

CARROT

HELPING EMPLOYEES NAVIGATE HORMONAL HEALTH, FERTILITY, AND FAMILY BUILDING:

A guide to being a supportive workplace manager



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Introduction

Over the past few years, more employers have been finding ways to support the fertility and family-building needs of their employees. Today, 55% of companies provide some form of fertility benefits coverage. But while fertility benefits have become more common, it can still be a sensitive topic for many, especially at work. 47% of employees with infertility don't feel comfortable talking about fertility concerns or issues in the workplace.

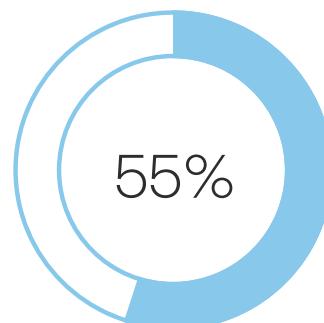
As a manager at a company that offers fertility benefits, your company is already making important progress toward creating a more supportive environment for employees pursuing parenthood or addressing fertility health concerns. At the same time, it's natural to have questions about the right way to navigate these sensitive topics.

- How should you respond if an employee wants to discuss their family-building experience?
- In what ways can you best demonstrate your support without coming across as dismissive or insensitive?
- How can you best support pregnant employees, whether they went through fertility treatments or not?
- What can you do to optimally support those navigating postpartum and infant parenting journeys?
- How can you support people going through hormonal changes like menopause or low testosterone?
- What resources do employees have access to for gender-affirming care and support?

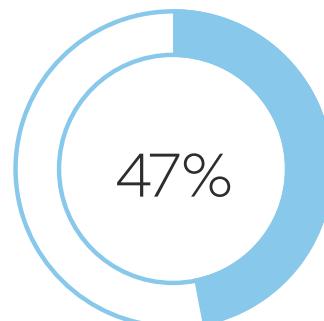
We put together this guide to help you better understand how to talk about your employees' hormonal health, fertility, or family-building journey at work. Together, we'll explore how to:

- Educate yourself on what your employees may be going through.
- Handle conversations with empathy.
- Make sure employees are aware of the supportive resources your organization provides.

One quick note — this guide is meant to provide information and guidance around supporting employees through fertility benefits and conversation. We won't be touching on legal aspects that may protect employees going through fertility health-related challenges at work.



55% of companies provide some form of fertility benefits coverage.



