

WORKPLACE SUPPORT FOR EMPLOYEES EXPERIENCING PREGNANCY OR BABY LOSS

Survey report

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October 2022

The CIPD is the professional body for HR and people development. The registered charity champions better work and working lives and has been setting the benchmark for excellence in people and organisation development for more than 100 years. It has almost 160,000 members across the world, provides thought leadership through independent research on the world of work, and offers professional training and accreditation for those working in HR and learning and development.



Report

Workplace support for employees experiencing pregnancy or baby loss: survey report

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1 Introduction

It's estimated that one in four pregnancies in the UK end in loss during pregnancy or birth (see Box 1). Given that the majority of people wanting to start or grow a family are of working age, it's safe to assume that most of these losses will happen to individuals who are in employment. And yet the CIPD/Simplyhealth *Health and Wellbeing at Work 2022* survey shows that the health and wellbeing activity of just one in four employers (26%) includes provision (such as policies, guidance, awareness-raising or line manager training) for pregnancy loss to a large or moderate extent.

This finding reveals the considerable gap in the level of support and understanding organisations provide at a very challenging and distressing time. Everyone's situation and emotional response will be unique, but many people will experience a period of bereavement and grief following such a loss, as well as an impact on their physical health. Undoubtedly many employees' wellbeing and their interaction with work – not only the individual physically experiencing the pregnancy or baby loss but also their partner – will be affected. Therefore, as well as recognising pregnancy or baby loss as an important workplace issue, employers should develop an effective framework to support people during what can be a physically, emotionally and socially difficult time. It could make a significant difference in helping individuals to cope with the impacts of their loss.

The CIPD wants to help bridge the gap in workplace support by developing practical guidance to help people professionals and line managers put effective support in place. To inform the guidance, we conducted a survey of employers about whether and how they are supporting employees experiencing pregnancy or baby loss, including what policies and practices they have in place. We also surveyed employees about the workplace support, if any, that was available to them during their experience of pregnancy or baby loss. The findings shine an important light on how they and their work were affected by their experiences. We present the results of both these surveys in this report.

Our employee survey results provide firm evidence supporting the rationale for organisations to develop a supportive framework. Our findings demonstrate the positive impact of the support on people's mental wellbeing, their ability to perform well in their job and their intention to stay with their employer. Furthermore, the majority of those who said they didn't receive support at work, in relation to their experience of pregnancy or baby loss, said support from their organisation and from their line manager would have been beneficial.

Focus on inclusion

The CIPD's aim in carrying out this research is to be as inclusive as possible in our definition of pregnancy or baby loss, acknowledging all experiences, including but not limited to, miscarriage (the loss of a baby during the first 24 weeks) and stillbirth (the loss of a baby after 24 weeks) as well as molar or ectopic pregnancy, neonatal loss or termination for any reason.

This approach aligns with our aim to produce guidance that is inclusive, and supportive of any individual's circumstances associated with this kind of loss. Support should be made available to anyone experiencing baby loss during pregnancy, including adoptive parents, foster parents, intended parents and surrogates. It's also important that the wellbeing needs of partners are recognised and that they are supported within the workplace. We believe the support provided should be underpinned by the principles of compassion, empathy and inclusivity.



Box 1: Pregnancy and baby loss: definitions and key statistics

Sadly, it's estimated that one in four pregnancies end in loss during pregnancy or birth, including around 250,000 miscarriages every year in the UK and around 11,000 emergency admissions for ectopic pregnancies. These numbers are estimates as there is no formal, centralised record of miscarriages in the UK.

A **miscarriage** is the loss of a baby during the first 24 weeks. Further definitions include an early miscarriage (before 12 weeks) and late miscarriage (after the first 12 weeks of pregnancy, but before 24 weeks). An **ectopic pregnancy** happens when a fertilised egg attaches itself somewhere outside the uterus. Although very rare, another kind of pregnancy loss is **molar pregnancy**, when a foetus doesn't form properly in the womb. Some people also experience termination for medical reasons.

In 2020 there were 2,638 stillbirths in the UK. A **stillbirth** is when a baby dies before or during labour after 24 completed weeks of pregnancy.

There were 1,719 neonatal deaths in England and Wales in 2020, which is when a baby dies within 28 days after they are born.

Some people may have the distressing experience of more than one pregnancy or baby loss, including **recurrent miscarriage**. In the UK recurrent miscarriage means having three or more miscarriages in a row, affecting around one in every hundred couples trying for a baby.

Sources: Tommy's and the Miscarriage Association

2 Background to the research

This report, exploring support in UK workplaces for employees experiencing pregnancy or baby loss, is based on findings from two surveys.

The first is a survey of 2,023 senior HR professionals and decision-makers in the UK, conducted by YouGov Plc. Fieldwork was undertaken between 22 March and 18 April 2022. The survey was carried out online. The figures have been weighted and are representative of UK business by size, sector and industry. Respondents come from organisations of all sizes and work within a wide range of industries. Overall, 1,477 are based in the private sector, 354 in the public sector and 192 in the voluntary sector. SMEs refer to organisations with fewer than 250 employees.

We also conducted a survey of 295 UK employees who had experiences of pregnancy or baby loss while in employment within the last five years, conducted by YouGov Plc. Fieldwork was undertaken between 10 and 20 June 2022. The survey was carried out online. The gender profile of respondents is: 203 people identifying as female, 81 identifying as male, 5 people identifying in another way and 6 people who preferred not to say.

All figures in graphs have been rounded to the nearest percentage point. Due to rounding, percentages may not always total 100.



