



Lifting the Second Glass Ceiling

Update report - September 2025



Foreword



Anne Hayes
Director of Sectors, BSI

In 2023, BSI published research exploring the experiences of women in the workplace, looking specifically at the barriers to remaining in work and why some were leaving their careers early and not out of choice. We termed this phenomenon a 'Second Glass Ceiling', focused less on career advancement and more on career longevity and employee retention.

At the time, we highlighted key steps employers could take, from enhanced menopause support (including utilizing the then recently published BSI guidance on menopause and menstruation in the workplace, BS 30416¹) to ensuring a culture of flexibility, as well as, crucially, asking women what change they wanted. All of that still applies, and in the ensuing period it has been welcome to see some employers take steps to address the barriers to experienced women staying in work. The fact that 44% of women are now aware of support around matters such as menopause is a testament to the work of campaigners, policymakers and business leaders to put this topic on the agenda.

Yet two years on, it is clear there is still much work to be done. While labour market participation is high amongst both men and women, women around the world still experience lower pay and less secure employment. And, as our research shows, a fifth are still expecting to leave employment early and not necessarily out of choice. This is a loss that does not need to happen. It is striking that our data

shows that flexibility or other adjustments can be the difference between a woman taking time off work due to menopause, problems related to menstruation, difficult pregnancies or other common experiences, or staying and remaining productive. At the same time there is clear appetite for formal and informal support; while some women understandably want to deal with these experiences privately, not all do. The choice should be theirs to make and employers looking to attract and retain skilled women have the opportunity to enable this.

Women are not confident that they will receive the necessary flexibility and support, reach pay parity or see equity in other areas. But change is possible, and I know there are many business leaders looking to lead the charge, on menopause, mental health, neurodiversity and beyond. They recognize that an inclusive workforce that responds to people's needs is one fit for future.

A true culture of care is one that addresses the impact of experiences at all stages, for men and for women, prioritizes people and creates trust. This can be the catalyst for a stronger workplace in which organizations can thrive and all of us can contribute.

Executive Summary

In 2023, BSI explored the phenomenon of the 'Second Glass Ceiling', whereby some women were leaving their careers early, for reasons including experiences with menopause. This new research continues that conversation, while also looking at other common experiences including menstruation or difficult pregnancies.

Key findings

Loss of experienced women

A fifth of women are still planning to leave the workforce before retirement, broadly consistent with 2023². For some, this will be a choice driven by financial security, preference around hobbies and leisure, or prioritization of caring responsibilities. For others, the spectre of the Second Glass Ceiling remains.

The flexibility factor

65% of women work in person yet 78% want flexibility with where they work or their hours. Four in ten specifically said flexible arrangements would help them to remain in the workforce for longer.

Reasons to remain

Drivers that would help women remain in work include flexibility, financial benefits, and support around family life. 71% globally said pay parity would be valuable, while for three quarters, tax or pension incentives would make the difference. Others highlighted improved support for maternity and return to work (76%) and improved support for chronic and other illness such as cancer (77%).

Expectations for the future

Optimism is no higher in 2025, and in some cases lower. Only 42% globally anticipate their generation will receive pay parity, down from 57%. Only 43% are confident their generation of women will receive the flexibility and support needed to stay in the workforce as long as men, down from 59%.

Willingness to come forwards

Only 29% would be comfortable raising fertility or miscarriage issues with a male line manager, while 61% have never heard their employer talk proactively about menopause support. Still, women are beginning to come forwards. 41% globally have raised issues such as menopause, menstruation, difficult pregnancies or miscarriage with their employer.





The role of employers

The data suggests an exponential rise in awareness of formal policies to address personal health and well-being issues such as menopause and health related to menstruation, from 7% in 2023 to 44% today. 70% want their employer to have a clear process and approach to women experiencing these challenges.

Menopause management

A fifth (20%) globally cite menopause as a barrier to remaining in work. 17% to whom it applies have taken time off due to menopause, but 22% worked flexibly so did not need time off. Notably, three out of five (68%) believe employers have a role in offering support, and over half (59%) of women globally say it is helpful for organizations to have formal menopause policies and 58% on menstruation.

Conclusions and key takeaways

That a fifth of women are still expecting to leave the workforce early should be seen not as an intransigent fact of life, but an economic obstacle that can and must be overcome. Key areas for action include:

- Acknowledge that the Second Glass Ceiling is still intact

- Recognize the value of flexibility
- Respond to growing employee expectation
- Offer formal and informal support
- Create a true culture of care

How BSI can help

BSI has a range of services to support employers BSI has a range of services to support employers and employees with health and well-being, including:

- Menstruation, menstrual health and menopause in the workplace ([BS 30416](#)).
- The globally recognized occupational health and safety standard ([ISO 45001](#))
- The global best practice standard for psychological well-being at work ([ISO45003](#))

[Explore the full range of BSI standards of best practice, training courses and expert consultancy to support your organizations health and well-being.](#)

The global picture

Policy developments

According to the IMF, most countries continue to have higher employment for men than for women³. While labour market participation varies radically across countries, women are understood to account for 42% of the global workforce⁴, and even in the OECD, there is an average gender pay gap of 13.1%⁵. The barriers differ, for example cultural factors inhibiting participation or inclining women to low paid roles; equally, caring responsibilities and traditional family structures have a role to play.

Governments committed to addressing this have brought in various policy interventions, not least paid maternity leave or the right to flexible working. More recently, and perhaps in the context of people staying in work for longer, greater focus on the experience of menopause has seen some policymakers explore how to support women in the workplace through this stage in life. Below, we review developments in key economies around menopause to better understand what progress has been made and where gaps remain.



UK

The UK has set the pace with legislative proposals⁶, employer guidance⁷, and cultural advocacy around menopause in the workplace⁸, concerns remain over uneven access to care⁹, lack of GP training¹⁰, or the risk of menopause being deprioritized in local health planning¹¹.

Helen Tomlinson was appointed the UK's first Menopause Employment Champion¹² under the last Conservative government. This period saw the creation of the Menopause Resources Hub¹³, which provides workplace guidance and resources. Another is the Wellbeing of Women's 'Menopause Workplace Pledge', which over 1,700 organizations including the Civil Service, BBC, Royal Mail, and Tesco¹⁴ have signed. It's a public commitment to supporting women's well-being, take positive action to make sure everyone going through menopause is supported, and communicate to prospective employees that they are a menopause-friendly organization.

Mariella Frostrup now serves as the UK Government's Menopause Employment Ambassador¹⁵. She convened the first Menopause Advisory Group in April 2025, comprising experts from industry and healthcare. Other key campaigning forces include the charity Menopause Mandate, as well as MPs including Carolyn Harris.

6 [Roadmap unveiled to boost rights for half of all UK workers and provide certainty to employers](#)

7 [Menopause in the workplace: Guidance for employers | EHRC](#)

8 [Sign the Menopause Workplace Pledge](#)

9 [10-year study shows deep inequalities in menopause treatment access](#)

10 [Web-info-Shocking-Disparity-in-Menopause-Training-in-Medical-Schools-1.pdf](#)

11 [Women's Health: How councils are making a difference | Local Government Association](#)

12 [Government appoints first Menopause Employment Champion to improve workplace support - GOV.UK](#)

13 [Menopause Resources Hub](#)

14 [Civil Service becomes largest organisation to sign Menopause Workplace Pledge - GOV.UK](#)

15 [Women's health campaigner Mariella Frostrup appointed as Government Menopause Employment Ambassador - GOV.UK](#)

Netherlands

The Ministry of Social Affairs and Employment¹⁶ offers information on creating healthy working conditions and promoting flexible work policies. Despite these limited efforts, the implementation of menopause-related policies in the workplace remains sparse in the Netherlands, despite calls for greater support.

In particular, the CNV trade union¹⁷ has advocated for employers to develop policies that include input from women themselves, emphasizing that menopause is not just a women's issue but a broader labour market concern.

Germany

The first parliamentary event bringing together menopause campaigners and experts took place in March 2023, driven by MPs Dorothee Bär and Julia Klöckner. It highlighted the medical, personal, economic and societal challenges caused by menopause. As a result, two committees issued a joint declaration calling for changes in medical fees and university curricula to provide more funding for menopause research¹⁸.

The coalition agreement published in April 2025, includes mentions of both menopause and research for women's health, indicating a new commitment to these issues¹⁹.

China

Governmental initiatives addressing menopause in the workplace are currently minimal in China, with no specific legislation or workplace guidelines focused on menopause.

Japan

The government took the first steps to address menopause as a public health and workplace issue by publishing the Gender Equality White Paper²⁰ in 2024. This emphasized the importance of employers actively addressing menopause, to support career development and increase female representation in managerial roles.

The Health and Global Policy Institute (HGPI) further highlighted menopause's economic impact, publishing a report titled "Policy proposal for Promotion of Menopausal Women's Health as a Social Issue to be Considered by Industry, Government, Academia and the Private Sector"²¹ which signposted that menopausal symptoms account for over ¥1.9 trillion in lost productivity and called for national-level action involving government, academia, and the private sector.

India

Currently, India does not have a dedicated national policy or legislation specifically addressing menopause, either in healthcare or workplace regulations, although the issue is gaining traction in media conversation and amongst some Indian businesses²².

A world map with the United States and Australia highlighted in light blue and light green respectively. The US text box is on the left, and the Australia text box is on the right.

US

There has been increased momentum around menopause awareness and support, driven by celebrity campaigning and advocacy work from groups such as Menopause Mandate US, although comprehensive national policies remain limited.

In 2024, the Advancing Menopause Care and Mid-Life Women's Health Act (2024) bipartisan bill was introduced by Republican senator Lisa Murkowski and Democrat Patty Murray, backed by 16 other senators. The legislation proposes a \$275 million investment over five years to enhance menopause care and mid-life women's health. Key provisions include increased funding for menopause research, as well as initiatives to raise awareness about menopause and related health issues, including educational campaigns targeting both the public and healthcare providers. The act is yet to be passed to law.

While a number of states are considering action, in June 2025, Rhode Island's governor signed into law new requirements around workplace protection for those experiencing menopause²³, essentially putting it on a par with pregnancy, childbirth, and related medical conditions.

Australia

In 2025, the Australian Government responded to a Senate inquiry²⁴ on menopause by supporting 16 of 25 recommendations, including the implementation of Medicare rebates for menopause health assessments, the development of clinical guidelines and training for healthcare professionals, and the launch of a national awareness campaign.

The Government also invested \$573 million²⁵ in women's health, focusing on improving access to menopause treatments, including subsidised hormone replacement therapies and the first new contraceptive pill on the Pharmaceutical Benefits Scheme in 30 years.

Key findings

Loss of experienced women

Strikingly, the data shows that a fifth of women are still planning to leave the workforce before retirement age. While progress does not appear to have slowed, with data broadly consistent with 2023²⁶, even adjusted for the additional markets assessed in 2025²⁷, a proportion of women are still being locked out of work. For some, this will be a choice driven by financial security, preference around hobbies and leisure, or prioritization of caring responsibilities. For others, the spectre of the Second Glass Ceiling remains.

Early departure is now most prevalent in Australia, where 31% say they expect to retire early (up from 17% in 2023). In contrast, only 13% of Chinese women say the same, a fall from 39% in 2023. Notably, this trend applies across all age groups. For example, 24% of 18 to 34 year olds expect to retire early. Which sector they work in can influence how likely women are to retire. In the retail industry, two out of ten (21%) do not expect to retire at all, compared with just 8% working in technology. Women in manufacturing are most confident of retiring, over half (52%) say they plan to do so at the official retirement age. Technology is a close second with 51% agreeing.

Notably, menopause or perimenopause appear to be exacerbating factors behind early departure – 29% of those experiencing one of these expect to retire early.