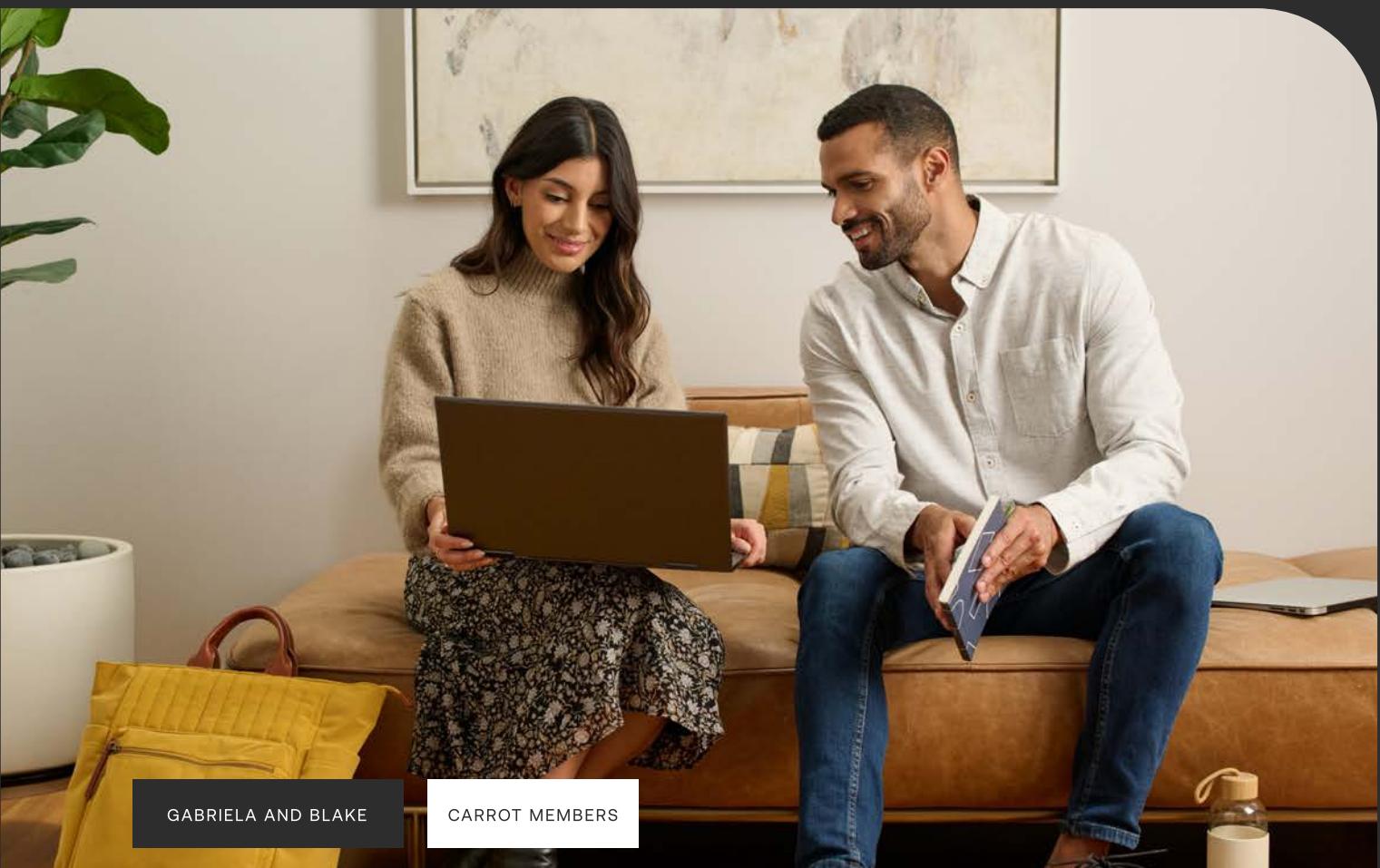
47% of employees with infertility don't feel comfortable talking about fertility concerns or issues in the workplace.

CHAPTER 01

Education

Research found that employees going through fertility challenges would feel more supported if those around them learn more about infertility. And this applies to any struggles related to family building or hormonal health. That's why the first step you can take as a manager is to educate yourself about the various fertility healthcare and family-building journeys that your employees may be going through — including what's involved in the process and the potential time commitment.

Understanding the basics of these journeys will help you develop more empathy and better understand what your employees may need from you.



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Egg and sperm freezing: The basics

Egg and sperm freezing is the process of using technology to preserve biological reproductive material at extremely low temperatures. There are many reasons people may choose to undergo egg and sperm freezing. Some may want to preserve their eggs and sperm before undergoing cancer treatments or hormone replacement therapy, while others pursue fertility preservation for personal reasons.

What's involved

The egg freezing process starts with a visit to a fertility clinic for an initial consultation. After that, doctors typically request diagnostic testing to learn more about their overall and reproductive health to make sure they're a good candidate.

The egg freezing process starts with taking fertility medications (typically given in the form of self-injections) to help the ovaries produce healthy, mature eggs. During this stage, your employee may need to attend two to three (or more) doctor's appointments to check the growth of their follicles (fluid-filled sacs that surround eggs) and receive blood tests to view changes in hormone levels. It's important to note that employees who work in person may need to take self-injections during the work day, so make sure you have a comfortable space available for this.

When the follicles are ready, their doctor will give them a hormone trigger shot to prompt the eggs to go through their final maturation stage. Then, the doctor will schedule an egg retrieval, the surgical procedure to remove eggs. After the eggs are retrieved, they're flash-frozen in a process called vitrification and stored at low temperatures.

Some people will choose to undergo one cycle, while others may opt to do multiple.

Sperm preservation can be done from home or in a clinic. Typically, the individual provides a semen sample, which is then analyzed and prepared for storage.

Time commitment



From initial testing to egg retrieval, the process typically takes around two months.