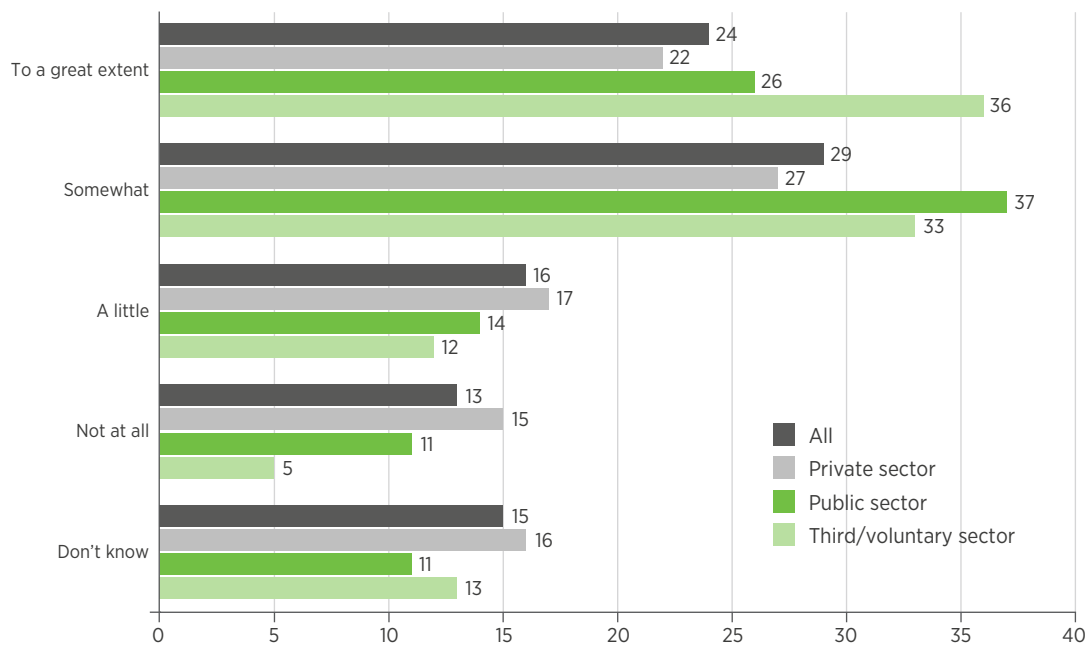
3 The organisation climate

This first section of the report outlines our findings around organisational climate.

Around a quarter (24%) of senior decision-makers say that their organisation encourages an open and supportive climate to a great extent, where employees are able to talk about issues like pregnancy loss or fertility treatment (see Figure 1). A further 29% say they encourage this climate somewhat, while just 13% say they don't.

The voluntary sector is significantly more likely than the private and public sectors to say their organisation encourages this open and supportive climate where employees are able to talk about these issues to a great extent.

Figure 1: To what extent do you think your organisation encourages an open and supportive climate where employees are able to talk about issues like pregnancy loss or fertility treatment? (%)



Base: all employers (total: n=2,023; private: n=1,477; public: n=354; third/voluntary: n=192).

The employee perspective

In June 2022 we conducted a survey of 295 UK employees who had experiences of pregnancy or baby loss while in employment within the last five years.

We asked people if they told their manager or HR about their experience of pregnancy or baby loss. Just over half (53%) told their manager, 6% told someone in HR and 17% told both their manager and HR. Almost a quarter (24%) didn't tell either their manager or HR.

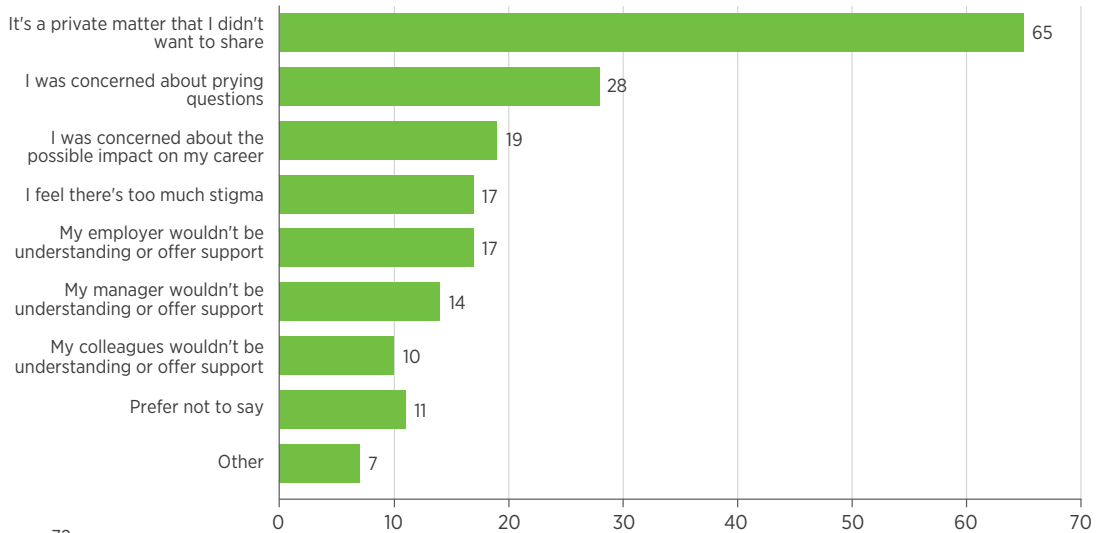
We asked all those who said they didn't tell their employer to tell us why that was. The most common reason was because they felt it was a private matter that they didn't want to share (65%). A further 28% were concerned about prying questions, 19% said they were concerned about the possible impact on their career, and 17% feel there's too much stigma (Figure 2).

It's understandable that individuals may not want to share such a sensitive and distressing event. However, organisations can still build a compassionate climate that will help people to feel supported and able to talk about their loss if they so choose and respect people's



wishes if they choose not to. The default reaction to disclosure should be ‘how can we support you at work?’ A supportive climate will also help to raise awareness about the topic and reduce stigma.

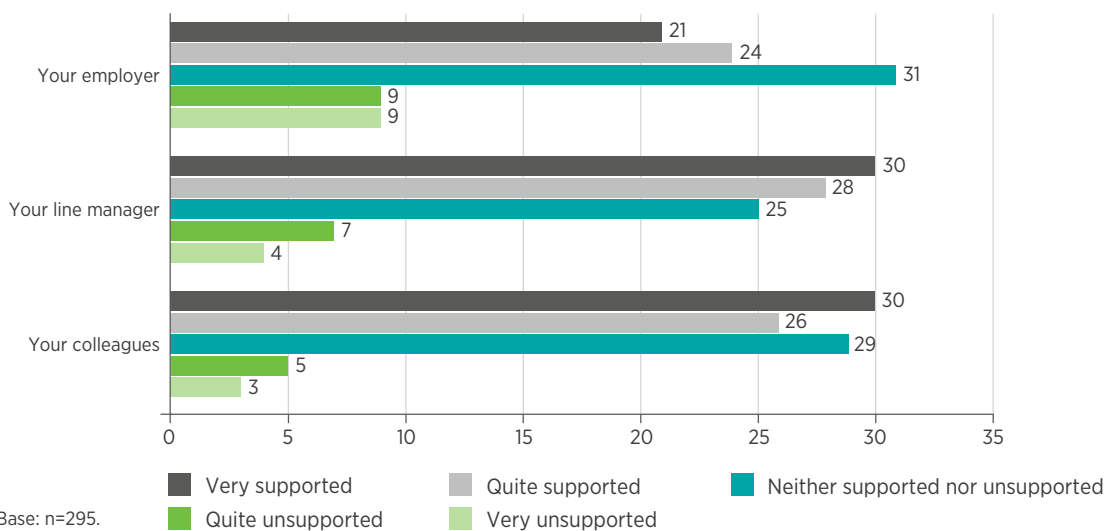
Figure 2: Which, if any, of the following are reasons that you decided not to tell your employer about your experience of pregnancy or baby loss? (%)



Base: n=72.