Figure 1: Expected point of retirement

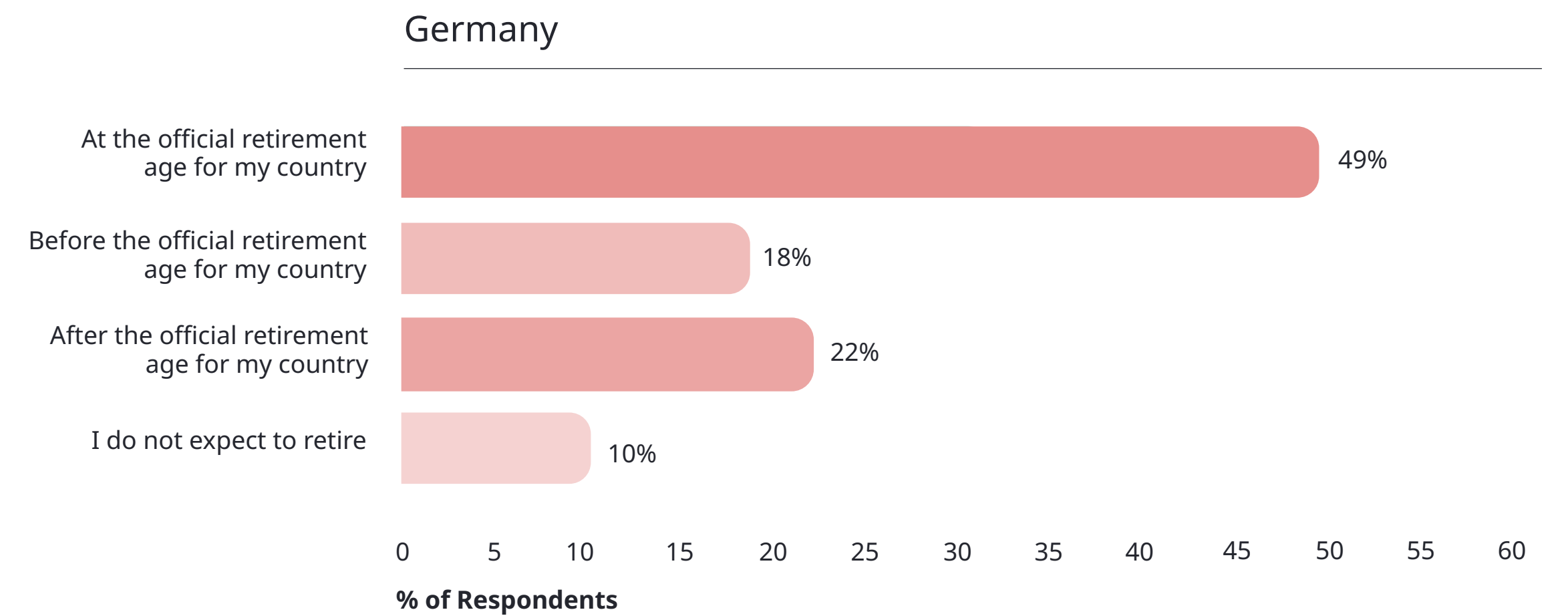
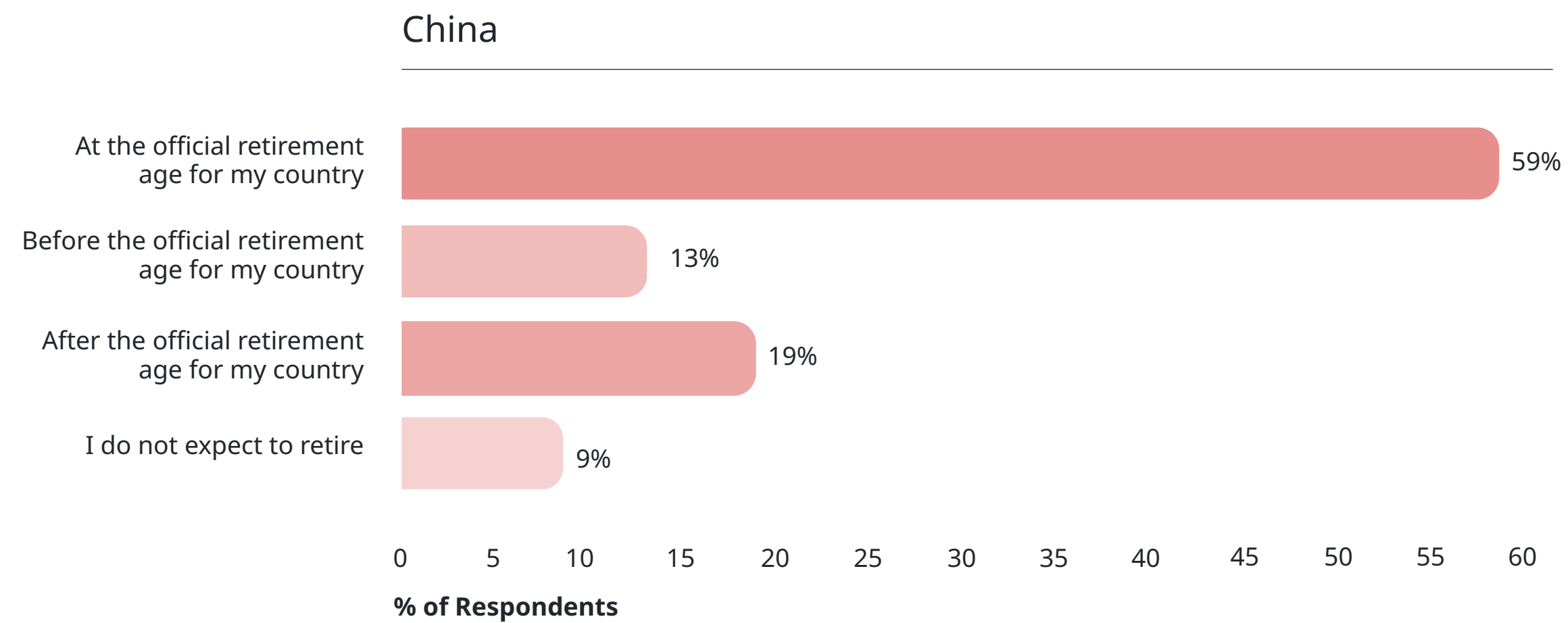
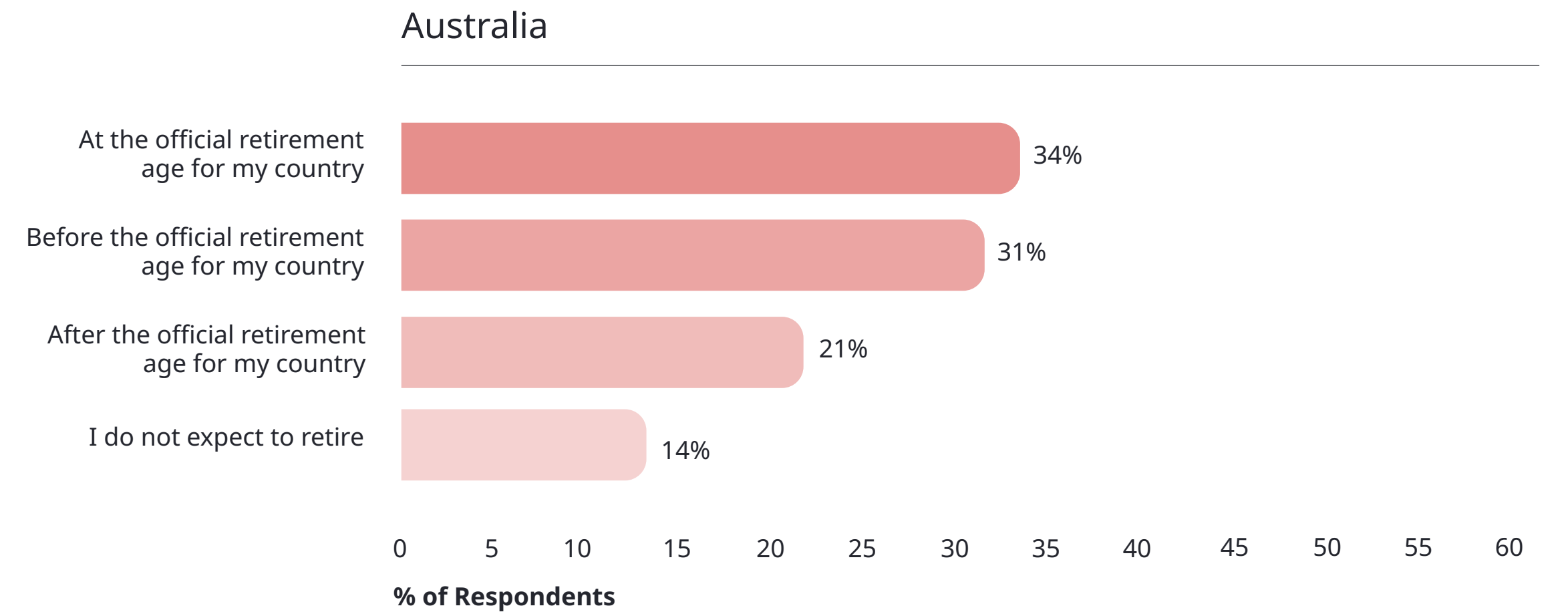
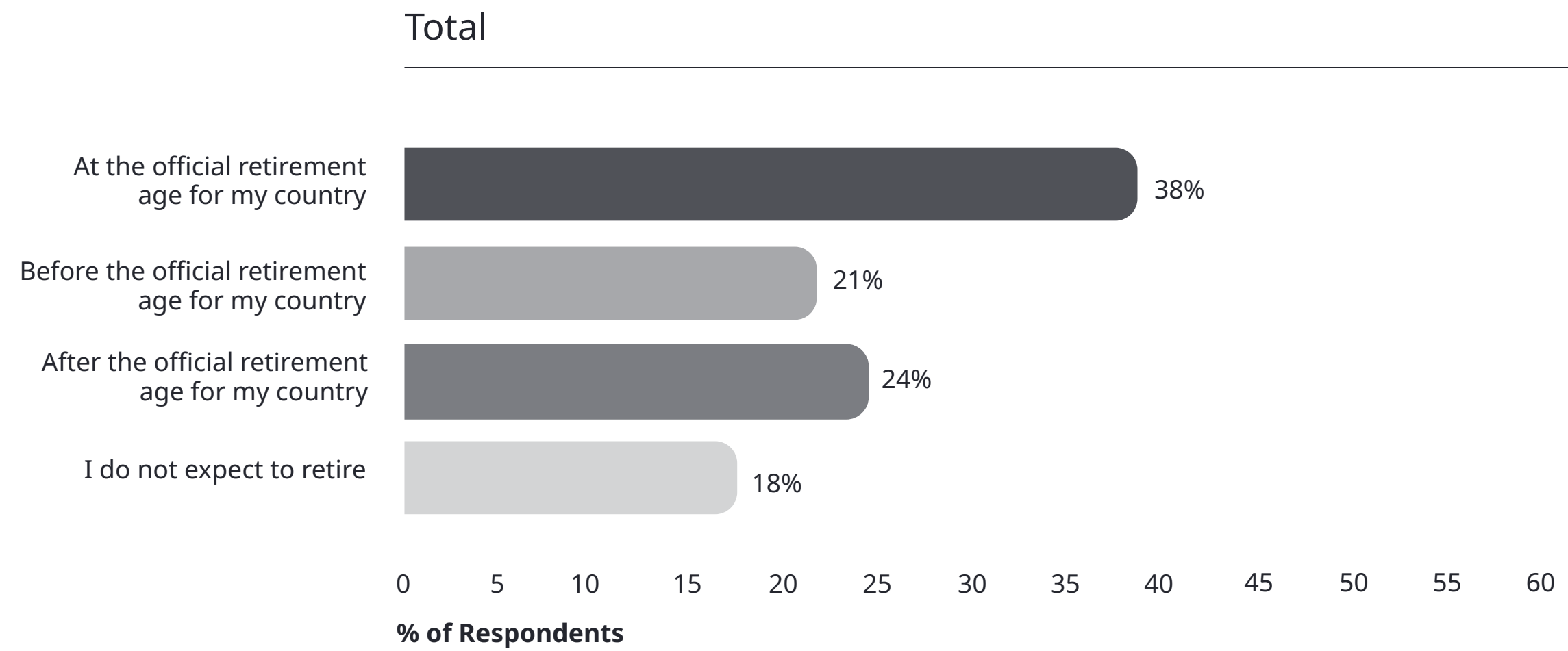