Because sperm preservation can be done from home through kits like Legacy, employees may not need to take time off work. Sperm testing and freezing can also be done in a clinic, which usually begins with an initial consultation. If the semen analysis reveals any fertility problems, the provider may offer counseling on lifestyle changes to improve sperm health before beginning the freezing process.

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Intrauterine insemination: The basics

Intrauterine insemination (IUI) is a relatively simple procedure that may be done with or without fertility medication. During IUI, prepared sperm are placed directly into the uterus using a thin tube called a catheter.

Doctors may recommend an employee start with IUI before progressing to in vitro fertilization (IVF), which is more involved. Some scenarios in which IUI may be a good option include when someone is using donor or frozen sperm, if their partner has problems with sperm delivery, or if someone isn't ovulating.

What's involved

The process usually begins with one or more months of fertility testing to figure out the best treatment approach. If someone doesn't have a specific infertility diagnosis, their doctor may recommend trying IUI without medication first. Otherwise, the preparation process also involves taking fertility medications, similar to the steps outlined in the egg freezing section above.

When starting the IUI process, the timing for IUI depends on the menstrual cycle, so your employee will need to take time off for their appointment on certain days as a doctor monitors egg development or administers medication. Monitoring and/or taking fertility medications takes around two weeks. When the egg is ready, the IUI procedure only takes a few minutes. After two weeks, it's time to test for pregnancy. Many clinics will schedule a blood test 14 days after the procedure.

Time commitment

From initial testing to the IUI procedure, the process takes around two months. If IUI doesn't lead to a pregnancy after a few rounds, IVF may be recommended next.



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In vitro fertilization : The basics

In basic terms, in vitro fertilization (IVF) is a procedure in which an egg is fertilized with sperm in a laboratory and the resulting embryo is transferred into a uterus.

What's involved

If someone doesn't already have frozen eggs available from a donor or from their own fertility preservation, the first few steps of IVF are similar to those we outlined in the egg freezing process section — from the fertility medication through the egg retrieval.

Once eggs have been retrieved, they're mixed with sperm cells from the partner or donor to form embryos. Once the embryos have developed, one (or more, under certain circumstances) embryos are placed into the uterus. The rest of the embryos are frozen for future cycles or for donation.

Time commitment

Similar to egg freezing and IUI, timing is critical for each stage of treatment. Specifically, every phase needs to align with the patient's menstrual cycle, which may require people to schedule appointments on very specific days.

It's also important to note that it often takes multiple rounds of IVF before a pregnancy. The average number of IVF cycles before pregnancy is between two and five. If an employee lets you know they're starting IVF, that doesn't necessarily mean you should start planning for their parental leave in exactly nine months. IVF can be a long and stressful process, both physically and mentally.



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Adoption: The basics

Adoption is when a person assumes legal guardianship of a child from their genetically-related, non-genetically related, or current legal parent(s) or guardian(s). There are many reasons that people may decide to adopt a child. For some, it's how they prefer to become a parent. For others, the decision comes either during or after an infertility experience.

What's involved

The adoption process can look very different for every individual and couple. Some families and individuals work with an adoption agency, while others pursue adoption through an attorney. Adopting through the foster system is another option. No matter what path someone chooses, the process includes working with an attorney and caseworker and completing a home study before bringing home a child.

Each path comes with a unique set of challenges. For example, the process of adopting between countries looks very different from domestic adoption. Similarly, working through an adoption agency — a legally licensed organization that educates and prepares people to adopt children — is distinct from working directly with an attorney, which tends to be more self directed. There's also a difference between private adoption and adopting through foster care. Foster parents can serve as a temporary placement for a child until they return to their birth family, and if that can't happen, they may adopt the child. There are also options to adopt directly from foster care.

No matter their adoption path, make sure your employees know that fertility benefits like Carrot also support adoption journeys, and that experts are available for support every step of the way.

Time commitment

The timeline for adoptions is unpredictable and can span anywhere from several months to several years. Some parents may face significant challenges along the way, such as being “matched” with a child at the final stage, only to have the adoption fall through at the last minute.

Even before the adoption is finalized, your employees may also have to spend time away from work for home studies, birth parent visits, court dates, and travel.

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Donor-assisted reproduction: The basics

Donor-assisted reproduction represents any human reproduction in which DNA, gametes, or reproductive tissue are donated or provided through the process of gestation by someone other than the intended parent or parents.