Just under half (45%) of employees said they felt either very or quite supported at work by their employer having experienced pregnancy or baby loss (Figure 3). Interestingly, around three in ten (31%) said they felt neither supported nor unsupported, suggesting the employer did nothing to help but also nothing to hinder. There was no significant difference between male and female employees in how supported they felt.

Figure 3: To what extent, if at all, do/did you feel supported by the following people in the workplace with your experience of pregnancy or baby loss? (%)



Base: n=295.

In terms of support from line managers, 58% said they felt very or quite supported by their line manager, but a quarter (25%) felt they had been neither supported nor unsupported. A small percentage (11%) said they felt quite or very unsupported. Similar findings relate to how supported or unsupported employees felt in relation to their colleagues.



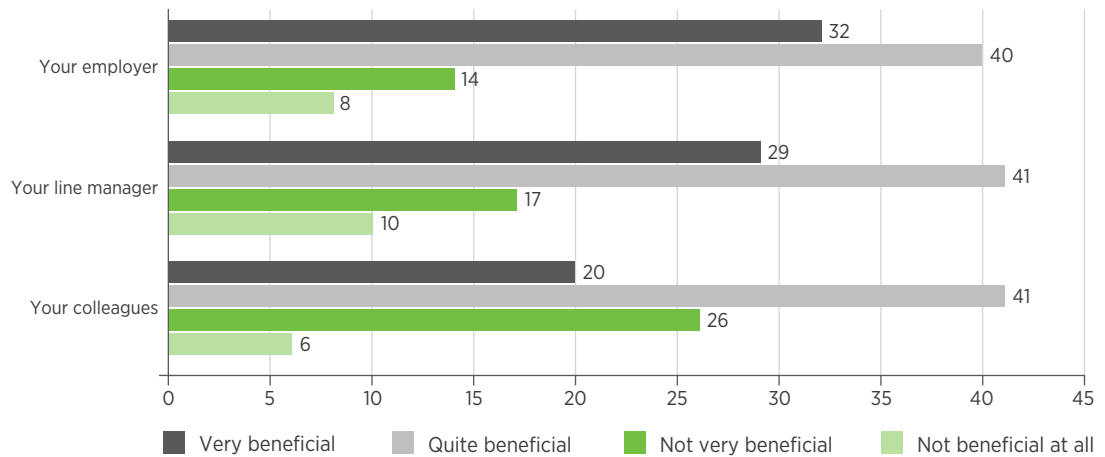
'Baby loss is an incredibly difficult time. I didn't think it would affect me as much as it did. Three months later and I'm still having low days. My manager hasn't been very helpful. Even though he is a man it's no excuse. He has already begun to treat me differently. Eg we have a work trip in six months and he said that he didn't expect me to attend as I might be pregnant again. I found this very triggering. My colleagues have been wonderful, though, very understanding and supportive.'

Respondent to CIPD employee survey

We also asked employees who didn't feel supported how beneficial or not they feel that having support from their employer, line manager or colleagues would have been.

Support from the employer is deemed most beneficial (72% said employer support would have been very or quite beneficial), followed closely by line manager support (70%), and then colleague support (61%) (Figure 4). This finding may seem surprising, given that it is colleagues we spend most time with. However, looking at this finding together with responses to other questions suggests that people value employer support most highly, perhaps because it's employers who provide the tangible benefits such as paid time off.

Figure 4: How beneficial, if at all, do you feel that having support from the following, in relation to your experience of pregnancy or baby loss, would have been? (%)



Base: employees who did not feel supported: your employer: n=148; your line manager: n=106; your colleagues: n=111.



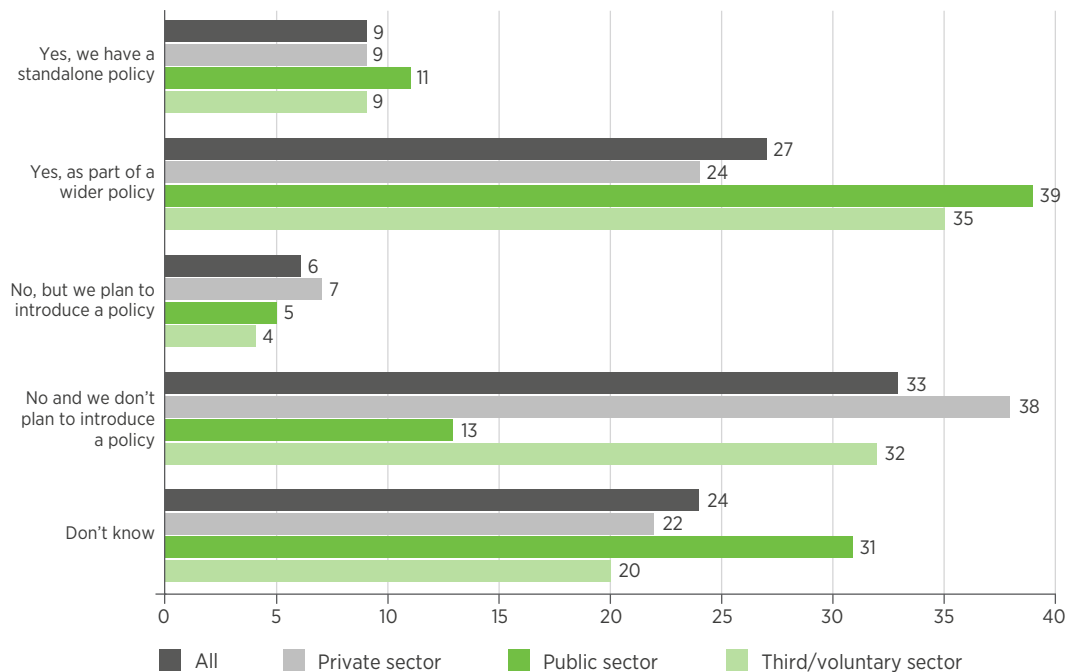
4 Formal policies

This section of the report looks at the findings relating to formal policies.

Fewer than one in ten organisations (9%) say they have a standalone policy concerning pregnancy loss/miscarriage. However, around a quarter (27%) say it is part of a wider policy (Figure 5).

It's disappointing that a third (33%) of employers say they don't have a formal policy on pregnancy loss/miscarriage and they don't plan to introduce one. It's also concerning that almost a quarter (24%) of the senior decision-makers in organisations who completed the survey for their organisation didn't know whether they had a policy covering this issue or not.