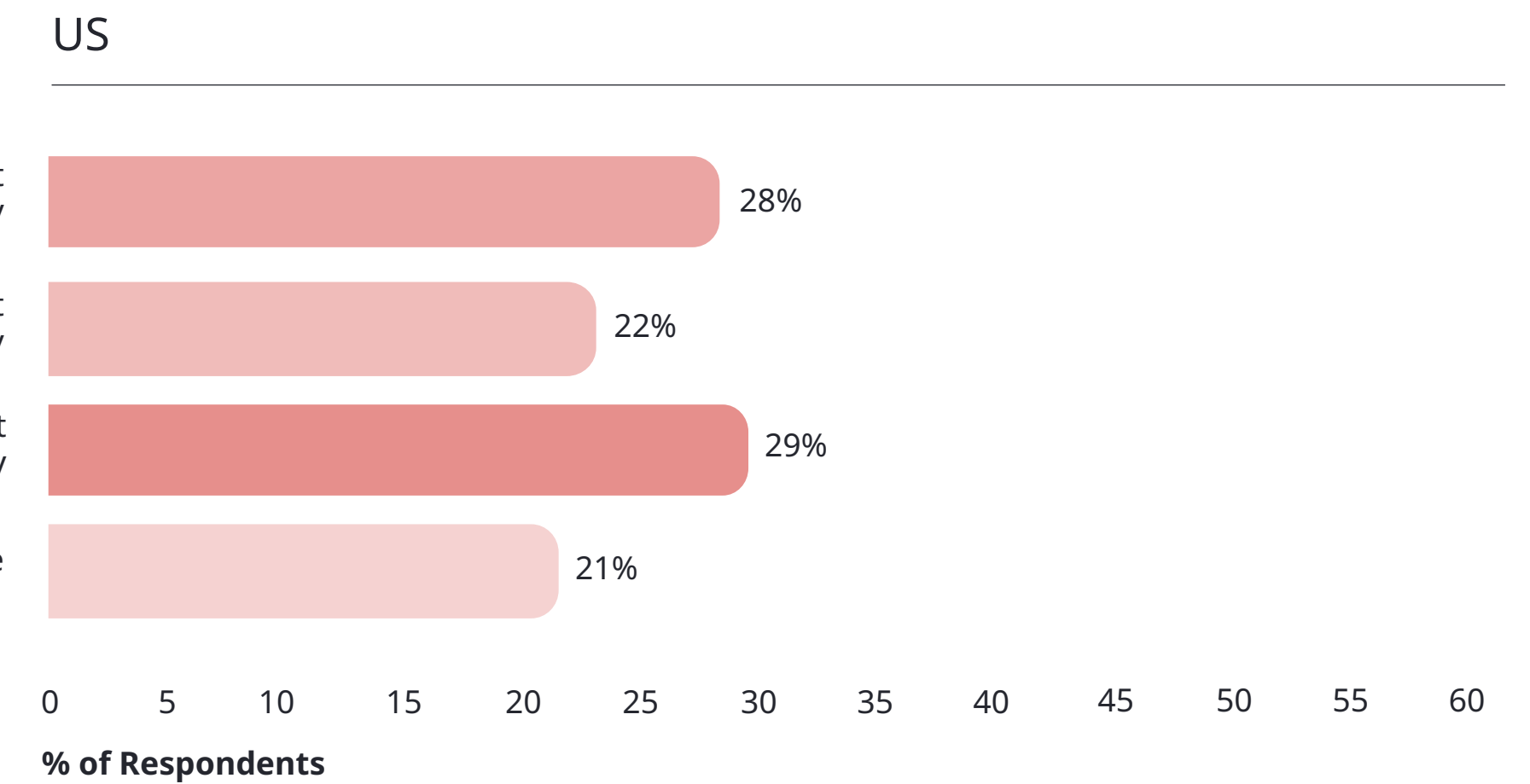
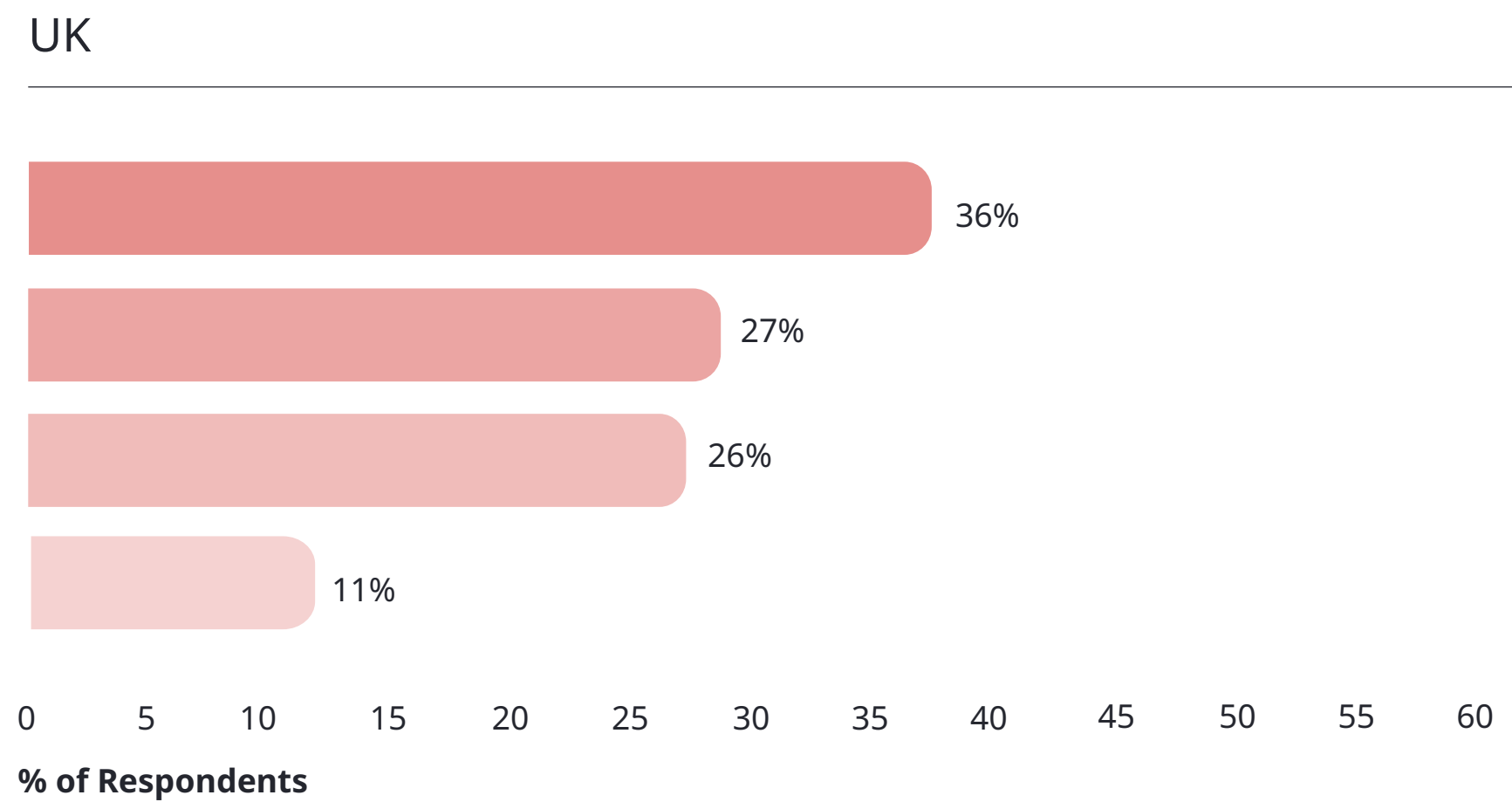
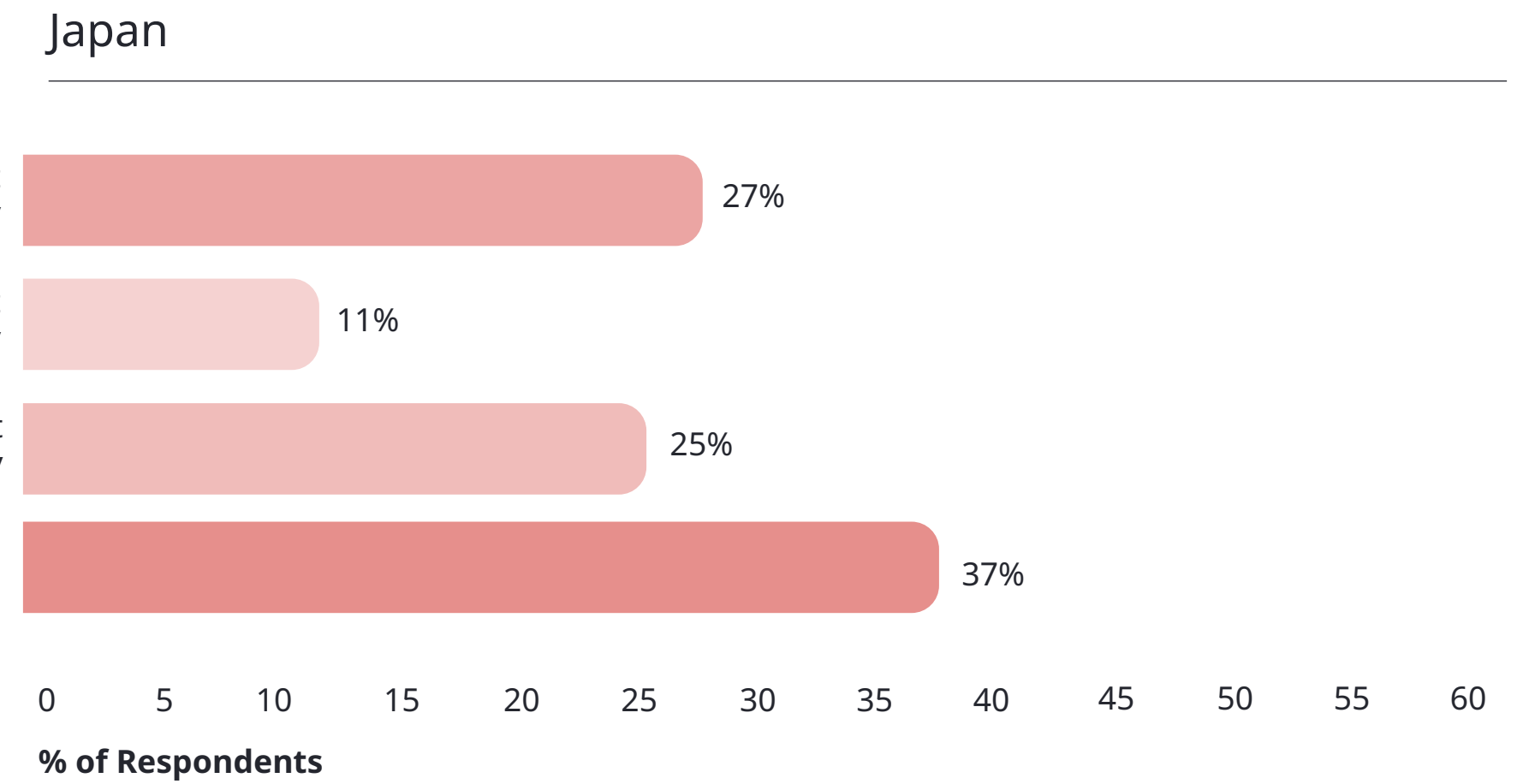
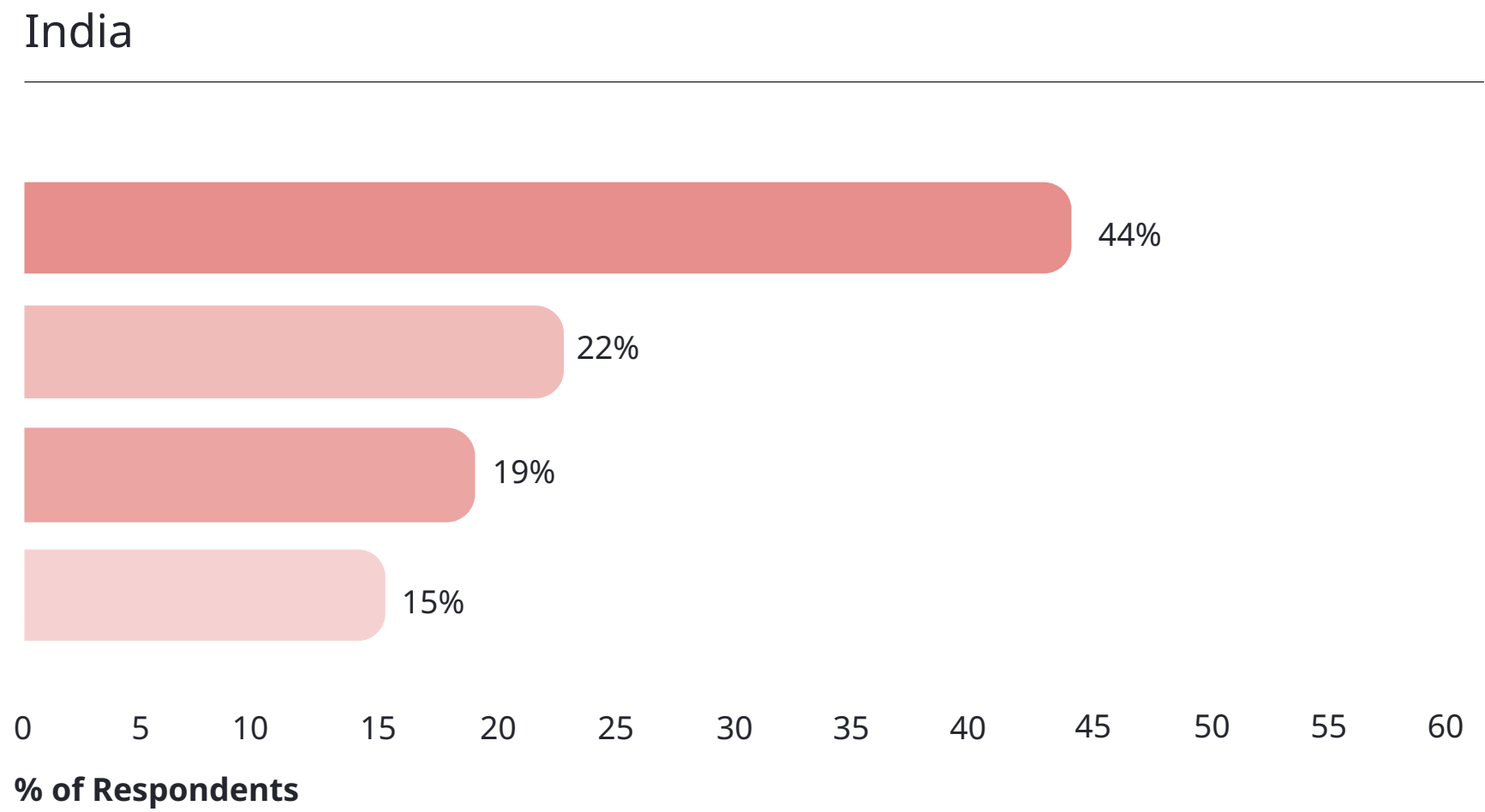


