIGITAL-V5.pdf> pp 4-6

¹³ “About Bloody Time” Victorian Women’s Trust (2019) pg 183

¹⁴ Ibid pg 196

¹⁵ <https://www.fsunion.org.au/wp-content/uploads/2022/11/Menopause-and-Menstrual-Leave-Policy-Framework.pdf> pp 9-10

¹⁶ <https://www.wgea.gov.au/what-we-do/employer-of-choice-for-gender-equality/current-eocge-citation-holders>

achieving gender equality” (WGEA). The criteria to achieve this citation does not currently include providing access to reproductive health leave for workers¹⁷.

The FSU has been perusing paid menopause and menstrual leave in enterprise bargaining as one of our key claims for approximately 12 months. During that time, we have provided detailed briefings outlining the nature of the problem and the benefits of supporting works through providing this leave to numerous organisations including several large employers. To date, the only employer that has included paid menopause and menstrual leave in their Enterprise Agreement is CBUS¹⁸ that provides an additional 12 days of personal leave for workers who are unable to work due to symptoms associated with menstruation or menopause. There are other companies, for example FutureSuper that have introduced leave outside of Enterprise Bargaining¹⁹ but the FSU does not have a comprehensive or up to date list available.

Recently there has been movement in the finance industry to introduce paid leave to support workers who are undergoing fertility leave. This is a relatively new development and has not yet been in any Enterprise Agreement that the FSU has negotiated. There is just one finance employer, Westpac that has decided to introduce paid fertility leave²⁰. This leave is one week of paid leave provided to workers to attend appointments related to fertility treatment. The leave is pro-rata for part time workers and does not accrue but can be used in blocks and cannot be used by partners (they must use carers leave) only by those undertaking the treatment.

Reproductive health leave is in its infancy in Australia. It is likely that the number of employers introducing these forms of leave will increase as they look to either differentiate themselves from their competitors. Once a standard is established and that “employers of choice” provide these forms of entitlements employers will race to make sure they are not falling behind and losing out to competitors. There are studies from overseas jurisdictions that demonstrate the productivity losses due to “presenteeism” are greater than those lost to workers taking leave to deal with symptoms associated with reproductive health²¹. Normalising the provision of paid leave for workers who are unable to work due to symptoms associated with reproductive health will be good for workers and good for productivity.

Recommendation 3: The Workplace Gender Equality Agency Employer of Choice for Gender Equality Citation holders should be required to provide a period of paid leave for workers who are unable to work due to symptoms associated with reproductive health

Recommendation 4: The Australian Government should consult with relevant unions about the introduction of paid reproductive leave for federal public sector and independent agency workers

Recommendation 5: The Workplace Gender Equality Agency should require employers to report on whether they provide any paid reproductive leave, the quantum they provide and the update of this leave by their workforce.

¹⁷ <https://www.wgea.gov.au/sites/default/files/documents/2022-07-27-%20EOCGE%20top-level%20criteria%20summary.pdf>

¹⁸ <https://fsuaustralia.wpenginepowered.com/wp-content/uploads/2022/07/United-Super-Pty-Ltd-Collective-Bargaining-Agreement-2021.pdf>

¹⁹ <https://www.abc.net.au/news/2021-06-24/menstrual-leave-australia-womens-health-employment-workplace/100235920>

²⁰ <https://www.afr.com/work-and-careers/workplace/westpac-offers-leave-for-fertility-treatment-20221128-p5c1t0#:~:text=The%20Sydney%2Dbased%20lender%20is,addition%20to%20their%20sick%20leave.>

²¹ <https://bmjopen.bmj.com/content/9/6/e026186>