Figure 5: Does your organisation have a formal policy in place concerning pregnancy loss/miscarriage? (%)



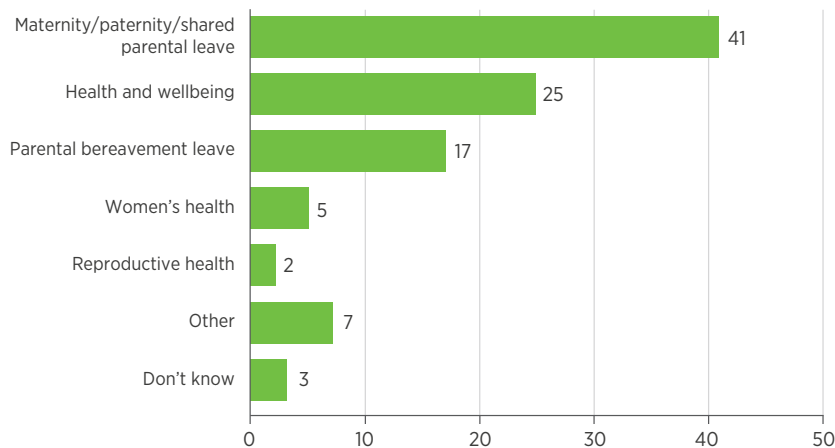
Base: all employers (total: n=2,023; private: n=1,477; public: n=354; third/voluntary: n=192).

We asked all employers who said pregnancy loss/miscarriage was covered within a wider policy, which policy this was. A quarter (25%) include pregnancy loss/miscarriage within a wider health and wellbeing policy and 17% include it in their parental bereavement policy (see Figure 6).

However, the majority of employers (41%) who cover pregnancy loss/miscarriage within a wider policy include it in their policy on maternity/paternity/shared parental leave. This may not be the ideal place to have information about employer support for employees experiencing pregnancy or baby loss and could feel insensitive.



Figure 6: The wider policy that covers pregnancy loss or miscarriage (%)



Base: all employers who said pregnancy loss/miscarriage was covered within a wider policy (n=500).

The employee perspective

We asked people to tell us whether their organisation provides support for employees who have experienced pregnancy or baby loss. Just one in five respondents (20%) said their organisation has a formal HR policy that covers this area.

Forty-four per cent of people who have experienced this type of loss said there was some support at work, whether that was in the form of an HR policy, support from managers or support from colleagues. However, 28% said there was no support on offer and a further 26% said they didn't know.

5 Support employers provide for employees

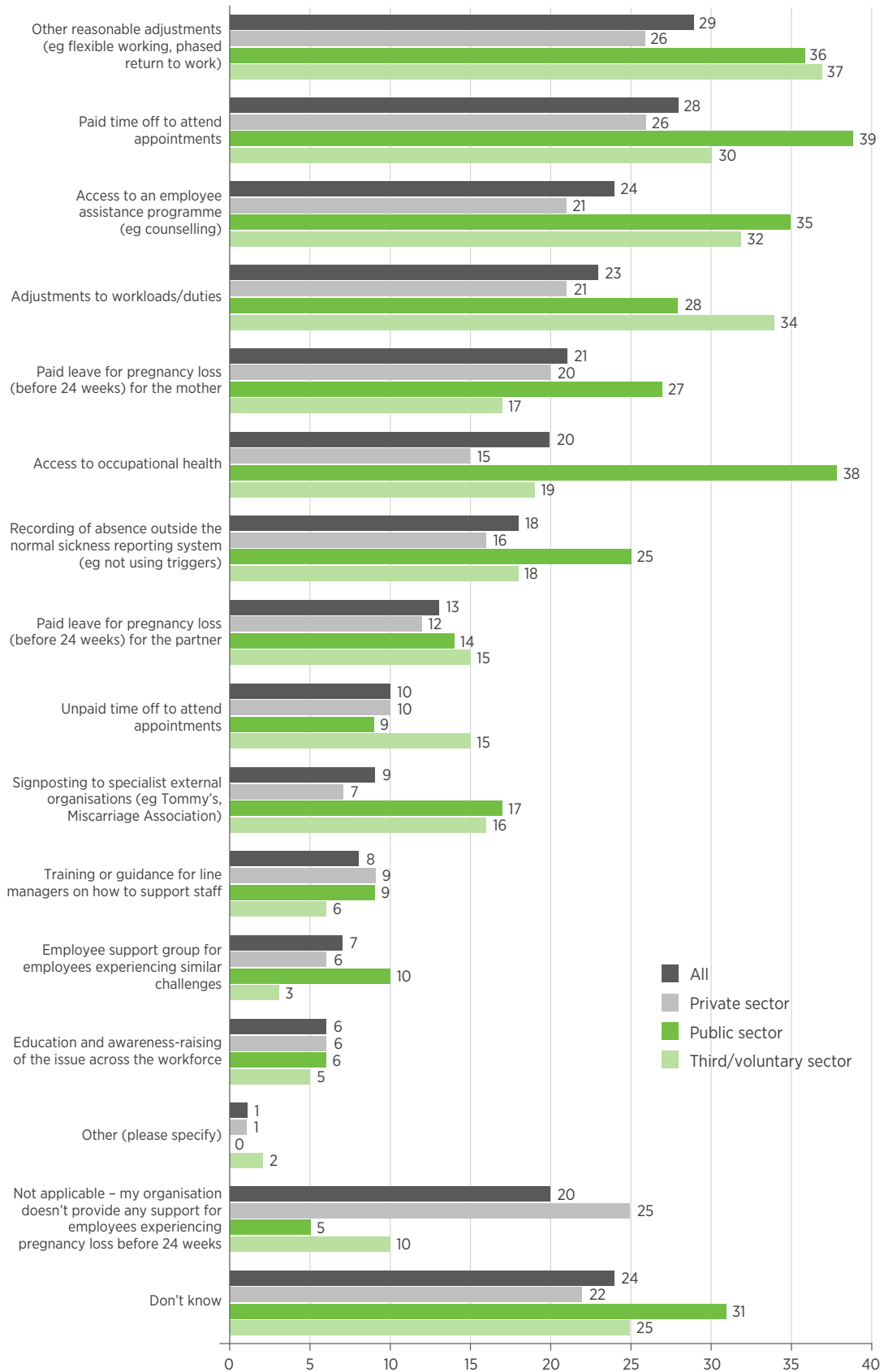
Over half (56%) of employers provide some kind of support to employees who experience pregnancy loss before 24 weeks (Figure 7). A fifth (20%) don't provide any support for employees before their statutory rights to leave and pay kick in at the end of the 24th week of pregnancy. However, there is significant variation between the sectors, with 25% of private sector organisations saying they don't provide any support before 24 weeks, 10% of third/voluntary sector organisations and just 5% of public sector organisations. A notable 24% of the senior decision-makers who responded to our survey don't know if they provide any support, or perhaps which support they provide.