Figure 1: Expected point of retirement



Departure drivers

Many of the forces driving women to leave the workforce early have persisted or even grown over the past two years. Physical health and well-being remains key, with over a quarter (27% globally) citing health or well-being considerations excluding menopause (marginally down from 30% in 2023) and a fifth specifically mentioning menopause as a barrier (consistent with 21% in 2023).

Caring responsibilities also continue to dominate, with 21% citing caring responsibilities for parents and/or elderly family members and 12% saying this about grandchildren.

Women face unique challenges in each country driving them out of the workforce, in Japan for example, caring responsibilities for parents and elderly relatives (31%), children (28%) and grandchildren (17%) are

cited as barriers to remaining in the workforce until or beyond retirement age. These are the highest of all markets, aside from US, with two out of 10 (22%) citing a responsibility for caring for grandchildren.

Reasons for planning an early exit from the workforce vary between industries. For example, nearly a quarter (23%) of women globally working in technology cited the lack of progression opportunities for women overall and in their organization as a driver, the highest of any industry. Similarly, 17% referenced the lack of older female mentors or senior leaders in their organization. For women working in government roles globally, only 8% cited the lack of pay parity as a barrier to remaining in the workforce, compared with nearly one fifth (19%) working in technology.

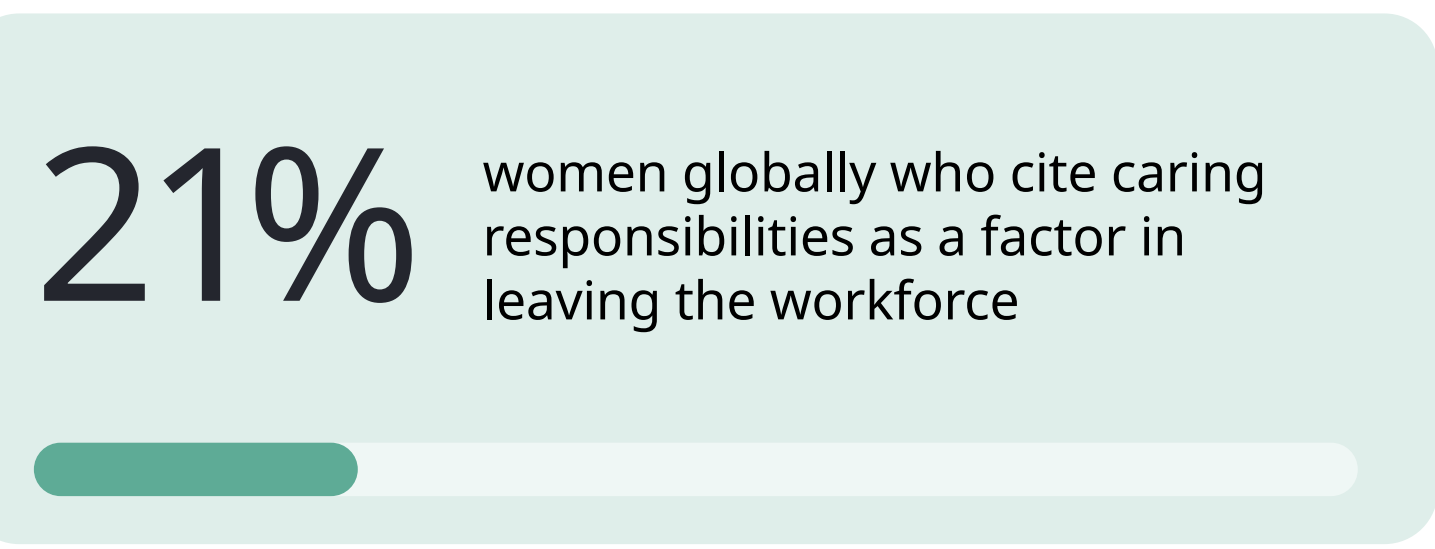


Figure 2: Barriers to remaining in the workplace until or beyond retirement age

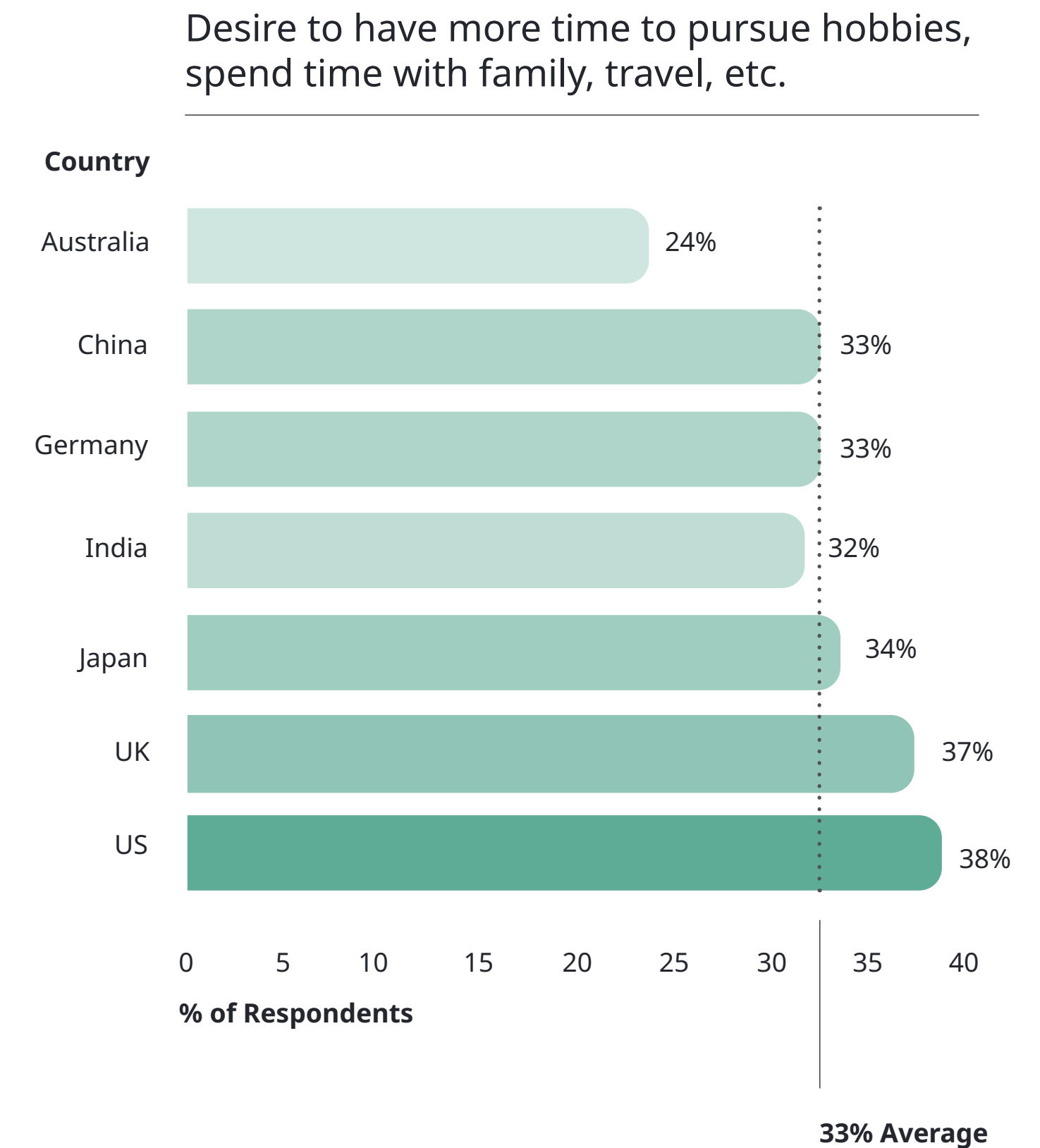


Figure 2: Barriers to remaining in the workplace until or beyond retirement age

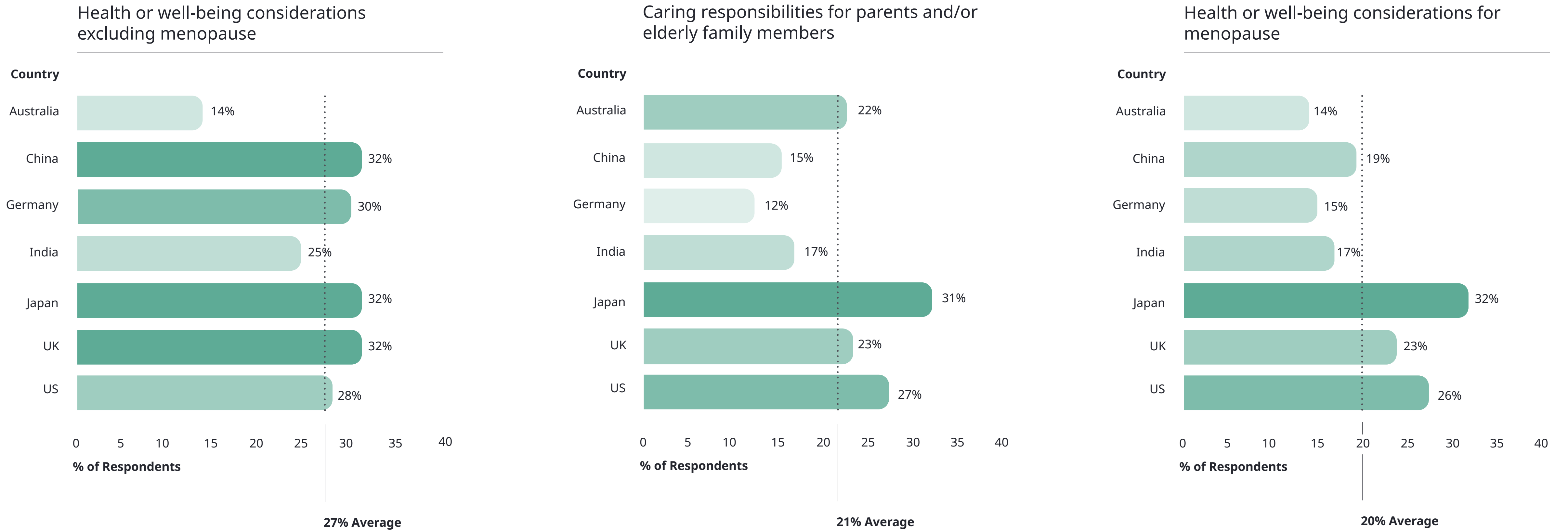


Figure 2: Barriers to remaining in the workplace until or beyond retirement age

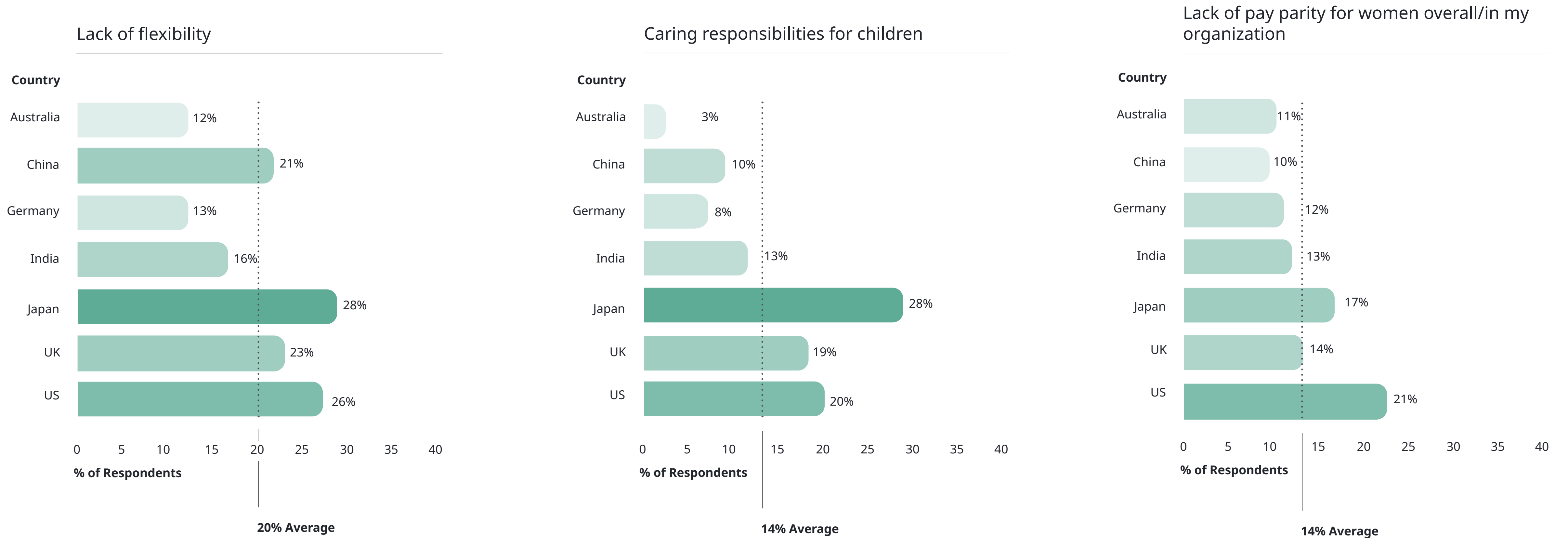
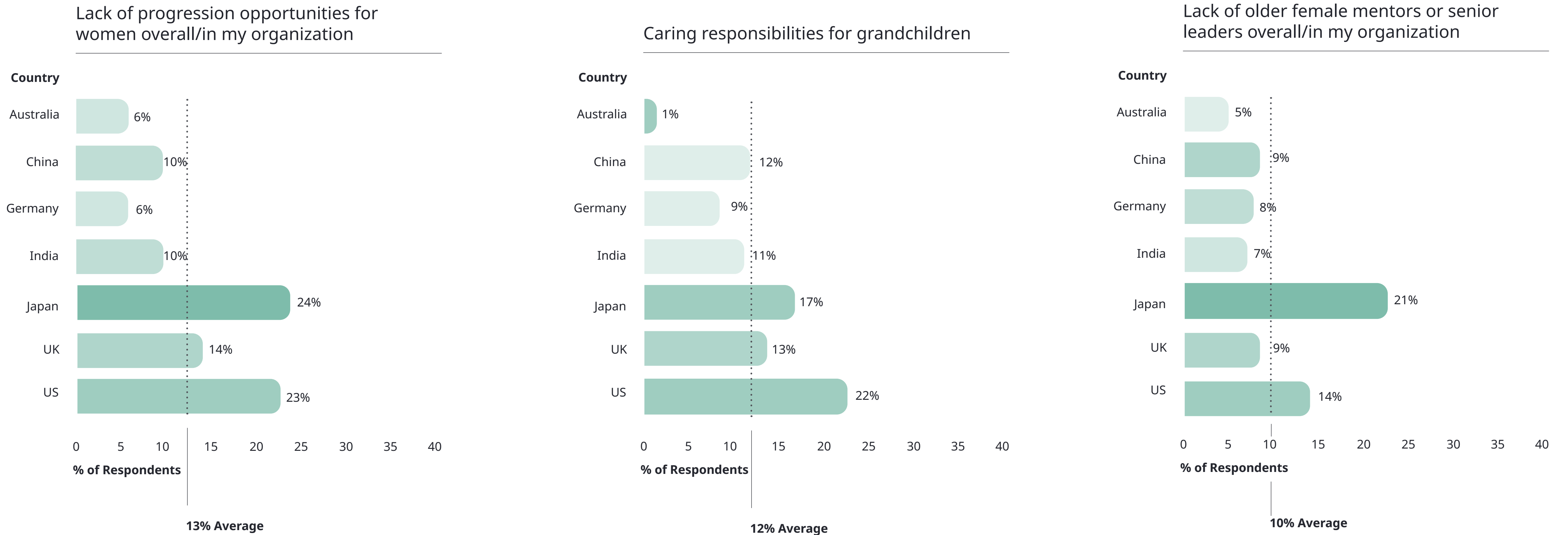


Figure 2: Barriers to remaining in the workplace until or beyond retirement age



The Flexibility Factor

Notably, in 2023, 20% of women globally said lack of flexibility would drive them out of the workforce, a number that remains consistent in the more recent dataset. According to our research, 65% of women globally work in person (rising to 71% of the over 55s), yet nearly eight in ten (78%) want flexibility with where they work or the hours they work. Four in ten specifically said flexible working arrangements would help them to remain in the workforce for longer. In contrast, a lack of flexibility has a clear impact. Our data shows 17% of women for whom it applied took time off due to menopause, but 22% were able to work flexibly so didn't need to; a trend repeated with other challenging issues.

Again, where women live and work has an impact. In India, nearly a third of women (28%) say that lack of flexibility is a challenge preventing them remaining in the workforce beyond retirement, compared with just over a tenth (12%) in Japan. However, optimism is high in India. They rank the most confident country, with seven out of 10 (71%) agreeing that the next generation will receive the flexibility and support needed to stay in work as long as male colleagues. Confidence again is lowest in Japan (28%).

Globally only 47% of women are confident their generation of women will receive the flexibility and support needed to stay in the workforce as long as their male colleagues. As women get older, confidence diminishes. Over half (52%) of 18–24-year-olds are confident, falling to 38% of 45–54-year-olds, and again down to 25% amongst over 65s. Nearly a quarter (23%) of women who have been pregnant globally are not confident of achieving this equality.

Figure 3: Absence and adjustments related to personal health issues²⁸

	Menopause	Health issues related to menstruation	Difficult pregnancies	Miscarriage	Mental health
Took time off	17%	25%	24%	30%	28%
Needed time off but employer stopped me	8%	9%	8%	8%	9%
Didn't need time off	41%	36%	30%	27%	26%
Worked flexibly so did not need time off	22%	19%	18%	19%	20%
Other adjustments made so didn't need time off	9%	9%	13%	12%	10%
Had to leave my job	3%	3%	7%	5%	7%

Reasons to remain

If the barriers to staying are myriad, the drivers that would help women remain in work and lift the Second Glass Ceiling are clear; flexibility, financial benefits, and support around family life.

In 2023, 69% of women globally said pay parity with male colleagues would be valuable in helping them to remain in the workforce longer, echoed by 71% this year (although only 42% are confident their generation will receive pay parity). For three quarters, tax or pension incentives would make the difference. The other area that would help women to stay is improved support for maternity and return to work (76% highlighted this, rising to 83% of those who have been pregnant), with a similar 71% calling out paternity leave.

Notably, a core of respondents said that for key experiences such as menopause or mental health, working flexibly enabled them to remain productive. While 17% for whom it was relevant²⁹ said they took time off for menopause, 22% said they worked flexibly so did not need to. For menstruation, a quarter said they had taken time off for this – but 19% were able to keep working due to flexibility, with 18% saying this for difficult pregnancies and miscarriage, and 20% for mental health. For each experience, other adjustments made by their employer also enabled them to keep working.

Figure 4: Factors that would be valuable in helping women to remain in the workplace longer

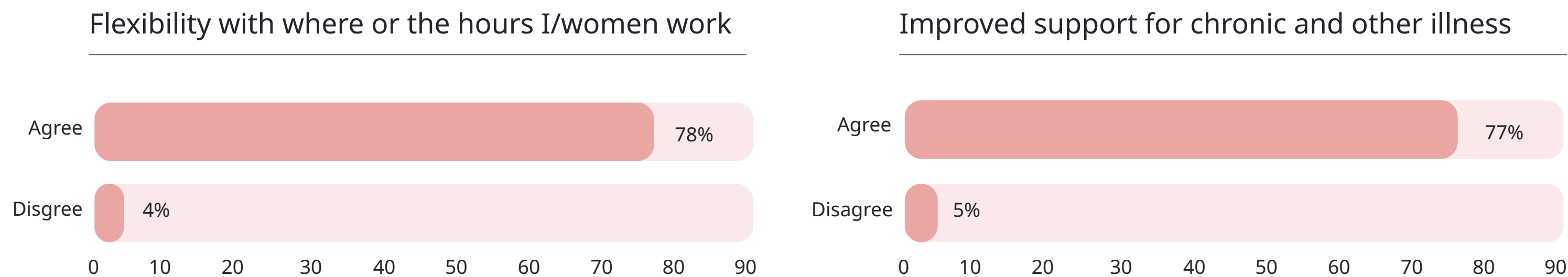
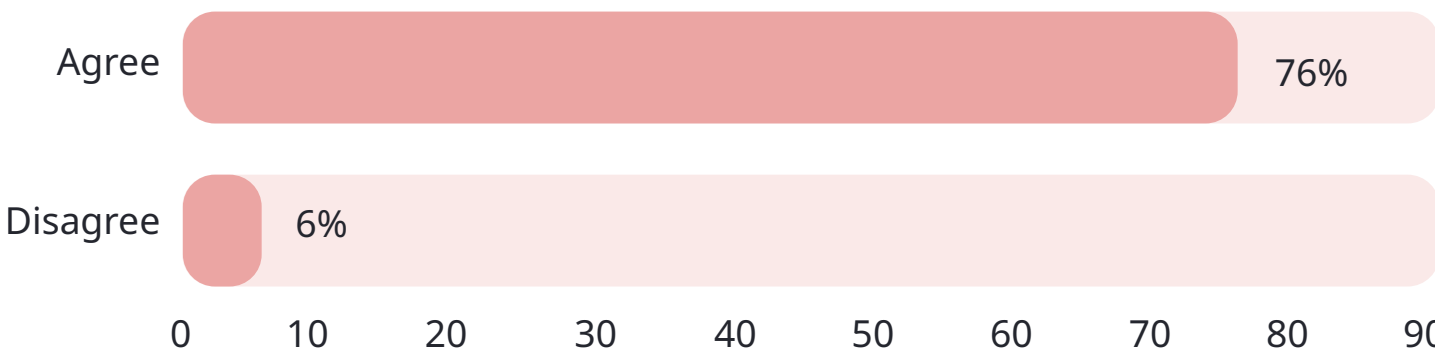
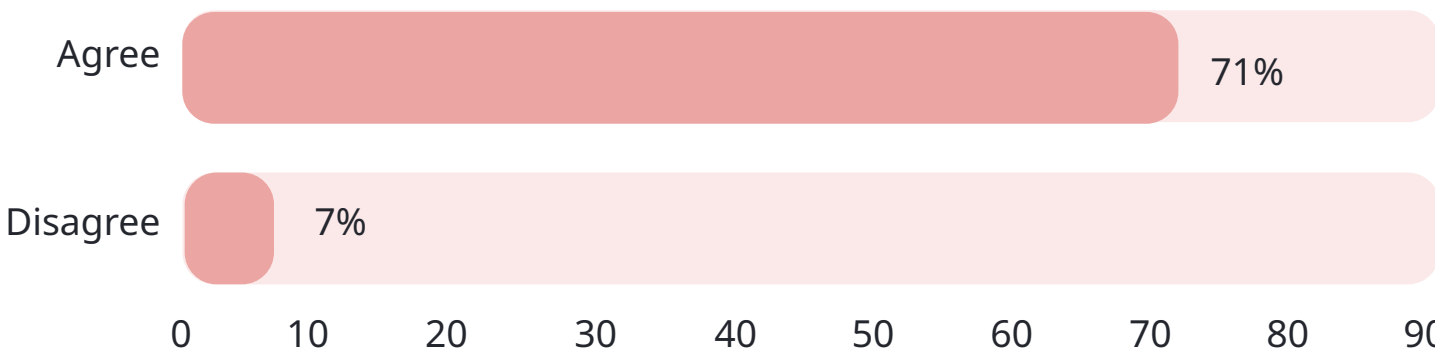


Figure 4: Factors that would be valuable in helping women to remain in the workplace longer