What's involved

The process will look slightly different depending on whether you're looking for an egg, sperm, or embryo donor. But, in general, the following steps will be taken:

01 Donor selection

The first step is to choose a donor—either anonymous or directed (usually a friend or family member). If it's the former, agencies will typically provide a questionnaire and use that information to match people based on various factors.

02 Screening

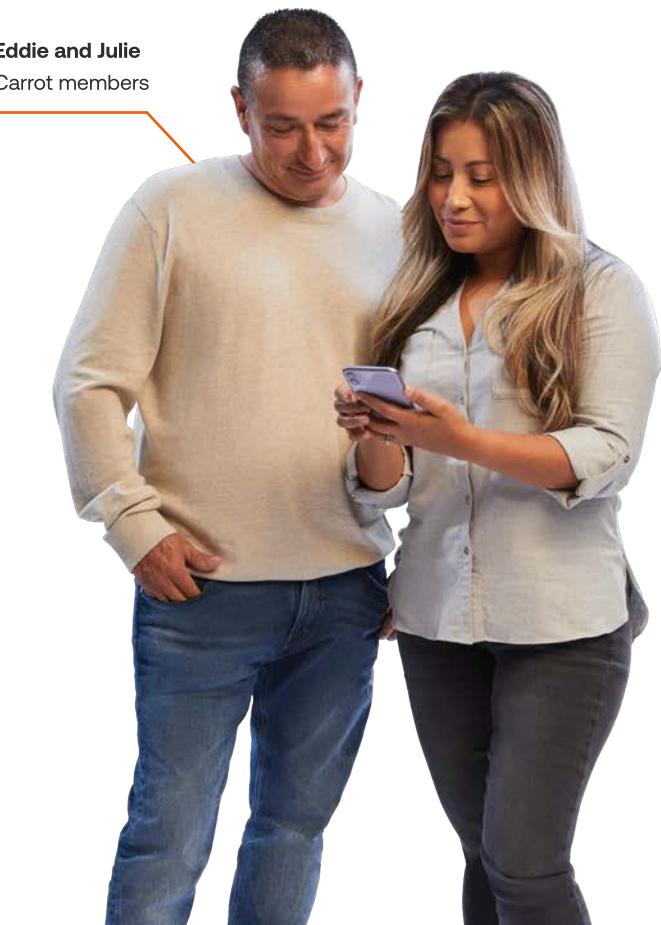
Once a donor is chosen, there's usually a screening process that includes a physical exam, blood tests, and a psychological evaluation.

03 Retrieval and fertilization

The final step is to retrieve or collect the sperm, eggs, or embryo, then fertilize them and transfer to the uterus.

Time commitment

Donor-assisted reproduction processes take several months to complete. Again, there's no guarantee of a resulting pregnancy, and it depends on the individual or couple how many times they decide to go through the process.



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Gestational surrogacy: The basics

Gestational surrogacy involves having a person carry a pregnancy on behalf of the intended parent or parents. Like the other paths we've discussed, there are a variety of reasons why someone would choose this family-building path. Gestational surrogacy is one option for same-sex couples and single parents who want to have children, as well as those who have medical conditions that don't allow them to safely carry a pregnancy to term.

What's involved

While the steps of using a GC are similar to those of donor-assisted reproduction, the process tends to be more complex due to the legal considerations.

Because both the intended parent(s) and the carrier interact throughout the process, it's critical to work with an attorney who is experienced in reproductive technology law. The lawyer typically helps create the GC contract for the intended parents, the GC, and, if applicable, the GC's partner.

There are also regulations and guidelines that everyone needs to be aware of, such as FDA-mandated testing and the medical and psychological evaluations required to use a GC.

Time commitment

While every situation is unique, the GC matching process alone can take anywhere from six to 12 months. From there, it may take several more months to go through the initial meetings, health evaluations, and legal processes that we outlined above.

Then the IVF process, which we outlined earlier, will take another few months to complete. So, in total, the process of using GC carrier services can take at least a year, if not longer.