The most common kind of support provided is 'other reasonable adjustments' (aside from adjustments to workloads/duties), such as flexible working or a phased return to work (29%). We asked about adjustments to workload/duties separately, which are provided by 23% of organisations. These adjustments are significantly more likely to be provided in the public and third/voluntary sectors than in the private sector (28% and 34% vs 21%).

Just over a quarter (28%) provide paid time off to attend appointments, and 24% provide access to an employee assistance programme such as counselling. 'Paid time off to attend appointments' is significantly more likely to be offered in the public sector than in the private (39% vs 26%).



Figure 7: The support provided for employees experiencing pregnancy loss/miscarriage before 24 weeks (%)



Base: all employers (total: n=2,023; private: n=1,477; public: n=354; third/voluntary: n=192).



In terms of paid leave, only a fifth (21%) provide paid leave for pregnancy loss before 24 weeks for the mother (27% in the public sector) and only 13% provide it for a partner.

And despite the key roles of both line managers and colleagues in affecting how supported and comfortable someone feels in returning to work after pregnancy or baby loss, it's disappointing that only 8% of organisations provide training or guidance for line managers on how to support staff, and only 6% offer any kind of education or awareness-raising of the issue across the workforce.

The employee perspective

We asked people to tell us what support they received from their employer in relation to their experience of pregnancy or baby loss. The top three most common types of support provided are:

- understanding from the manager that it can be a challenging time
- understanding from colleagues that it can be a challenging time
- paid time off to attend appointments.

'I felt rushed back to work as I'm only entitled to a total of four paid sick days per year before going on statutory sick pay. I don't think this policy had pregnancy loss in mind when it was put together.'

Respondent to CIPD employee survey

One in five people (21%) said they didn't receive any support from their employer (Figure 8).

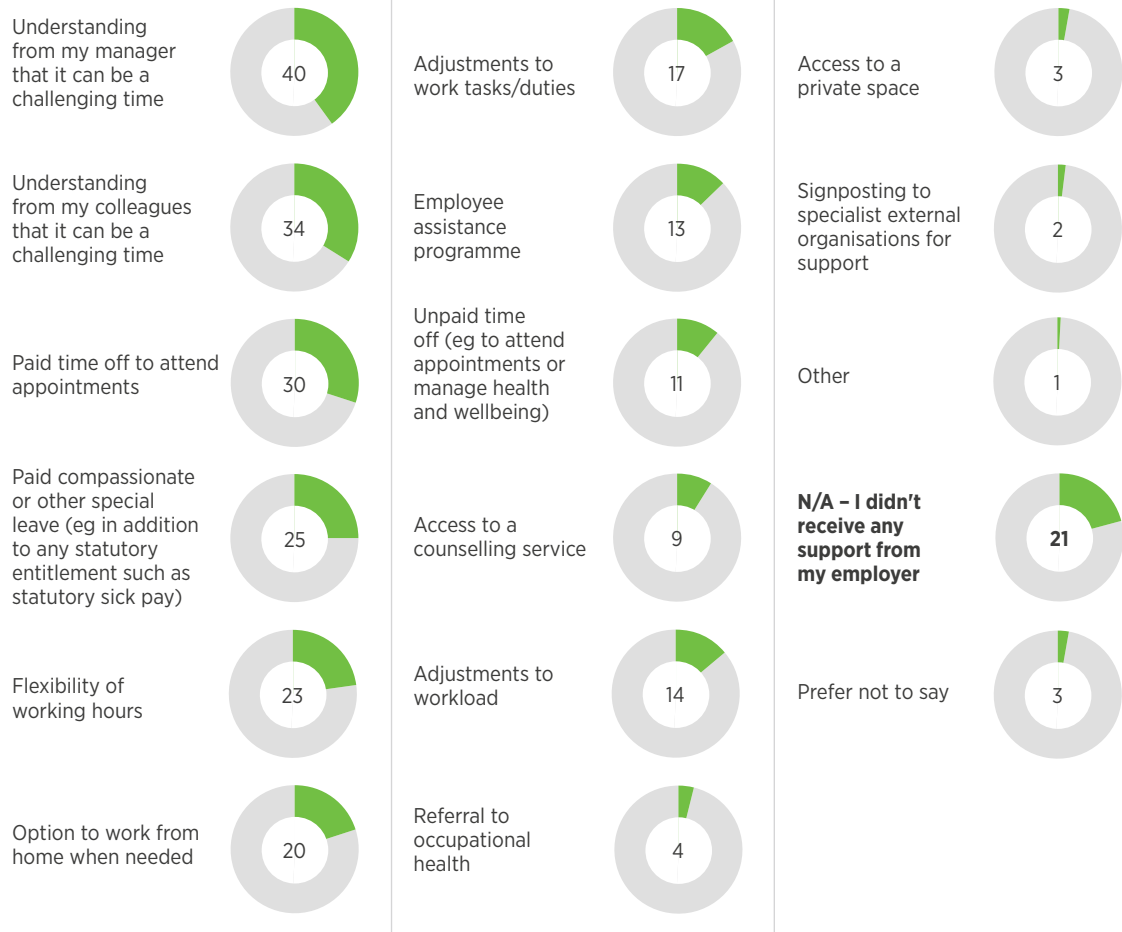
'Following a stillbirth and return to work I got pregnant again and my manager tried to block the advice from my consultant to work from home.'

Respondent to CIPD employee survey



Figure 8: What support, if any, did you receive from your employer due to your experience of pregnancy or baby loss? (%)

Type of support



Base: n=295.

After asking about the support people received from their employer, we then asked them to think about what top five types of support were, or would have been, most helpful (Figure 9). We hope that this insight will help to inform practice.

‘Having paid time off after a baby loss would be beneficial. The body may recover but the mind takes longer. I felt rushed back after my miscarriage. I needed time to grieve. So guaranteed paid recovery leave should be essential.’