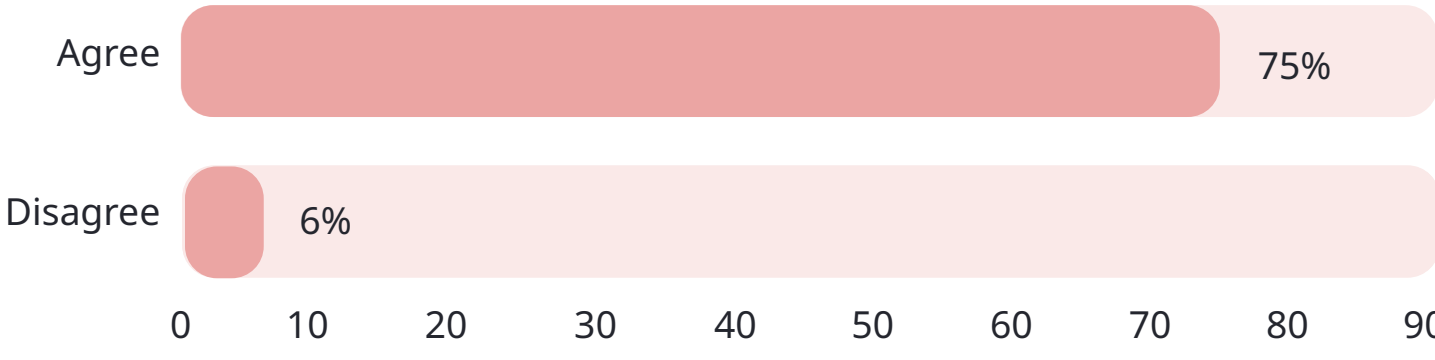
Improved support for maternity return to work



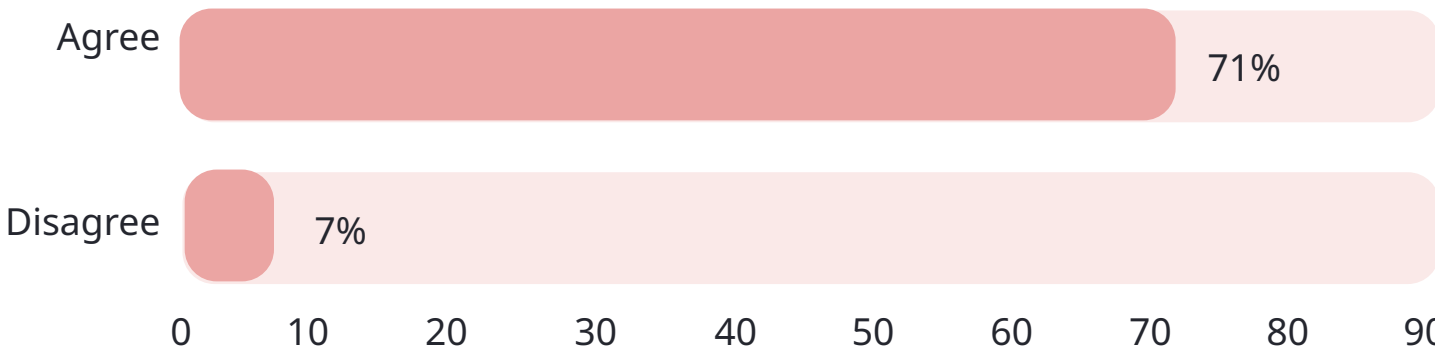
Pay parity with male colleagues



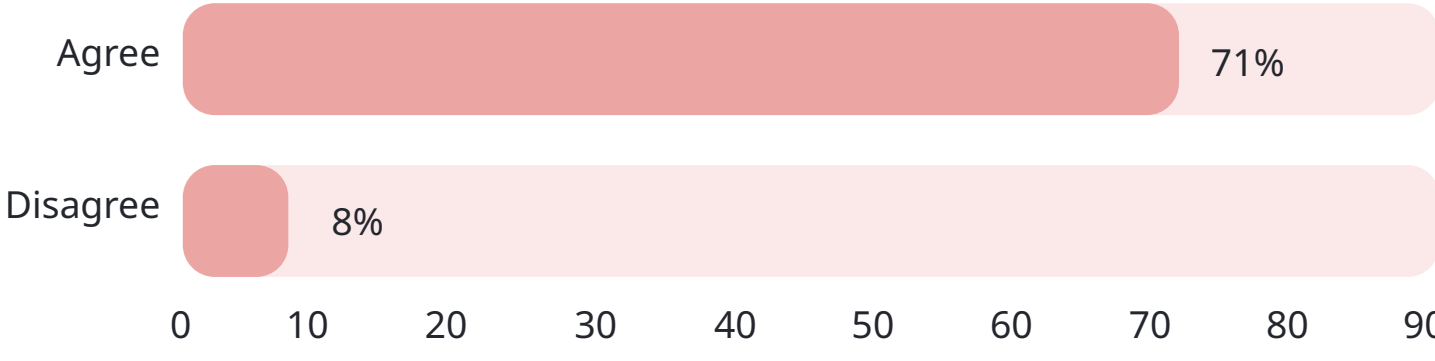
Tax/pension incentives



Improved support for paternity and return to work



Menopause / perimenopause support



Expectations for the future

Notably, optimism about the future is no higher in 2025 than in 2023, and in some cases lower. For example, only 42% globally anticipate their generation will receive pay parity, down from 57%, although confidence is higher amongst younger women (21% of 18–24-year-olds express confidence, increasing to 28% of 45–55-year-olds, and then 44% of over 65s). On this, Japan is the least optimistic country, 36% are not confident. In contrast to India, where 71% are confident.



Figure 5: Confidence women will achieve gender pay parity with their male colleagues, by age

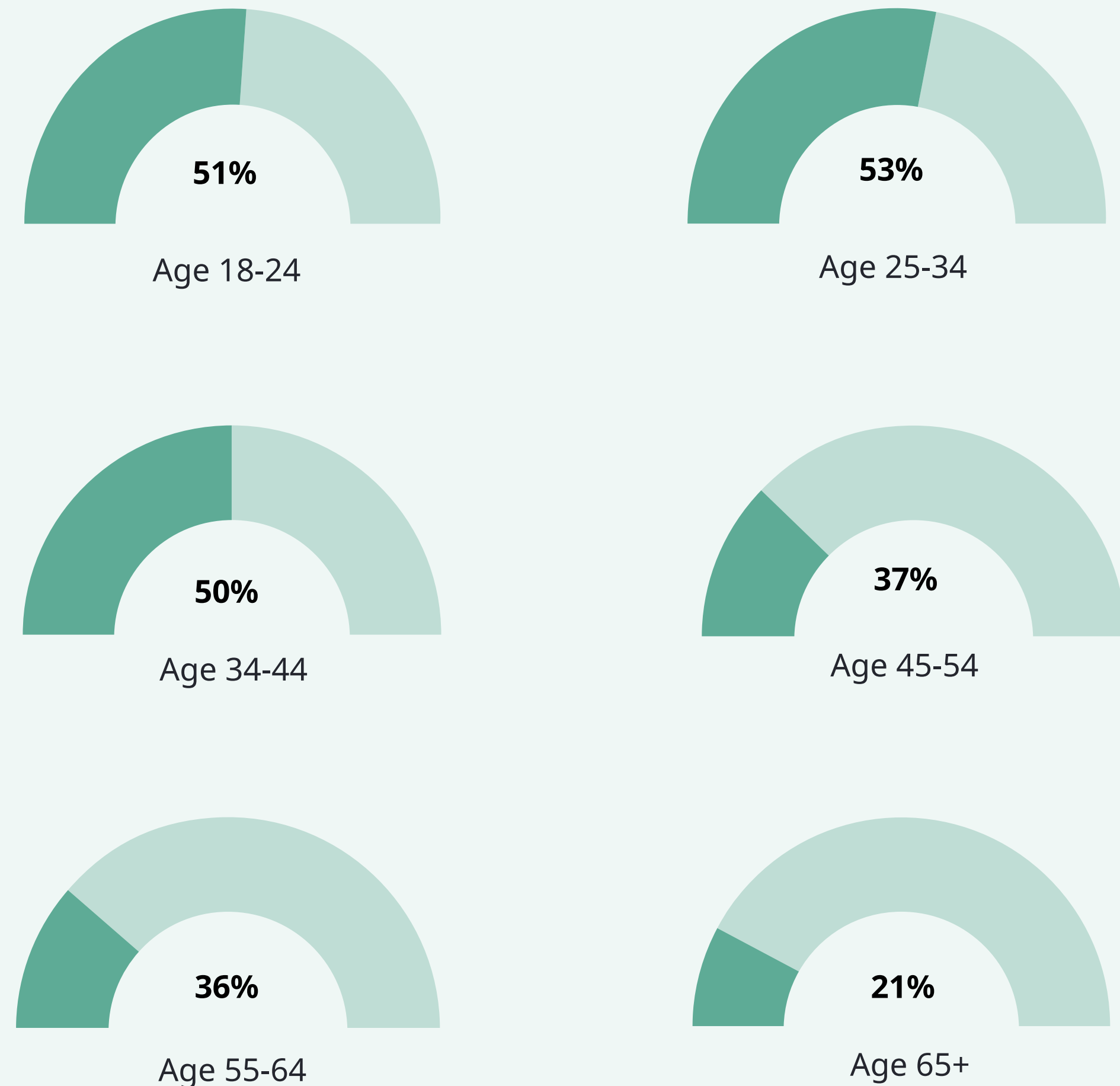
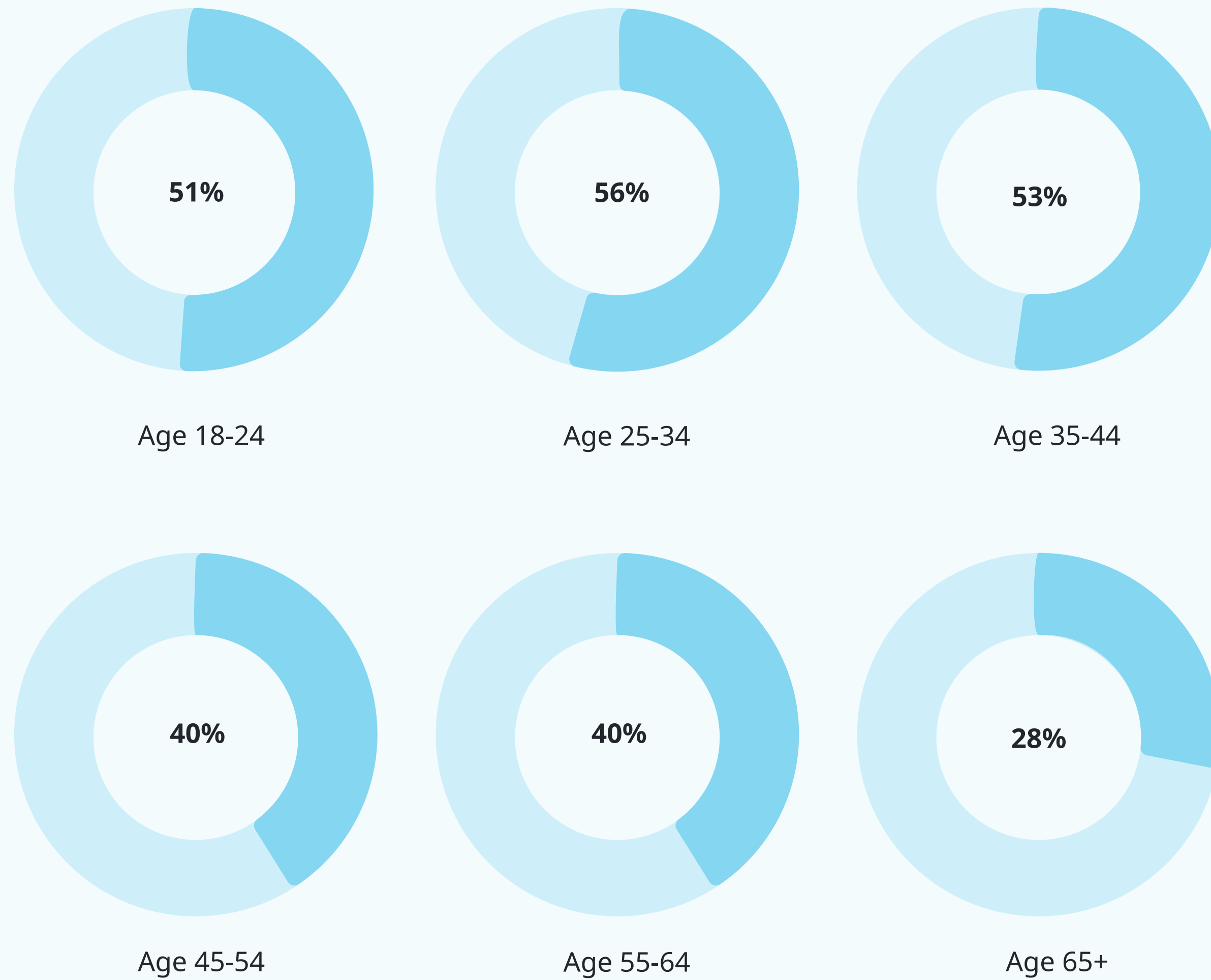


Figure 6: Confidence that women will achieve leadership positions to the same degree as their male colleagues



The trend continues, with declining confidence in women achieving leadership positions to the same degree as their male colleagues. Over half (55%) of 18–25-year-olds globally expect this, compared with just 40% of 45–55-year-olds. This could be for a variety of reasons, including lived experience (being passed over for leadership roles) or due to caring responsibilities. Yet again, confidence has fallen overall; in 2023 60% expressed optimism.



In a similar vein, only 43% of women are confident their generation of women will receive the flexibility and support needed to stay in the workforce as long as their male colleagues, down from 59%. A slightly higher 47% say they are confident about the next generation of women receiving this, but again this has fallen from 66%.

44% say they are confident that for the next generation workforce caring for parents and children will be equally distributed between men and women. The reasons for this drop in confidence will likely vary, but could be linked to factors such as mandated return to office policies, changes in governments, or the global economic downturn.