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Pregnancy: The basics

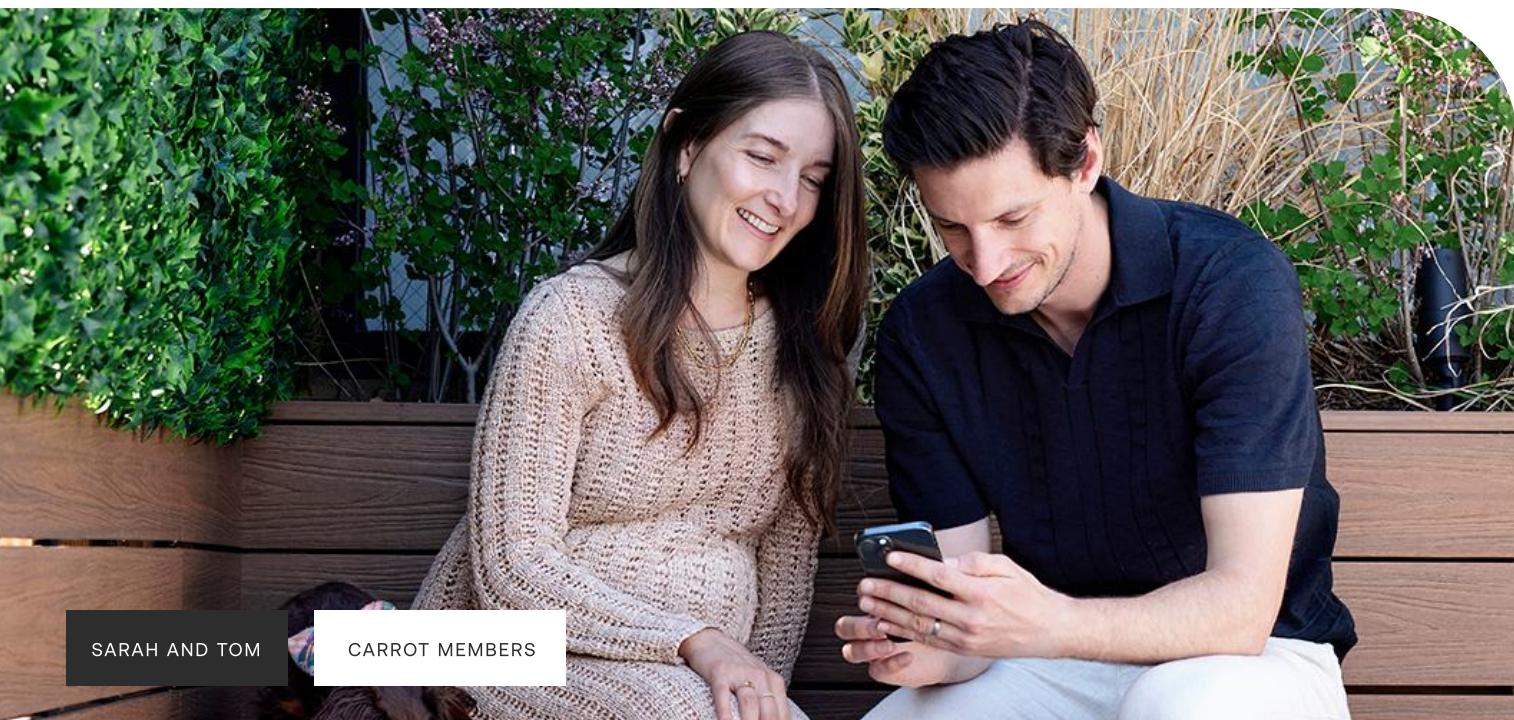
One common misconception about fertility treatments is that they result in pregnancies soon after — but as we've explored, that's not necessarily the case. When talking with employees who are pregnant, keep in mind the path they may have taken to get there, and share the range of resources your company may have available to them through your fertility benefit, including emotional support.

What's involved

Pregnant people receive ongoing monitoring and testing from their regular obstetrician (OB). But for additional support, pregnant people can also benefit from expert guidance. For example, many individuals find it helpful to create a birth plan with a doula, discuss diet with a nutritionist, and receive emotional support from a therapist who specializes in fertility and pregnancy journeys.