Respondent to CIPD employee survey



Paid compassionate or other special leave (in addition to any statutory entitlement such as statutory sick pay) was rated as the most helpful form of support. The other forms of support in the top five most helpful are:

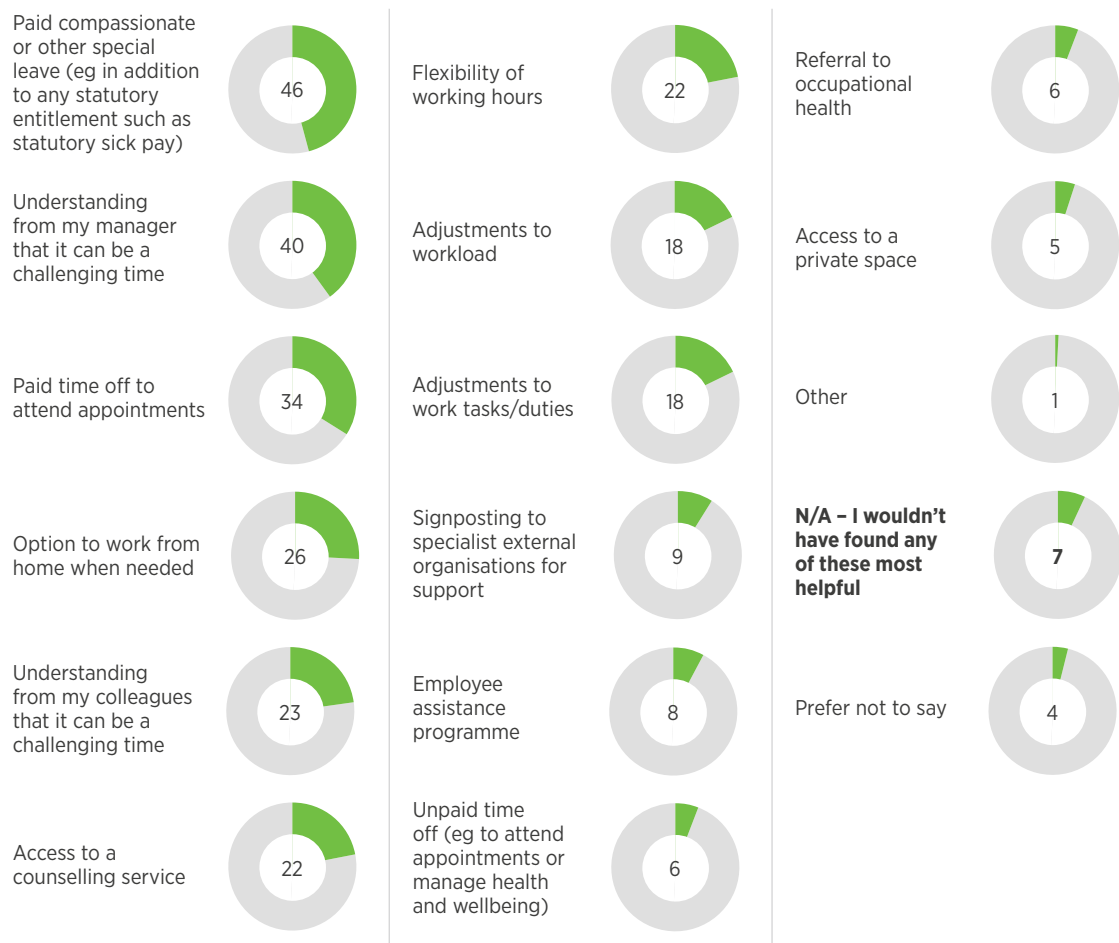
- understanding from their manager that it can be a challenging time
- paid time off to attend appointments
- option to work from home when needed
- understanding from colleagues that it can be a challenging time.

These findings show that although paid leave was seen as the most helpful, the less tangible elements of support in the form of compassion and understanding can make a difference to individuals.

Overall, the findings suggest that the employers providing support are doing so in the areas employees are telling us are most helpful, but not enough employers are doing so. For example, there is a mismatch in terms of paid compassionate leave as just 25% of employees said they received it compared with 46% saying it was/would have been helpful. The spread of responses in Figure 9 is a reminder that everyone has different circumstances and needs, so it's important to treat people as individuals, asking what support at work they would personally find useful.

Figure 9: Which, if any, of the following forms of support from your employer were, or would have been, most helpful with your experience of pregnancy or baby loss? (%)

Type of support



Base: n=295.

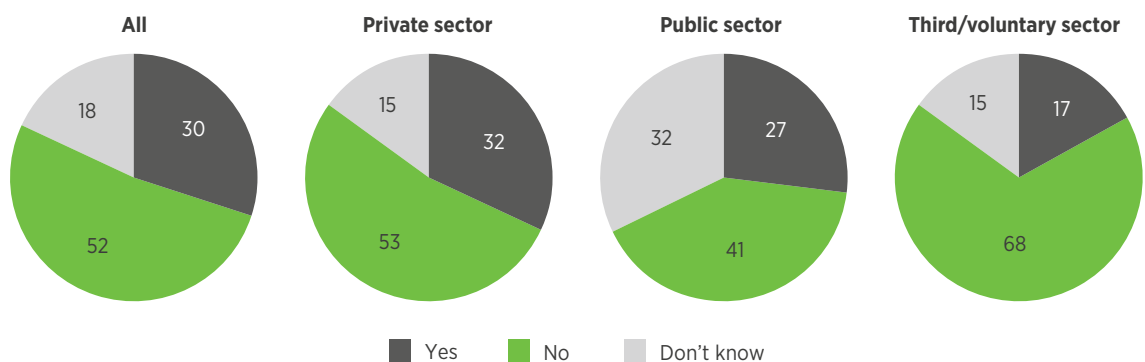


Do employees know about the support that's available to them?

Support is only useful to people if they know it's available, so we asked employers if they had communicated with employees within the past two years about the support available to people experiencing pregnancy loss/miscarriage (before 24 weeks).

Just three in ten (30%) of those organisations providing some kind of support had told employees about it, over half (52%) hadn't and 18% of the senior decision-makers who completed the survey on behalf of their organisations didn't know (see Figure 10). Employers in the third/voluntary sector were significantly less likely than those in the private and public sectors to have communicated to their staff about the support available (68% vs 53% and 41%).

Figure 10: In the past two years, has your organisation communicated with employees about the support that is available to those experiencing pregnancy loss/miscarriage before 24 weeks? (%)



Base: all employers (total: n=1,085; private: n=738; public: n=224; third/voluntary: n=123).

Impact of support

We asked people who said they felt very or quite supported by their organisation/line manager/colleagues, about the impact, if any, that support had on them and their experience of work.

On the whole, survey respondents who felt supported report a positive impact on each of the outcomes from the support they received, whether it's from their employer, their line manager or their colleagues. The strongest impact from all three sources of support was on people's mental wellbeing (see Figures 11, 12 and 13).