Figure 7: Confidence that women will receive the flexibility and support needed to stay in the workforce as long as their male colleagues

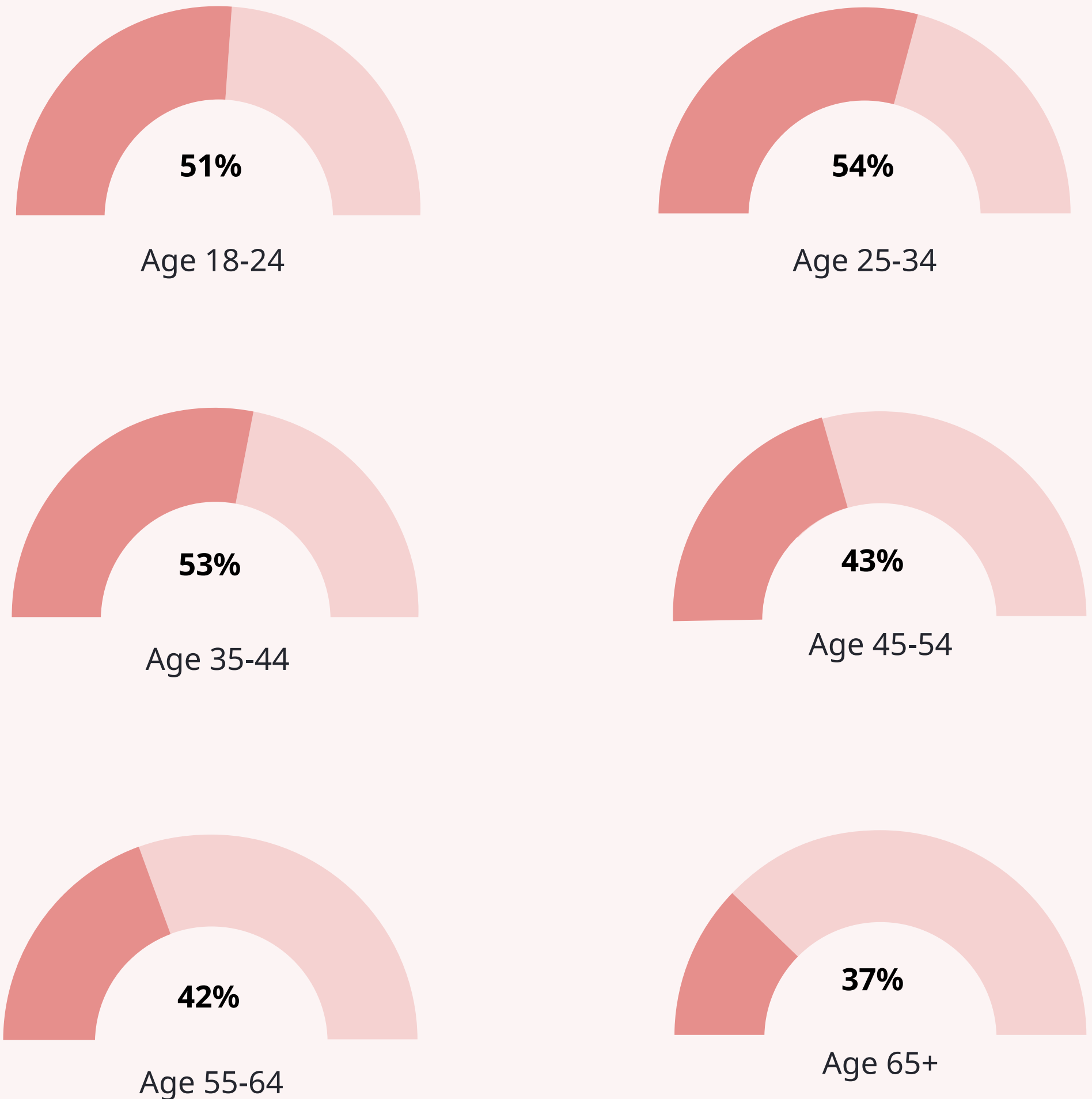
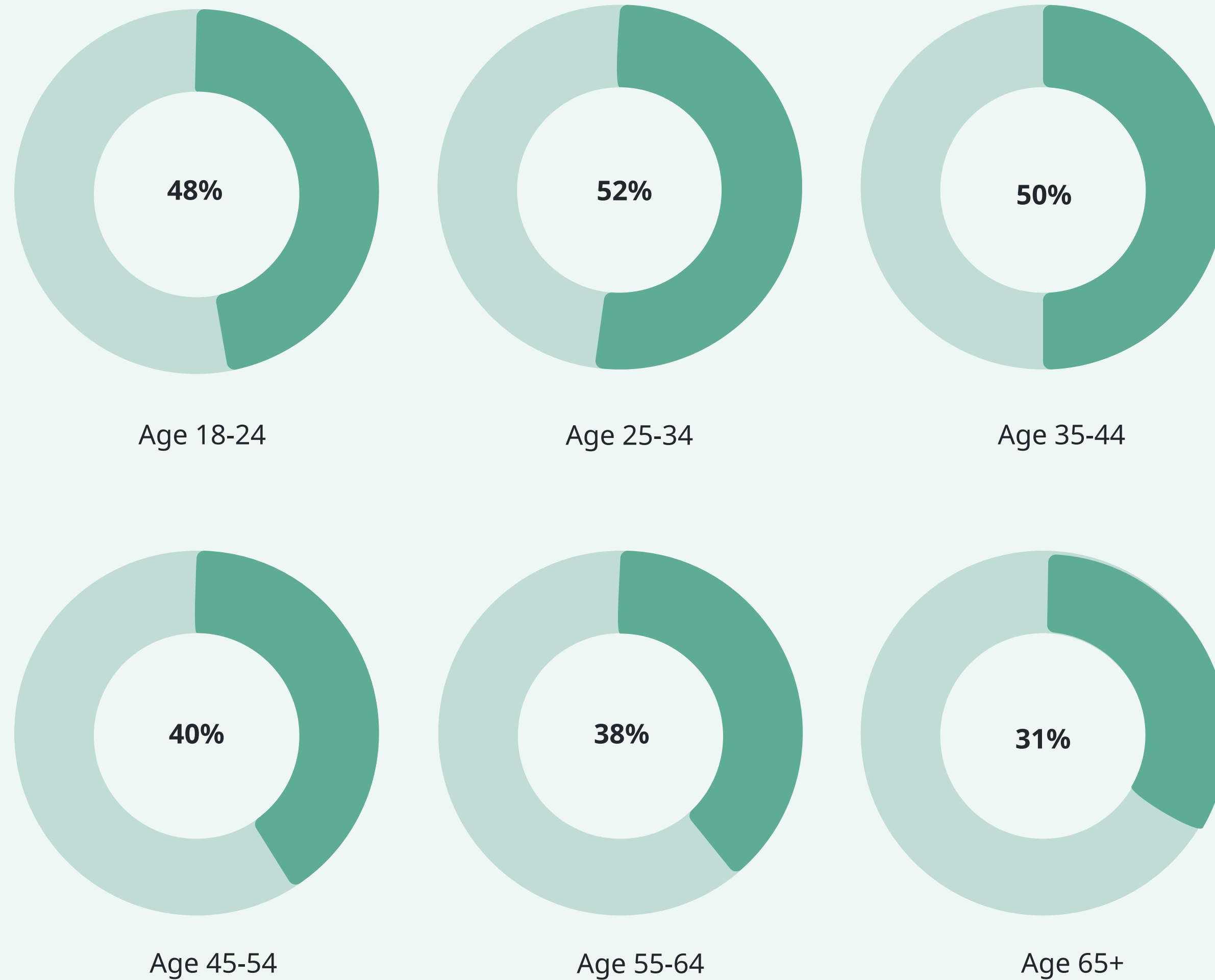


Figure 8: Confidence that caring for parents and children will be equally distributed between men and women



In a similar vein, only 43% of women are confident their generation of women will receive the flexibility and support needed to stay in the workforce as long as their male colleagues, down from 59%. A slightly higher 47% say they are confident about the next generation of women receiving this, but again this has fallen from 66%.

44% say they are confident that for the next generation workforce caring for parents and children will be equally distributed between men and women.





Figure 9: Expectations for the future

47%

Believe the next generation of women will receive the flexibility and support needed to stay in the workforce as long as their male colleagues

46%

Are confident their generation of women will achieve leadership positions to the same degree as their male colleagues

44%

Think the next generation workforce will distribute caring for parents and children equally between men and women

43%

Are confident their generation of women will receive flexibility and support to stay in the workforce as long as their male colleagues

42%

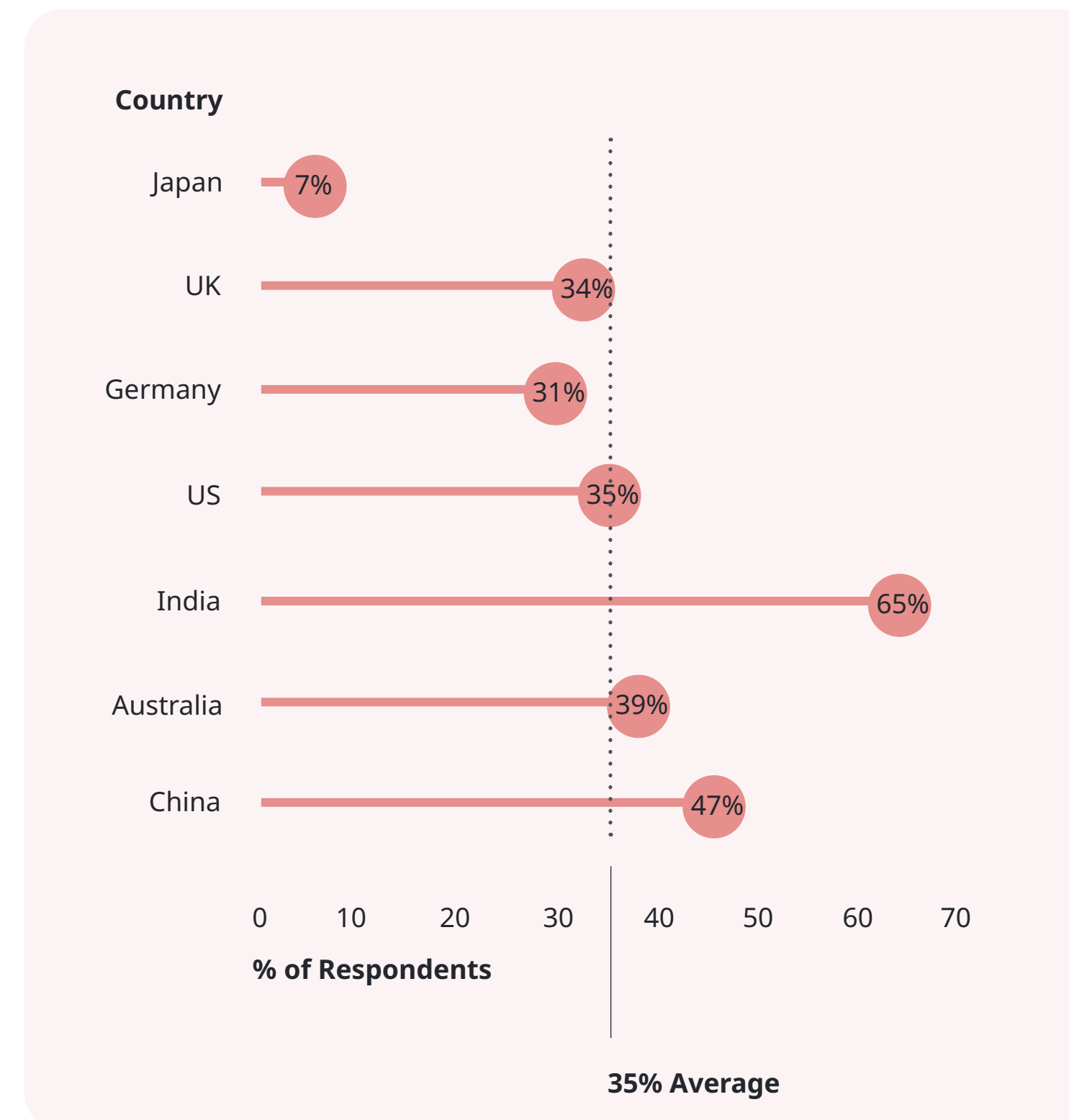
Believe their generation of women will achieve gender pay parity with their male colleagues

Willingness to come forward

There remains considerable reticence about raising personal well-being issues with employers. For example, only 29% would be comfortable raising fertility or miscarriage issues with a male line manager (compared with 56% with a female manager). Meanwhile, 61% say they have never heard their employer talk proactively about menopause support, 56% say this about menstruation, 64% about fertility challenges, and 61% about difficult pregnancies or miscarriage. In contrast, 59% have heard their employer talk about mental health. Clearly, there is still work to be done to ensure employees feel comfortable talking about personal challenges in a professional context.

Still, women are beginning to come forward. 41% of women globally say they have been in a situation where they have raised issues such as menopause, health issues related to menstruation, difficult pregnancies or miscarriage with their employer. This rises to 44% for those who have been pregnant, and 49% for those who are experiencing peri-menopause.

Figure 10: Respondents who have raised issues such as menopause, menstruation related health problems, difficult pregnancies or miscarriage with their employer





The role of employers

Amid rising media and policy focus on health and well-being challenges and the role of employers, and given the fact that women are beginning to come forwards, the data suggests an exponential rise in awareness of formal policies to address personal health and well-being issues such as menopause and health related to menstruation. In 2023, only 7% globally were aware of these policies within their organization, compared with 44% today.

The shift follows more than two thirds (69%) globally saying that formal policies of this nature would be helpful in 2023. This number remains broadly consistent today, with 70% wanting their employer to have a clear process and approach to women experiencing these challenges. Although 55% say they personally would prefer to deal with such issues in private, 69% say that should they be experiencing one of these issues, they would personally welcome support from an employer to help them remain in the workplace (with support options ranging from paid leave, to flexibility or access to healthcare support).

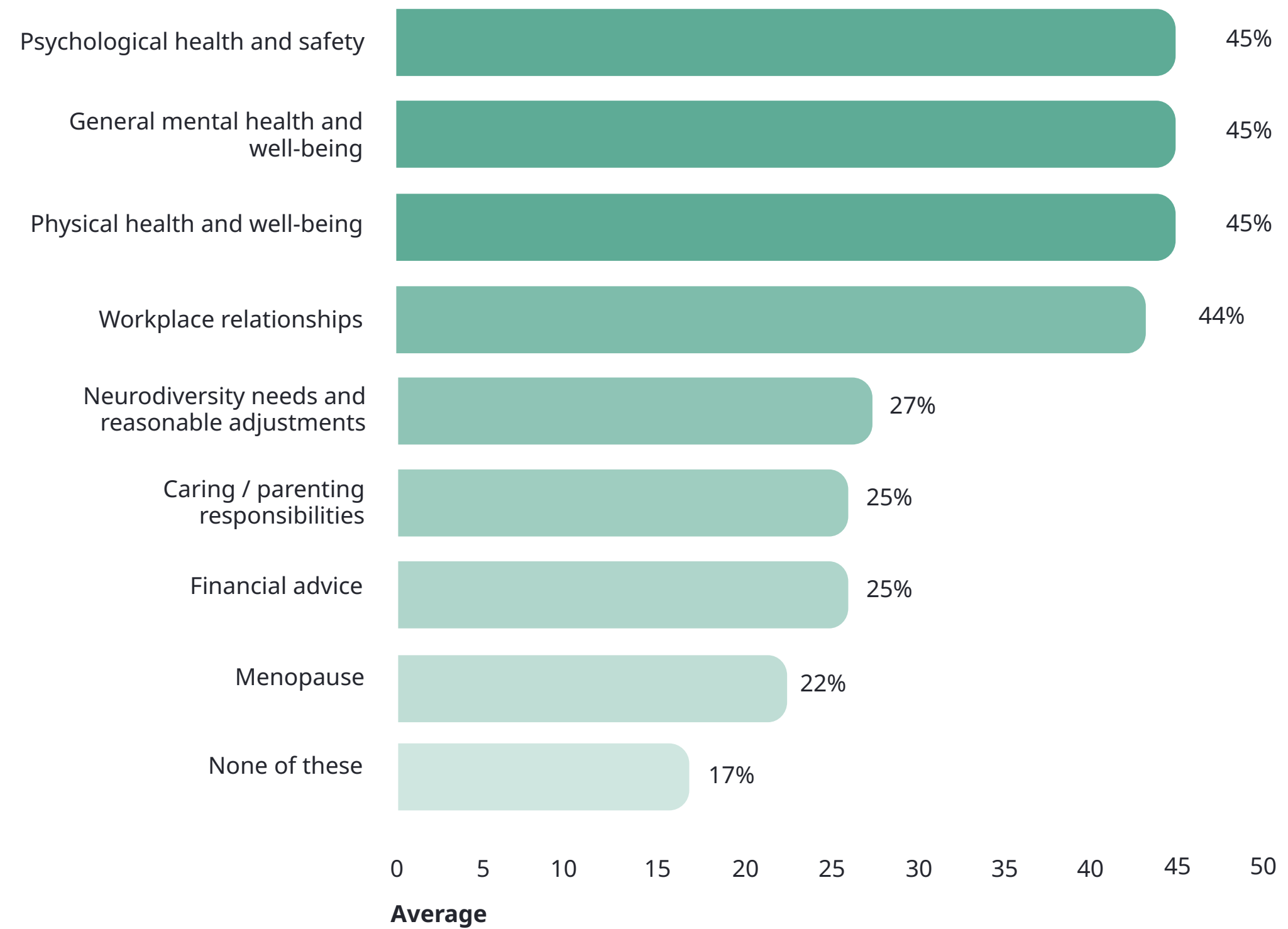
Exploring this in more detail, 56% say they would like formal policies for issues related to fertility including IVF treatment, rising to 62% for those who have been pregnant. Two thirds (67%) would like formal policies for difficult pregnancies, miscarriage or baby loss, rising to 71% of those who have been pregnant, and 62% would like these for neurodivergent conditions such as autism, dyslexia, dyspraxia and ADHD.