Time commitment

Every pregnancy is different, but in general, pregnant people attend doctor's appointments every four weeks until they reach 28 weeks, every two weeks until 36 weeks, then every week until birth. Those who are pregnant after treatment with IVF may have additional monitoring, especially at the beginning of the pregnancy. Pregnant people who have certain medical conditions or are 35 or older will also typically attend more prenatal appointments.



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Hormonal health: The basics

Fertility benefits are expanding beyond fertility treatments and family-building options to include support for hormonal health. While fertility benefits have typically centered around preserving fertility and having children, the same hormones that impact fertility also impact other areas of health — especially as we age. To provide truly inclusive benefits for all employees, hormonal health journeys like gender-affirming care, menopause, and low testosterone (low T) need the same attention and support.

Menopause, the permanent end of menstrual cycles, happens between the ages of 45 and 55. The fluctuations in hormones cause symptoms like hot flashes, mood swings, fatigue, and brain fog, which can disrupt daily life and impact productivity at work.

As people with testes age, their testosterone levels gradually decline. Unlike menopause, which generally happens during a specific timeframe, low T can actually impact people of all ages. While it's more common in older people, young people can also have low T and experience symptoms like fatigue, irritability, and difficulty concentrating.

Despite how common they are, menopause and low T are rarely talked about in the workplace. In addition, individuals who do speak out about their hormonal health issues may not receive the necessary gender-affirming care they need to feel supported. Transgender individuals in particular are at risk for receiving inadequate care that fails to affirm their gender identity when it conflicts with the gender they were assigned at birth. The stigma around hormonal health discussions in the workplace, as well as a lack of gender-affirming care options, can result in employees' silent suffering, sometimes culminating in the decision to leave their roles. It's important to understand these journeys, too, so you can provide inclusive and comprehensive support to all employees.

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Carrot member



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Menopause: The basics

Menopause is when a person stops having a menstrual cycle for 12 months in a row. Each person experiences the menopause journey differently, with unique symptoms, timelines, and treatment decisions.

What's involved

Menopause is a part of the aging process that everyone with ovaries will experience. On average, menopause happens around age 51, but many notice symptoms before during a transitional period called perimenopause. When people talk about “going through menopause,” they are often referring to perimenopause. During this time, the ovaries stop producing estrogen and other hormones that are involved in preparing the body for pregnancy. These fluctuations in hormones result in symptoms like hot flashes, difficulty sleeping, mood swings, memory lapses, and more.

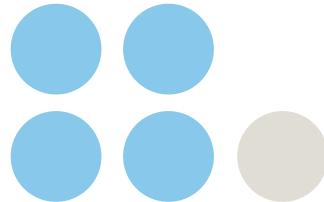
Time commitment

The onset and duration of symptoms for perimenopause and menopause are different for everyone — making this journey particularly challenging to navigate and support. For some, perimenopause symptoms can begin up to four to eight years prior to menopause. But for others, symptoms begin after menopause, lasting an average of four to five years after menstrual cycles end.

Many manage these symptoms through lifestyle changes like eating a healthy diet or wearing loose clothing to tolerate hot flashes, but some, especially those with severe symptoms, seek treatment, too. People often consult with their primary care physician, obstetrician, or even reproductive endocrinologist to treat symptoms, with our recent survey showing 56% of respondents seeking support from their doctor.

However, people who seek out care for menopause may struggle to find support. Unlike fertility specialists, there aren't as many providers specialized in menopause. In fact, a study found that only one in five OB/GYNs are trained in menopause. And while all reproductive endocrinologists are trained in menopause, not all accept menopause patients. This lack of support from providers contributes to the stigma and lack of education around menopause, with very few people actually feeling prepared or informed about the overall experience — just 8%, according to our survey.

Menopause symptoms can last for years and there are additional obstacles to navigating menopause — like finding the right doctor and getting the right information — that can add more time and stress to this journey. Inclusive fertility healthcare benefits like Carrot can eliminate some of these obstacles by providing employees access to a vetted network of menopause specialists, personalized clinical education, and more.



1 in 5

Only one in five OB/GYNs
are trained in menopause.