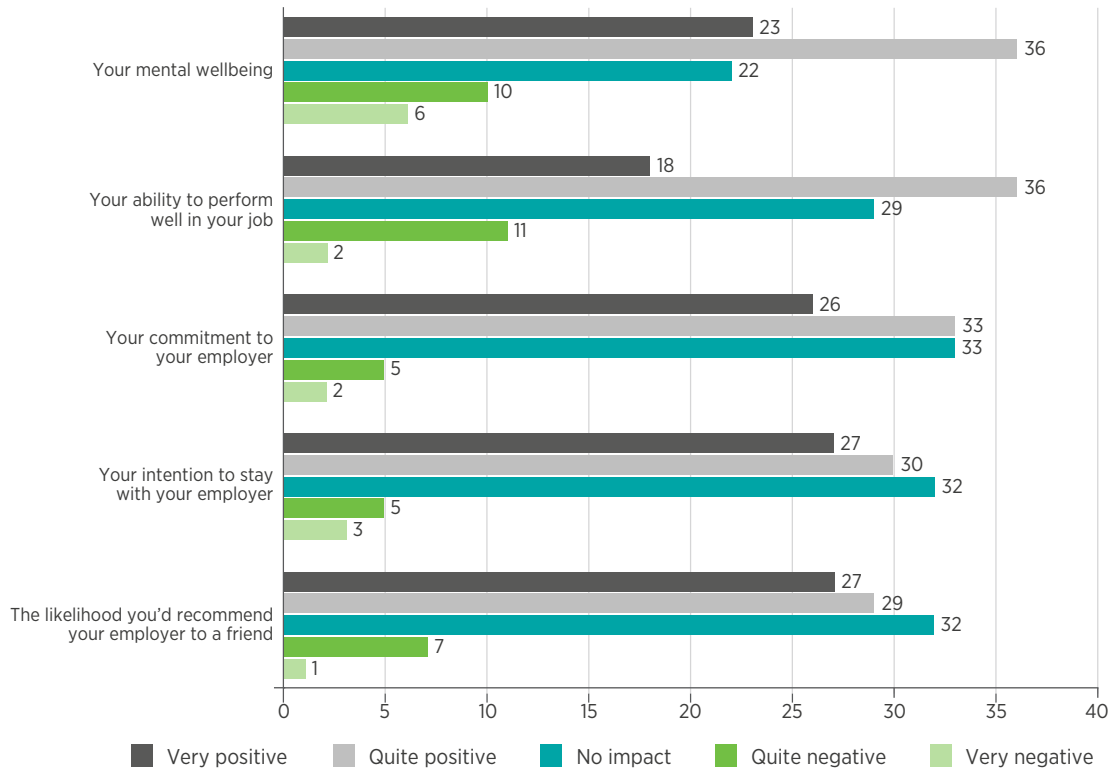
'It was an incredibly difficult time with mental health for my partner and I. I prefer that it stayed private due to the level of support/stigma that I was given from the outside world. There is plenty of support for women but not men.'

Respondent to CIPD employee survey

There is a strong rationale for employers providing effective support for employees given the positive impact of such support in areas such as performance, commitment to the organisation and intention to stay (see Figure 11). The framework (including policies, support, line manager guidance and training, and awareness-raising) that employers develop will also have a direct influence on how compassionate and supportive the climate is and how capable and confident line managers feel to support people experiencing loss of this kind.

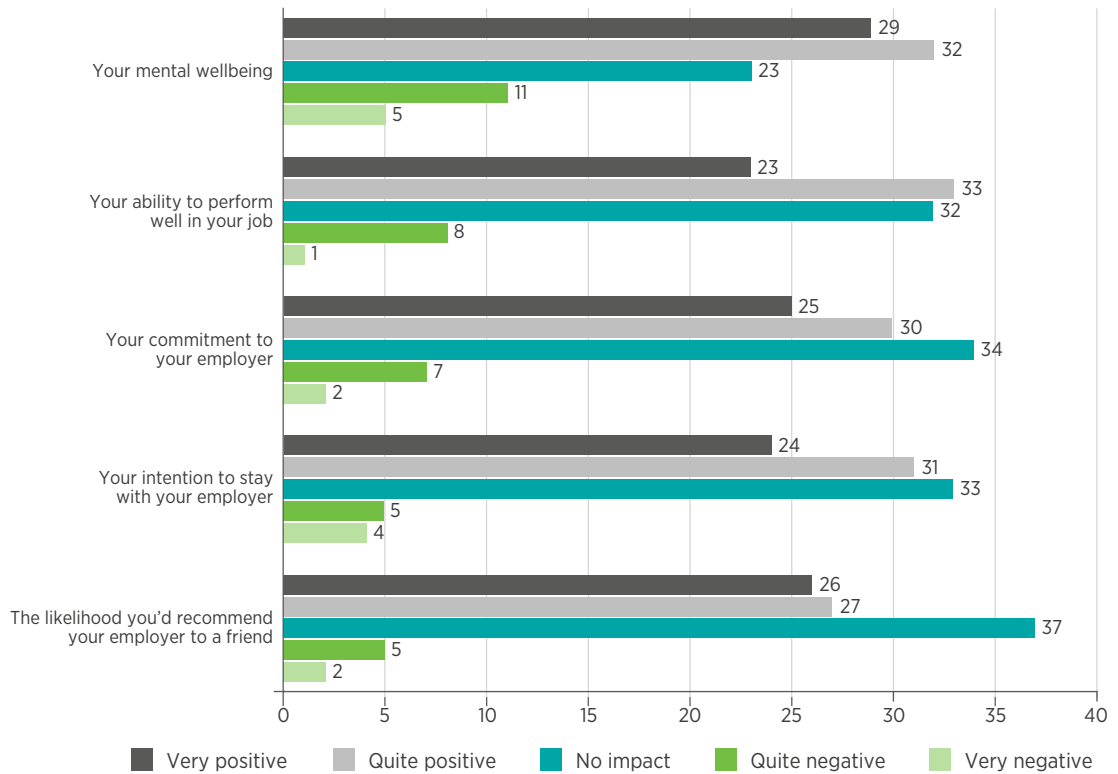


Figure 11: What impact, if any, has the support from your EMPLOYER in relation to your pregnancy or baby loss had on you and your experience of work? (%)



Base: all who felt supported (n=132).