Notably, of those that do have policies in place, globally the majority (86%) say they are effective.

Outside of formal policies, a consistent 45% say employers should provide support for general mental health and well-being, psychological health and safety, and for physical health and well-being.



Figure 11: Believe it is the employer’s responsibility to provide proactive guidance to employees on the following





Menopause management

In our original research, we identified menopause as a key contributor to the Second Glass Ceiling. Two years on, a fifth (20%) globally cite menopause as a barrier to remaining in work (slightly down from 2023, when this stood at 21%). 17% of women globally to whom it applies say they have taken time off due to menopause, but more positively, 22% said they worked flexibly so did not need to take time off.

No experience of menopause is the same, so it is unsurprising that how women want to manage it in the workplace varies. Notably, three out of five (68%) believe employers have a role in offering support and seven out of ten would like their employer to have a clear process and approach to this, and a similar proportion (69%) say they would welcome support from an employer to help them remain in the

workplace, with paid leave and access to healthcare. However, 55% would prefer to deal with it in private.

Despite rising discussion of menopause in the media in recent years, and despite increased focus on it from employers, six in ten (60%) globally have never heard their employer or organization communicate about menopause support.

Almost half (45%) globally would not be comfortable discussing health and well-being issues related to menopause in the workplace with a male line manager, compared with almost two thirds who would be comfortable discussing it with a female line manager (60%). Nearly half said they would be comfortable discussing it with an online counselling service.

Figure 12: Comfort bringing up health and well-being issues related to menopause in the workplace

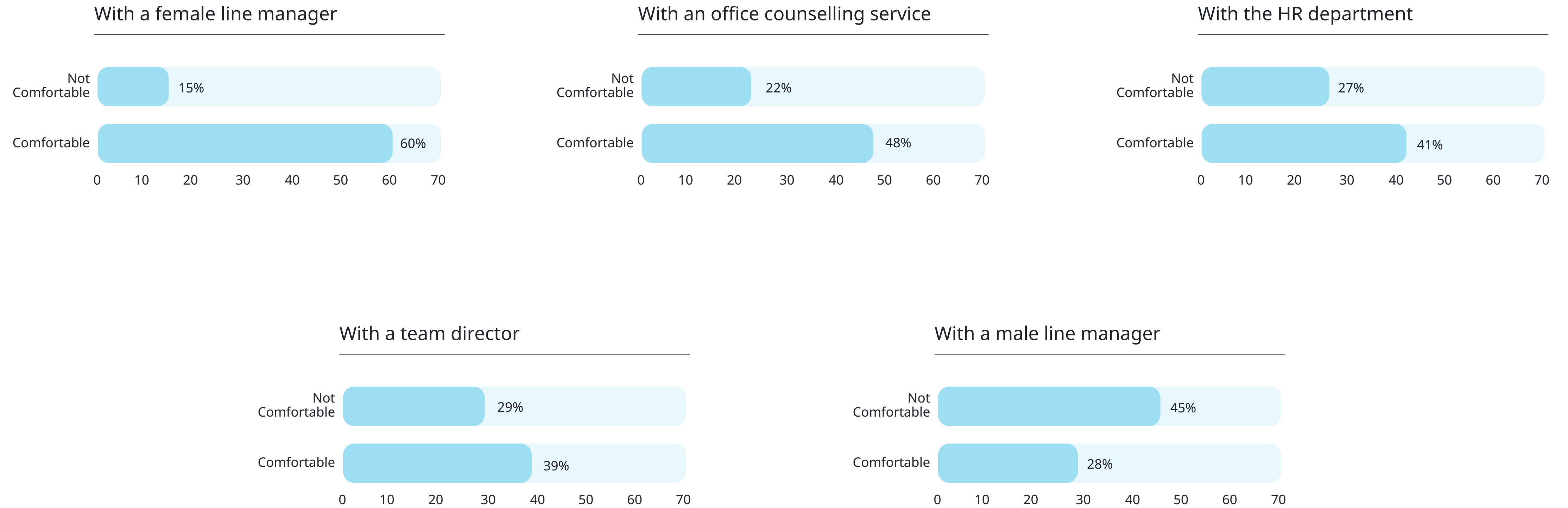
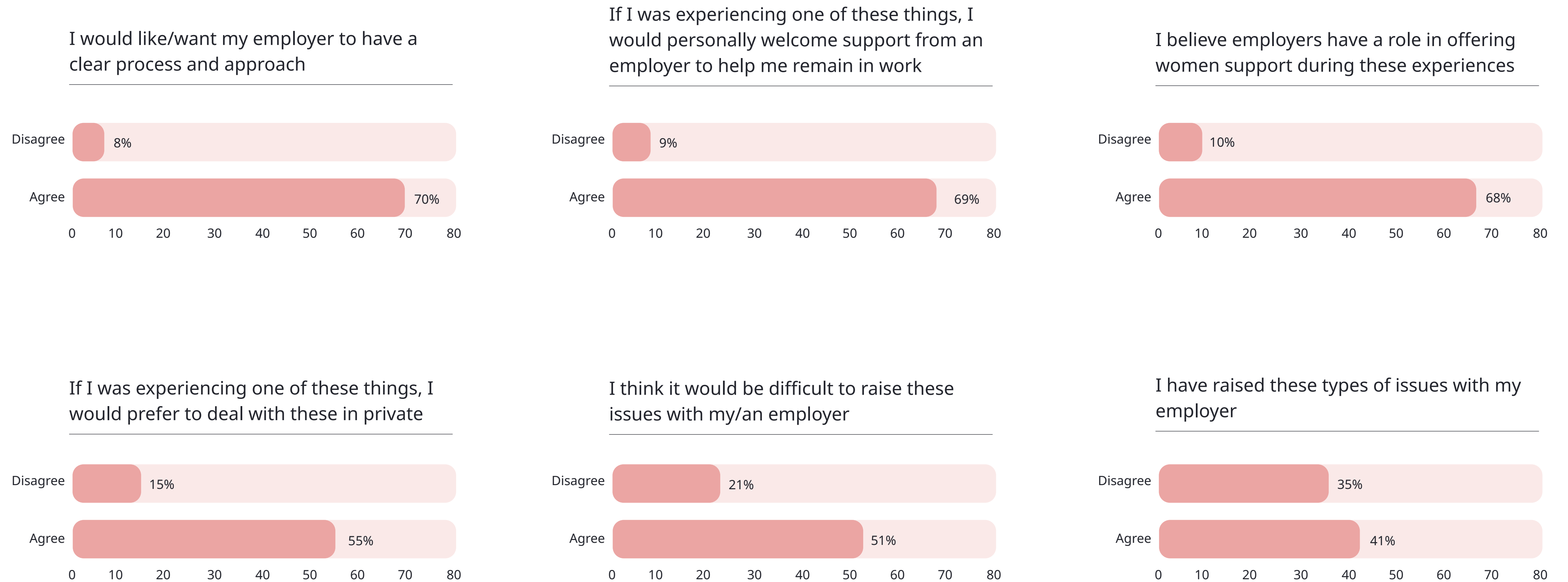


Figure 13: Suggested interventions when experiencing menopause and other women’s health issues



Role of formal policies and support structures

Globally, women believe it's helpful for employers to have policies in place to manage health and well-being needs. Over half (59%) of women globally say it is helpful for organizations to have formal menopause policies and 58% on menstruation. Taking this one step further, 71% say support for women experiencing symptoms of perimenopause or menopause would help.

German women are the least focused on menopause policies. Nearly two in 10 (19%) said they wouldn't be helpful. In contrast, in India three quarters support employers having menopause policies (73%) and even more want these for menstruation (77%). Women working in technology are most supportive, as three quarters (73%) of them say such policies would be helpful.

71%

women who say support with experiencing symptoms of perimenopause or menopause would help them remain in work



Figure 14: Agree it's helpful for organizations to have formal policies on menopause

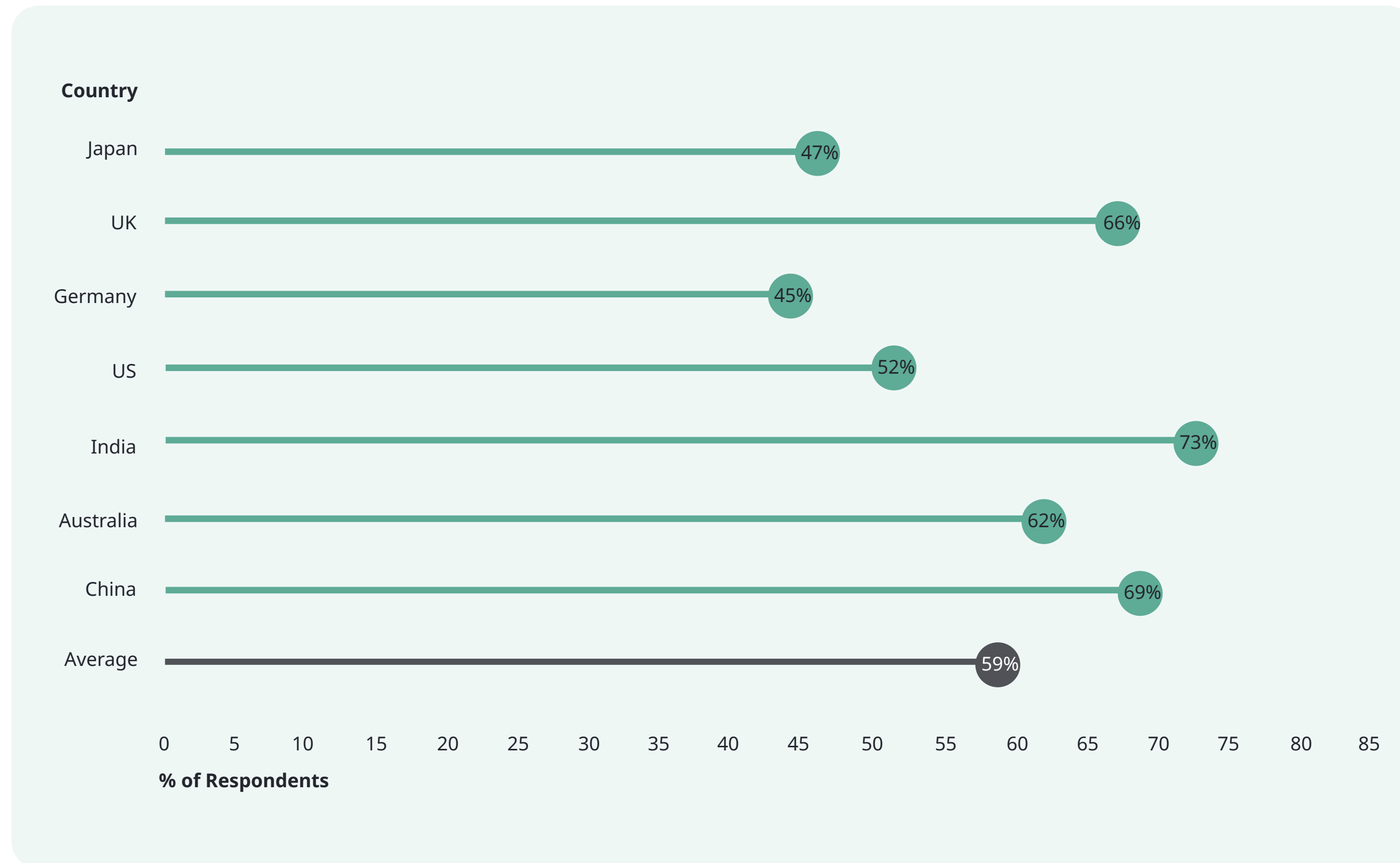
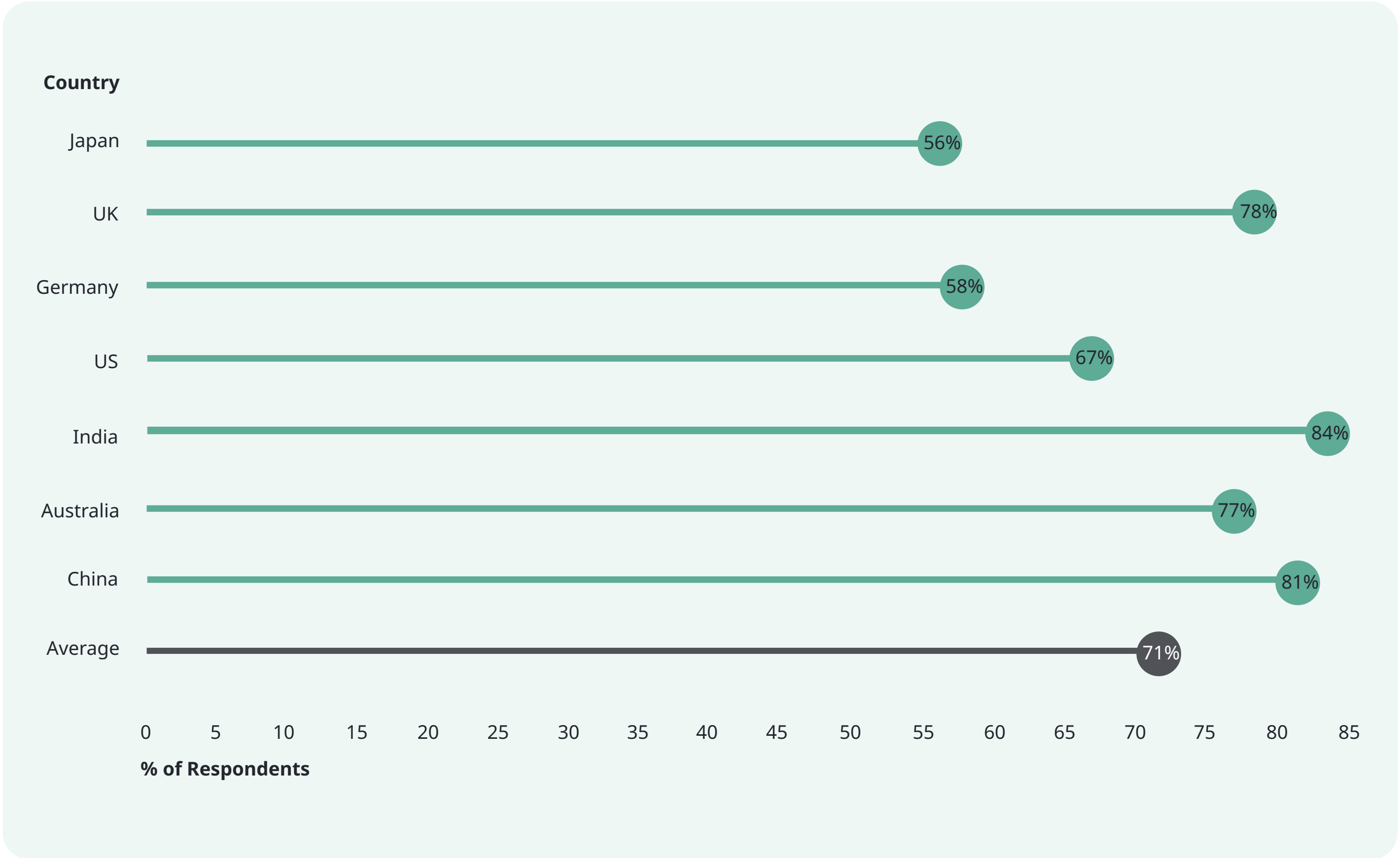




Figure 15: Respondents who say support for women experiencing symptoms of perimenopause or menopause would help women remain in the workforce for longer



Case Study:

Oxford Brookes University Menopause Support for Employees

Oxford Brookes University (OBU) has embedded menopause support as a key part of its well-being and gender equality strategy.



