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Contemporary Issue



Are menopausal symptoms a barrier to learning for healthcare students studying at higher education?: A contemporary issue

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ABSTRACT

Problem: Little is known about the impact of menopausal symptoms on healthcare students' ability to study at higher education level.

Background: Attention on menopause is rapidly increasing in both the literature and media and is gaining political attention with particular focus on supporting those experiencing menopausal symptoms in the workplace. Policies are being developed to support individuals to remain in work for longer, reducing the number of people leaving the workplace due to challenging menopausal symptoms. However there is no evidence to suggest that support for higher education students experiencing menopausal symptoms is widespread. Whilst some higher education institutions and organisations are developing policies to support staff and, sometimes students, current literature does not reflect how students and their studies may be affected by menopausal symptoms. This is relevant to institutions where healthcare professions courses are delivered as this is thought to have contributed to the overall increase in the number of female students attending universities both in the UK and globally. A continued lack of understanding of menopausal symptoms' impact on students could not only be detrimental to the student experience, but it could also affect institutional reputations for being good places to study, resulting in increased attrition rates due to students withdrawing from courses because of the impact their symptoms have on their ability to continue studying.

Aim: In this Contemporary Issues article our aim is to raise awareness of how menopausal symptoms may affect a student's ability to study, and to reinforce the need for university policy makers and educators to recognise and support women at this turbulent time of their lives to continue to study.

1. Background

Supporting menopausal women in the workplace has been gathering momentum. There is growing attention on menopause in the literature including Arnot et al. (2021), Rees et al. (2021), Crandall et al. (2023), Cowell et al. (2024), Fang et al. (2024) and Safwan et al. (2024), in the media by personalities including Davina McCall, and in the political arena with the establishment of the UK Menopause Taskforce and Department of Work and Pensions Menopause Employment Champion (Gov.uk, 2023). However there is a dearth of evidence to suggest the same support is afforded to higher education students experiencing menopausal symptoms because the focus is on menopause in the workplace. Most women experience menopause between the ages of 45–55 as a natural part of aging, and the global population of aging women is increasing with menopausal symptoms affecting about 50 % of women in this age range (Fang et al., 2024). Women under the age of 40

can also experience menopausal symptoms (1 in 100) with 8 out of 10 in this age range experiencing debilitating symptoms. Whilst some women have few symptoms and are not affected during their menopause journey, 75 % experience symptoms including difficulty in concentration, fatigue and increased stress levels. A quarter of symptomatic women describe their symptoms as severe, and a third may be facing long term symptoms lasting seven years or more. Although the menopause is not considered a disability under the UK Equality Act 2010, some of the symptoms which arise can be debilitating and long term, such as depression and genitourinary problems including urinary urgency and recurrent urinary tract infections (Crandall et al., 2023). It has been acknowledged by both Safwan et al. (2024) and Cowell et al. (2024) that such symptoms experienced in the workplace can adversely affect a woman's ability to carry out their work effectively. Because menopausal symptoms can detrimentally affect a woman's capability to carry out normal day to day activities, higher education study over a

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period of several months or years can be included in this caveat. By considering how women are affected by their symptoms in the work-place, a greater understanding is leading to the widespread need to develop policies and support mechanisms to enable women to remain in work during menopause, therefore the same approach should be applied in the university setting for students.

1.1. The importance in higher education

Menopause policy for students is rarely considered in higher education institution policy development as most policies are written to support menopausal staff in their workplace. Understanding how menopausal symptoms might affect female students would allow academics and institutions to provide support in the same way women can be supported in the workplace. An internet search of 20 randomly selected UK institutions out of a possible 166 revealed 75 % of the sample have a current menopause policy for staff only, 20 % included both staff and students, and one institution (5 %) issued guidance specifically for students and staff supporting menopausal students. As this was only a small sample, further investigation is warranted to determine more accurately how institutions support students experiencing menopausal symptoms. Whilst higher education institutions and organisations are developing policies to support staff and sometimes students, the literature does not reflect how students and their studies may be affected by menopausal symptoms. A continued lack of understanding and support could negatively impact the student experience as students feel they are unable to continue with their studies due to symptoms such as memory and concentration loss inhibiting their ability to study (Rees et al., 2021). For higher education institutions, this lack of support for those female students experiencing menopausal symptoms could affect the institutional reputation for being a good place to study, with increased attrition rates due to students withdrawing from their course because of the impact of their symptoms on ability to continue studying.