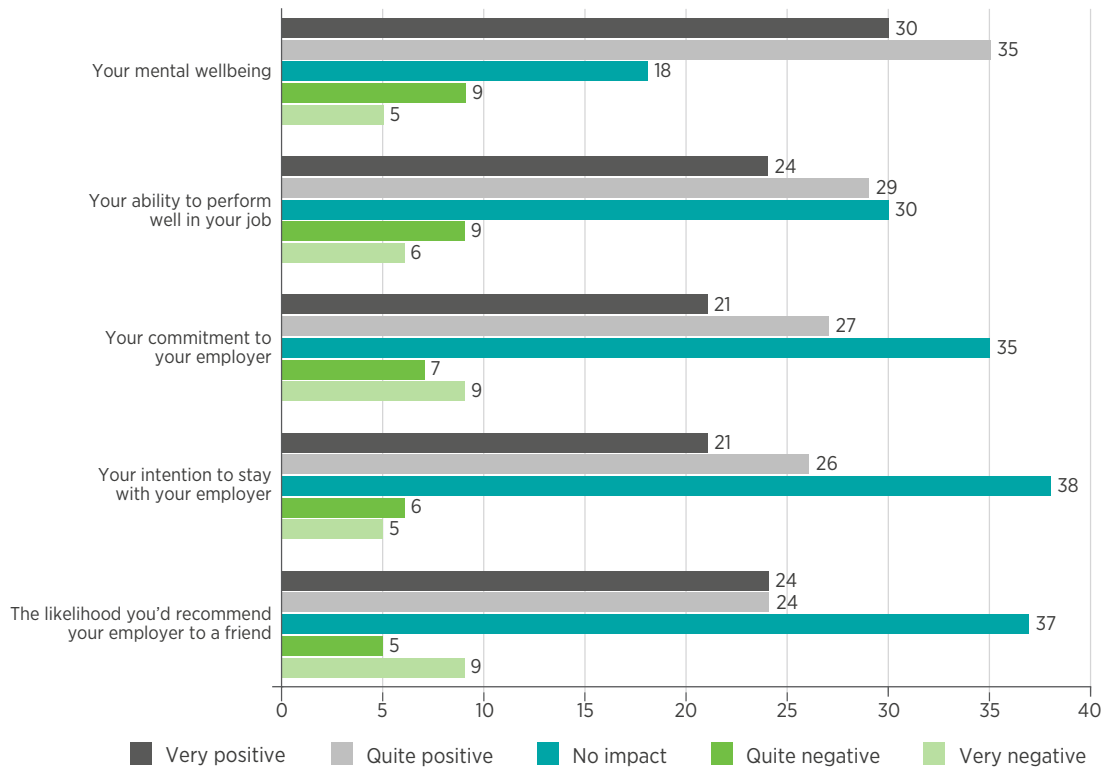
Figure 12: What impact, if any, has the support from your LINE MANAGER in relation to your pregnancy or baby loss had on you and your experience of work? (%)



Base: all who felt supported (n=171).



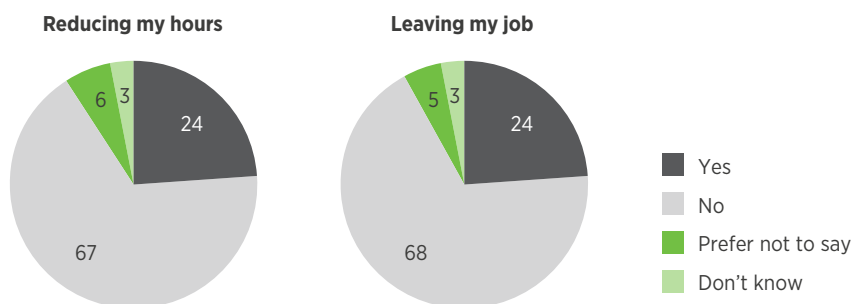
Figure 13: What impact, if any, has the support from your COLLEAGUES in relation to your pregnancy or baby loss had on you and your experience of work? (%)



Base: all who felt supported (n=164).

Finally, we asked people if they had considered reducing their hours or leaving their job because of their experience at work. Almost a quarter of employees have considered both options, showing the need for more organisations to develop a framework of support for those experiencing pregnancy or baby loss if they are to retain talented people (Figure 14).

Figure 14: Did you consider reducing your hours or leaving your job because of your experience at work in relation to pregnancy or baby loss? (%)



Base: n=295.



6 Conclusion: Good practice principles for workplace support

The survey results show that effective workplace support can benefit individuals at a difficult time in their life, as well as the organisation in terms of supporting employee performance, retention and commitment. However, the survey findings also show there is a substantial gap in the level of support provided for employees.

For example, only around a quarter (24%) of senior decision-makers surveyed say that their organisation encourages an open and supportive climate where employees can talk about issues like pregnancy loss or fertility treatment to a great extent. Just 36% of employers have a policy concerning pregnancy loss/miscarriage, whether that's a standalone policy or as part of a wider policy. And just under half (45%) of employees said they felt either very or quite supported at work by their employer having experienced pregnancy or baby loss. Further, a fifth (20%) of employers don't provide any support for employees before their statutory rights to leave and pay kick in at the end of the 24th week of pregnancy.

We believe that supporting people who have experienced such loss is the right thing to do. But there is also a business case for employer action here. At a time of skills shortages in the UK, organisations should be keen to view the provision they develop in this area as part of an attractive employee value proposition to recruit and retain much-needed talent.

Our forthcoming guidance will provide practical advice on developing workplace support for employees experiencing pregnancy or baby loss. Drawing on our survey findings and wider research, the guidance will expand on five principles of good practice:

- 1 Raise awareness across the organisation about the need for pregnancy or baby loss to be recognised as an important workplace wellbeing issue.** This requires careful thought and sensitivity in terms of the language and approach and so it's a good idea to involve employee networks or resource groups.
- 2 Create an open, inclusive and supportive culture.** The aim is to break down the stigma and ensure that people know they will be supported. Organisations can achieve this by communicating positive messages about the support available and ensuring that line managers show empathy and understanding in how they manage people who have experienced such loss.
- 3 Develop an organisational framework to support employees experiencing pregnancy or baby loss.** This should include specific policy provision, line manager guidance and education as well as access to sources of expert help, such as an employee assistance programme and signposting to external specialist charities.
- 4 Manage absence and leave with compassion and flexibility.** Given the lack of statutory leave entitlement for pregnancy or baby loss before the end of the 24th week, consider how generous the organisation's policy can be in offering paid leave in these circumstances. Absence management policies and procedures should be flexible and take into account the potentially far-reaching impacts of experiencing this kind of loss, for both partners.
- 5 Equip line managers to support people with empathy and understanding.** Line managers play a central role in supporting people's wellbeing and implementing people management policies. Employers cannot expect managers to act as counsellors or



medical experts. However, they need to be approachable and feel confident and capable to have sensitive conversations with team members. Crucially, they need to build trust-based relationships with people so that someone will feel able to talk about their need for support or workplace adjustments when experiencing a challenging life event.

Useful resources

Miscarriage Association, provides free support and information to anyone affected by miscarriage, ectopic or molar pregnancy, via its helpline, live chat and email services, and through in-person and online support groups.

Tommy's, the UK's largest pregnancy and baby charity funding research and supporting parents through pregnancy complications, miscarriage, stillbirth and premature birth. Tommy's offers pregnancy and baby loss e-learning modules for people managers and HR toolkits to build support for employees through any pregnancy journey, including those that end in loss. Visit Tommy's pregnancy and parenting at work hub.

Fertility Network UK, provides information, advice, support and understanding and has an info line and support line.



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