Key initiatives include:

- Embedding BSI Standard 30416: Menstruation, menstrual health and menopause in the workplace in October 2023
- Regular Menopause Cafés (online and in-person) to provide safe spaces for discussion and peer support
- A Manager Toolkit and Good Practice Guidance
- Workplace pilot of menopause exercise classes within the working day to support well-being
- Awareness-raising through “Talking Point” podcasts and branded information in community spaces
- Annual conferences and events (including Listening Awareness Month in March 2025) to open dialogue and build understanding
- Preparations to launch The Adora App (October 2025), offering digital menopause support, symptom tracking, and access to expert advice

Impact

- 48.8% of professors at OBU are female, well above the UK sector average of 29.7%, reflecting progress in gender equality and leadership representation
- Staff survey and event feedback indicate greater confidence in discussing menopause with managers, supported by the new toolkit
- Menopause Cafés and events have attracted strong engagement across all three Oxford campuses and Swindon site, with participants reporting improved awareness and reduced stigma
- Uptake of well-being initiatives (including menopause exercise classes) continues to grow, embedding menopause support in the daily work environment
- Employee said: “Having access to resources and open conversations about menopause has made me feel seen and valued. It has transformed my experience of work during this stage of life.”
– Staff member, OBU

Conclusion and key takeaways

Our research makes clear that, while globally there is some increased focus on strategies to retain experienced women, not least around menopause support, the picture is patchy, and women are still hitting the Second Glass Ceiling by being placed in a position of leaving work early and not out of choice.

This matters today as much as ever, as governments and employers worry about how to boost productivity and keep key skills in the workplace. Individuals, organizations, and society all stand to gain from tackling the premature departure of women.

The fact that a fifth of women are still expecting to leave the workforce early should be seen not as an intransigent fact of life, but an economic obstacle that can and must be overcome. Of course, the reasons for this are complex, and indeed many workers remain unaffected by their experiences with menopause, menstruation, difficult pregnancies, miscarriage and more. Yet for others, such experiences are defining and shape (at least to some degree) subsequent career journeys. Lifting the Second Glass Ceiling by addressing how employers relate to women's health and well-being in the workplace may not be a panacea, but it would nonetheless be a good start.



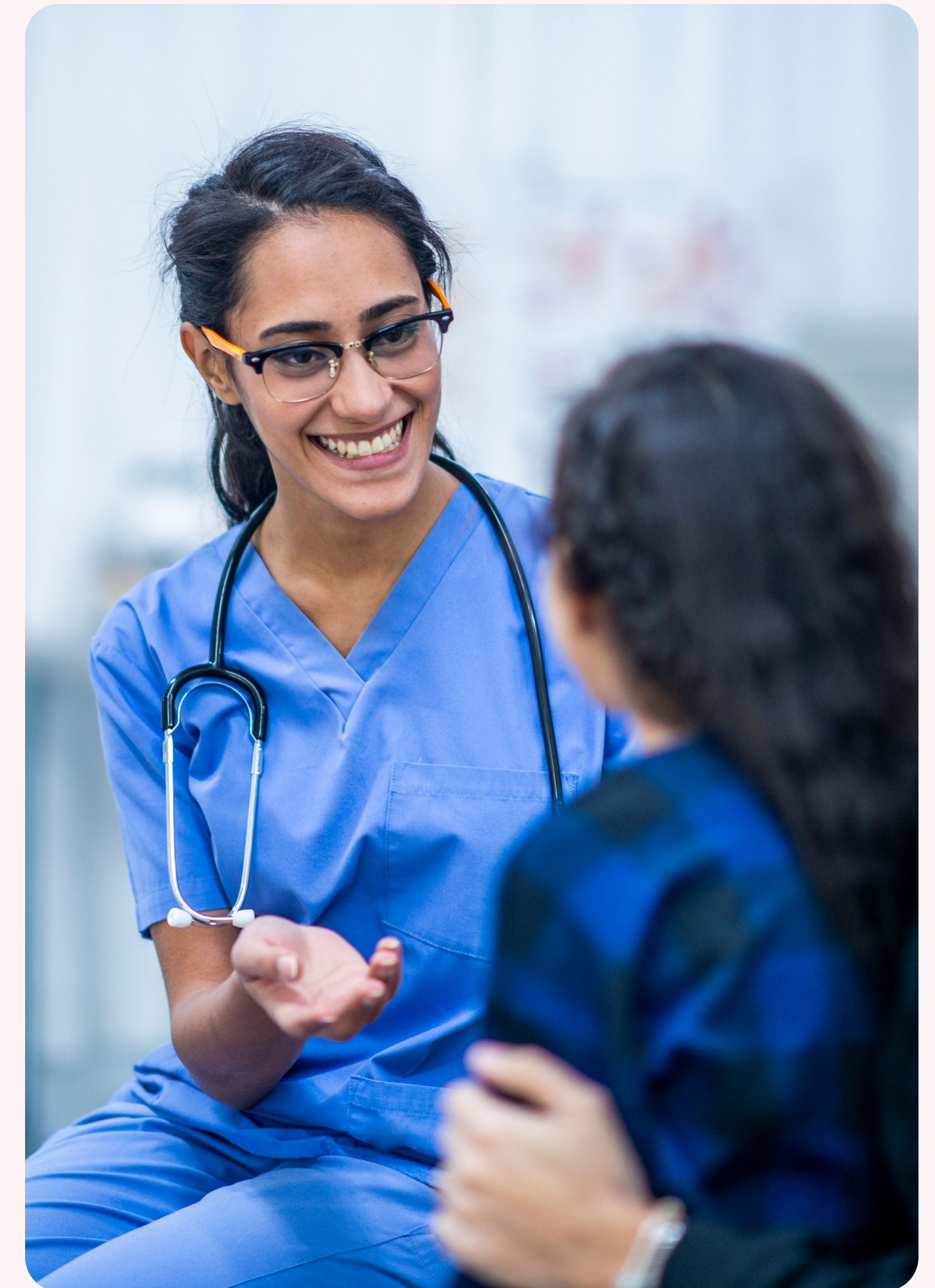
Acknowledge that the Second Glass Ceiling is still intact

Two years on from our original study, it is striking that not only do the main departure drivers remain, but optimism about the future has also fallen. The structural impediments to remaining in work – caring responsibilities, health and well-being, menopause, pay and opportunity – have not been diminished. Yet women today are less confident they will reach pay parity, or see the workforce offer the flexibility and support they need to stay in work for longer. While real change is likely to take a generation or more, policymakers and employers can encourage a shift by looking at why women feel this way and proactively seeking to remove barriers to the retention of experienced women – among them financial inequalities and support for those seeking to balance family life with work.



Recognize the value of flexibility

Flexibility is paramount as an enabler of women working and thriving professionally – especially when experiencing well-being considerations around pregnancy and fertility, health, menopause and more – yet under half of women globally expect their generation of women will receive the flexibility to stay in the workforce as long as their male colleagues. This should be a catalyst for change. Flexibility can be around where women work – although far more work in person than do so hybrid or remote at present – but it can also be adjustments around working hours and shift patterns. With 78% seeking such arrangements, and four in ten specifically saying flexible working arrangements would help them work for longer, this is an area employers cannot afford to ignore.





Respond to growing employee expectation

Divides between people's personal experiences and their professional lives appear to have blurred, perhaps as a result of the pandemic and increasing prevalence of working from home. Whatever the reason, there is now an overt expectation for employers to play a role in supporting health and well-being in a meaningful way, particularly among younger generations of women, something also identified in BSI's Hybrid Generation research into recent career starters. 68% globally believe employers have a role in offering women support during experiences such as menopause, health issues related to menstruation, difficult pregnancies or miscarriage – albeit that some still prefer to manage these experiences privately. Seven in ten want their employer to have a clear process and approach to women experiencing these challenges. For employers, working out how to best support their people with different experiences will be vital in order to attract and retain the best talent.

Offer formal and informal support

69% say that if they were experiencing challenges such as menopause, they would personally welcome employer support to help them remain in the workplace. This could include paid leave, flexibility or access to healthcare support. Yet at the same time one in two think it would be difficult to raise these issues with their employer. Employers need to review the support they offer, both formal processes and how open they are to reasonable adjustments and ensure there is clear signposting of where to go for guidance, as well as a recognition that what works for one woman may not be right for another.

Best practice guides in the form of standards can play a key role here in offering employers support about what to put in place and how to ensure the needs of employers and employees are being met. Awareness of formal support has risen significantly, to the credit of those employers leading the charge – and yet most women still have not heard their employers talk about issues that affect women in workplaces everywhere, every day.



Create a true culture of care

When we originally approached the topic of the Second Glass Ceiling, we explored it primarily through the prism of the impact of menopause on career longevity for women. Our 2025 study continues this focus, but expands to other life stages including miscarriage, difficult pregnancy or fertility challenges, as well as neurodiversity and broader mental health considerations.

While not every employee wants or needs support in all these areas, there is a clear opportunity for employers to look holistically and take in the full range of experiences that can impact home and at work. Offering strong support around menopause but failing to consider the needs of neurodiverse employees or offer adjustments to those going through fertility procedures risks losing talented staff at other, equally challenging stages.

How BSI can help

BSI has a range of services to support employers and employees with health and well-being.

Menopause and Menstruation

The BSI standard Menstruation, menstrual health and menopause in the workplace (BS 30416) is designed to help organizations support employees with their well-being, to better enable them to retain experienced people and foster an inclusive workplace.

Workplace well-being

Occupational Health and Safety

ISO 45001 is the globally recognized occupational health and safety standard. It is a document which specifies the requirements for establishing, maintaining, and improving an Occupational Health and Safety (OH&S) management system. It is designed to prevent work-related injury and ill-health and to provide safe and healthy workplaces, and ultimately to protect and enhance an organization's most important asset, its people, to drive business excellence.





BSI runs ISO 45001 training courses, enabling employers to become equipped with the skills and knowledge to implement ISO 45001, and organizations can demonstrate their commitment to Occupational Health & Safety with independent assessment and certification to ISO 45001.

Occupational health and safety management. Guidelines on performance evaluation (ISO 45004:2024) is a guidance document regarding how organizations can establish monitoring, measurement, analysis and evaluation processes, including the development of relevant indicators for the assessment of occupational health and safety (OH&S) performance.

Ergonomic principles related to mental workload (ISO 20075-2:2024) gives guidance on design principles and on design of work systems, including task and equipment design and design of the workplace, as well as working conditions with the inclusion of social and organisational factors, emphasising mental workload and its effects as specified in ISO 100751.

Ergonomics - General approach, principles and concept (ISO 26800), contains guidance intended to improve the safety, performance, effectiveness, efficiency, reliability, availability and maintainability of the design outcome throughout its life cycle, while safeguarding and enhancing the health, well-being and satisfaction of those involved or affected.

Ergonomics principles in the design of work systems (ISO 6385:2016) discusses the ergonomics principles in the design of work systems to reduce exposure to work hazards. It establishes the fundamental principles of ergonomics and defines relevant basic terms.

Psychological Health and Safety at Work

ISO 45003 is the global best practice standard for psychological health and safety at work. It is designed to help organizations better manage well-being at work and in particular work-related mental ill-health by identifying the causes of mental harm and taking proactive steps to prevent that harm. It provides organizations with a framework to identify, assess, and manage psychological risks, ensuring that employees feel supported, engaged, and productive.

BSI runs ISO 45003 training courses, enabling employers to become equipped with the skills and knowledge to implement ISO 45003, and organizations can demonstrate their commitment to psychological health and safety through independent assessment and certification based on ISO 45003.

Diversity and Inclusion

To help embed diversity, equity and inclusion more widely, Diversity, Equality and Inclusion in the Workplace (PAS 1948) gives practical guidance on how to develop and implement an effective DEI framework in any workplace. It provides recommendations for practical steps that any organization can take to help it develop and implement an effective framework to support diversity, equity and inclusion in its workplace(s).

Guidelines for promotion and implementation of gender equality and women's empowerment (ISO 53800) provides the framework, resources, policies, tools and good practices for contextualizing, promoting and implementing gender equality.

Design for the mind – Neurodiversity and the built environment (PAS 6463:2022) gives guidance on the design of the built environment for a neurodiverse society, making places more inclusive for everyone.

Ageing societies

Ageing societies - General requirements and guidelines for an age-inclusive workforce (ISO 25550) provides guidance that can support organizations to incorporate changes to enable long-term employment opportunities, fight against ageism and benefit workers of all ages. BSI also offers an on-demand training course for ISO 25550.

Additionally, ISO 25551 provides guidelines for an organizational program for working carers providing care to adult care recipients or long-term childcare recipients.



Human resource management for diversity and inclusion

Human resource management. Diversity and inclusion (ISO 30415), a globally recognized international standard aiming to help organizations create a more diversified and inclusive work environment with equal opportunities for individuals from all backgrounds, with comprehensive guidance on diversity and inclusion for organizations. BSI also offers an on-demand training course for ISO 30415.



Human Resources

The human-centred organization (ISO 27500) is an international standard that discusses the rationale and principles for the human-centred organization to fulfil a purpose for its users, customers, and community, and orients all its innovation and operations activities around those people.

BSI also offers guidance for managers in human-centred organizations to understand people's needs, motivations and concerns. ISO 27501 is intended to be used within organizations that embrace and intend to implement the principles of human centredness.

Human resource management — Sustainable employability management for organizations (PD ISO/TR 30406) provides guiding principles for developing and implementing sustainable employability policies – focused exclusively on an organizational level.

Provision of lone worker services. Code of practice (BS 8484: 2022) provides guidance and recommendations for the provision of safety and security for employees in a lone working scenario where the customer's risk profile identifies the need for an LWS.

Human resource management – Employee engagement – Guidelines (ISO 23326), guidance on creating a mutually beneficial environment that encourages everyone to be connected with the objectives, purpose, and values of the organization.

Human resource management – Learning and development (ISO 30422:2022) contains guidance for the organization of learning and development in the workplace.

Human resource management — Organizational culture metrics cluster (ISO/TS 24178:2021) is a standard for human resource management that also contains an organizational culture metrics cluster. The standard describes the elements of organizational culture and provides the formula for comparable measures for internal and external reporting.

Human resource management – Occupational health and safety metrics (ISO/TS 24179:2020), is a safety standard that describes the elements of organizational health, safety, and well-being. It provides the formula for comparable measures for internal and external reporting.





Human resource management — Compliance and ethics metrics cluster (ISO/TS 30423:2021) describes the elements of compliance and ethics and provides the formula for comparable measures for internal and external reporting.

In addition, BSI has published ISO/TS 30428:2021, a standard for human resources management that contains a skills and capabilities metrics cluster. The standard describes and defines the five metrics of skills and capabilities, provides the formula for each metric and describes the common metrics which employ the five metrics.

ISO /TS 30431, is a standard for human resources management that contains a leadership metrics cluster. It describes the elements of the leadership metrics cluster. ISO/TS 30431 provides the formula for comparable measures for internal and external reporting.

BSI also provides guidance on social responsibility, intended to assist organizations in contributing to sustainable development.

Consulting Services

Our consulting services team empowers our clients to meet the needs of any workforce during every life stage. This in turn will manifest in a highly

engaged, more productive workplace culture reducing absenteeism, increasing talent retention, and protecting brand reputation. Workplace health is organizational wealth.

Related Services:

- Well-being and Total Worker Health® solutions
- Strategy and culture transformation
- Ergonomics solutions
- Industrial hygiene and indoor air quality programs
- Customized training solutions

Methodology

Findings are based on quantitative data collection and desk research conducted with input from BSI, FocalData and Burson.

This research has been developed in partnership with FocalData, UK based research agency. We conducted a multi-sector opinion poll of 6,494 women in the workforce in the UK, India, Japan, China, US, Germany and Australia. The research was conducted between 24th July and 6th August.



Your partner
in progress

BSI Group
The Acre, 90 Long Acre,
London WC2E 9RA
United Kingdom
+44 345 080 9000
bsigroup.com