Current figures from the Higher Education Statistics Agency (HESA, 2023) show the number of female students in the UK is increasing year on year with 411,645 more female students (n = 1,633,425) than male (n = 1,221,780). This increase mirrors what is happening globally, where in the 776 institutes worldwide 54 % of students are female. In terms of age range current HESA statistics show the number of students aged 30 years and over has increased every year from 488,780 in 2017/ 18 to 645,680 in 2021/22. Whilst the age group statistics do not show how many female students are in each age group category it can be assumed there are likely to be more females than males given the overall number of female students in higher education. With at least 1 % of the female student population in the UK (n = 16,334) experiencing menopause at any one time, this suggests that on average each of the 166 UK institutions could have at least 98 students affected by menopausal symptoms. HESA data indicates there is a year on year increase of female students, therefore the number experiencing menopausal symptoms can also be expected to increase.

The issue of menopause is of relevance to universities where female dominated healthcare professions including nursing, midwifery and allied health professions education is delivered because, as Bothwell et al. (2022) suggest, the increase in the number of female students studying at universities is probably because these professions are now degree programmes. As there is currently a reduced number of applicants for nursing degrees, universities and healthcare systems cannot afford for the numbers of nurses to be further reduced due to a lack of practical and compassionate support for debilitating menopausal symptoms whilst studying at university. Many full time undergraduate nursing, midwifery and allied health professions students may be working parttime for financial reasons, and part-time postgraduate healthcare students are likely to be working in full or part-time roles in the healthcare setting with higher education qualifications a requirement of their employment or career progression. As undergraduate and postgraduate students are likely to be supported during this challenging time by

managers and menopause policies in their workplace, it would be prudent for higher education institutions to understand how menopausal symptoms impact students' ability to study as symptoms do not cease when the student commences university study. Institutions can become better placed to support students in the same way employees are supported by employers. By being able to understand how students might be affected by menopausal symptoms, personal tutors and higher education institutions can develop caring and compassionate support strategies and policies to enable individuals to continue studies and reduce attrition rates. Exhibiting a caring and compassionate approach to supporting students experiencing menopausal symptoms could enhance both the student's own individual experience and a university's reputation for providing a better student experience which could attract more applicants notably in female dominated healthcare professions.

1.2. Menopausal symptoms: A barrier to learning?

Menopause is likely to affect a significant number of female students at any age who may be experiencing ongoing regular symptoms such as brain fog and reduced cognition which can adversely affect their ability and motivation to study for all or part of their course, and they can be affected in different ways and severity. It is also worth noting that menopause can exacerbate existing medical conditions resulting in female students requiring time away from studies to attend treatment and appointments, and this could mean that any existing reasonable adjustments for individuals may need to be reviewed by university occupational health departments or disability services and student support teams.

Arnot et al. (2021) explores the relationship between menopausal symptoms, stressful events and social support, indicating that women's symptoms (e.g. hot flashes and night sweats) increased by 21 % compared with women who were not experiencing stressful events. In the higher education context, the requirement to produce course work for assessment combined with the additional workload of study alongside existing work and family commitments could arguably be classed as a stressful event, which subsequently increases symptoms. An additional stressor for undergraduate nursing, midwifery and allied health professions students is the requirement to attend clinical placements, often in an area away from where they live, and with shift patterns over a 24 h seven day period for several weeks at a time. It cannot be assumed all undergraduate student groups comprise solely of school and college leavers aged 18+ as there may also be mature women in the 30+ age range who are embarking on a career change later in life, and therefore menopause will affect undergraduate courses and students as well as mature postgraduate student groups. For many postgraduate healthcare students who are more likely to be in the 45-55 age range, not only are they employed in a healthcare setting which is often a highly stressful and demanding workplace, they may also be caring for both children and elderly parents, or facing 'empty nest syndrome', along with completing higher level course work. Being able to remove some additional stress from their life may mean both undergraduate and postgraduate healthcare students choose to leave their studies, which could negatively impact on both personal career development and university attrition rates, a combination that could adversely affect a university's reputation as a good place to study. Because some students may find they are unable to concentrate and cope with study on top of other demands including full or part-time work commitments and caring responsibilities, university policy makers and educators should consider how menopausal symptoms may be affecting students and make reasonable adjustments to support students to continue studying. Reasonable adjustments such as including menopausal symptoms as grounds for allowing extra time for assessments and submission deadlines could be considered in the same way other physical and mental health conditions are. Student support teams could also signpost students to other external organisations for help and support, for example the British Menopause Society or the International Menopause Society.

1.3. Investigating and addressing the effect menopausal symptoms may have on interprofessional healthcare students' experience

In this article it has been identified there is both a gap in the literature and in the implementation of university policies to support students experiencing menopausal symptoms and there are two recommendations for further consideration and discussion. Firstly, for university policy makers to consider revising current menopause policy to include students, or to develop a student specific menopause policy. Secondly, there is an opportunity for qualitative research to begin to develop an understanding of how students' ability to study at higher education level might be affected by menopausal symptoms, and to what extent. For example it may be determined that students can find symptoms negatively impact not only their ability to continue with their studies, but also their own student experience and being able to do the work, alongside the enjoyment of learning and their application of learning to practice. Ascertaining in what ways students are affected by symptoms including memory loss and concentration, and other factors such as fatigue and motivation will be valuable in determining how to support students effectively. For example, as cognition is vital for learning, it is important to determine what types of intermittent cognition function decline associated with 'brain fog' type symptoms students report changes in with respect to their personal menopausal symptoms, and what level of decline occurs. It is expected this may affect students' ability to study, possibly leading to some students considering withdrawing from or leaving their course. A greater understanding of how students are affected may reveal what support they would value to help them continue their studies whilst experiencing challenging menopausal symptoms, as there is currently no literature available to draw upon. Existing gaps in the literature can be filled with outcomes which generate a better understanding about how menopausal symptoms might impact on students' ability to continue their studies. Sharing new knowledge could allow universities to be better prepared to support students at this challenging time, and for students to feel better supported and understood, enabling them to continue studying rather than considering withdrawing from their course due to impactful symptoms. Future work disseminated in the literature should help contribute to the conversation and understanding of the impact of menopausal symptoms on individuals in settings other than the employee in the workplace. This is important because students tend to be employed in either full time or part time work and are likely to be currently supported through their workplace menopause policy although the same level of support and understanding is not yet applied across universities. Developing policy and qualitative studies in this area should help close the knowledge gap and start a wider contribution to the literature so that students can be better supported through such a challenging time by their institution as well as in their workplace. With a reduced number of applications for female dominated health professions courses such as nursing, institutions will be keen to lower attrition rates, and an understanding of how to better support students experiencing menopausal symptoms may be one way to achieve this.

2. Conclusion

With widespread attention and policy development on supporting

those experiencing menopausal symptoms in the workplace, the same consideration should be applied to students in higher education institutions. With an ever increasing number of female students studying at universities both in the UK and globally, the need to support those experiencing menopausal symptoms is becoming more significant and should be in line with support currently offered in the workplace. For female students going through menopause their symptoms simply do not cease once they cross the threshold of a university campus, therefore practical and compassionate support should not stop either and should be offered in higher education institutions as well as the workplace.

Author statement

This is my own original work and I have not used any artificial intelligence software to prepare the manuscript.

CRediT authorship contribution statement

Sara N. Galletly: Writing - review & editing, Writing - original draft.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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