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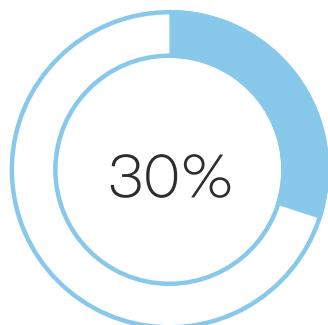
Low testosterone: The basics

In people with testes, low testosterone (low T) is a medical condition where testosterone levels drop to a point that negatively impacts a person's health and/or quality of life.

What's involved

Testosterone is a hormone responsible for many important functions, including bone and muscle development, emotional regulation, red blood cell production, sex drive, and sperm production. A gradual decrease in testosterone levels is a part of the aging process for people with testes, with testosterone levels declining on average about 1% a year after age 30.

While most have testosterone levels within the normal range, some may experience low T. By age 70, 30% of males will meet the definition of low T, and by age 80, this increases to 50%. But young people can also experience low T, with one study finding that 20% of those between the ages of 15-39 had a testosterone deficiency. Common symptoms associated with low T that could affect productivity at work include fatigue, insomnia, depressed mood, and irritability.



By age 70, 30% of males will meet the definition of low T.

Time commitment

Lifestyle changes such as maintaining a healthy weight, reducing stress, and getting enough sleep, can increase testosterone levels and improve symptoms. Many speak to their primary care physician about their symptoms, but some may ultimately consult with a reproductive urologist too. In addition to lifestyle changes, a provider might recommend testosterone replacement therapy, which requires ongoing follow-up visits.



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Gender-affirming care (GAC): The basics

With approximately 1.3 million U.S. adults identifying as transgender, there is a critical need for gender-affirming care (GAC) to remove existing barriers to safe and effective medical, psychological, and behavioral treatments and services for all. And because 1 in 3 gender-minority adults (whose gender is not aligned with that traditionally associated with the sex assigned to them at birth) report experiencing discrimination from healthcare providers, there is an urgent need for employers to provide customized care options that recognize and address employees' emotional, physical, fertility, and individual health needs. In fact, the number of companies offering transgender-inclusive and gender-diverse coverage has increased 22 times since 2009.

What's involved

Defined by the World Health Organization (WHO) as one or more “social, psychological, behavioral, or medical” interventions that are designed to “support and affirm an individual’s gender identity,” GAC includes hormonal treatment, surgery, counseling, and a variety of other modalities.

Carrot prioritizes access to GAC by providing members with educational resources, emotional support chats, LGBTQ+ family-building discussions, and more. Individuals seeking GAC can access personalized guidance from trans-knowledgeable providers, unlimited chats with experts, coverage for gender-affirming hormonal therapy, and specialized digital healthcare services. Through Carrot’s Provider Finder, members also have access to vetted gender-affirming hormonal treatment providers, access to a broader range of medications and services specialized for those seeking GAC, and information on multidisciplinary trans health centers.

Time commitment

GAC is a crucial component of healthcare and can have a significantly positive impact on trans and gender-diverse individuals at any stage of life. But those facing the potential challenges of hormonal health, including menopause and low T may require specific types of GAC in order to navigate new phases of life with support and respect.

By providing GAC options through Carrot, employers not only help improve access to care for employees (with the option to offer financial coverage for gender-affirming hormone therapy and other non-surgical options), but they expand DEI initiatives to trans and gender-diverse individuals while supporting healthier outcomes and improved employee wellness.

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Postpartum: The basics

The postpartum stage is the period of time that starts immediately after childbirth, and lasts for up to six months, but the physical and psychological impacts for the birthing person can last much longer. Sometimes referred to as “the fourth trimester,” the first twelve weeks after delivery can be particularly challenging and transformative for many birthing people.

Experts typically divide the postpartum period into three distinct phases: the acute phase, which is the first 24 hours after delivery, the early phase, which is up to seven days after delivery, and the late phase, which can last from six weeks to six months.

What's involved

The postpartum period generally refers to the first six to eight weeks after delivery, or until the birthing person's body returns to its “pre-pregnancy” state, but the physical, mental, and emotional symptoms related to postpartum can last much longer.

Just as each pregnancy is unique, so is each postpartum period. But in general, the acute and early phases of postpartum include physical changes, like the uterus shrinking back to its usual size, hormonal shifts, breasts engorgement, perineal soreness, swelling, and fatigue. During the early stage of postpartum, birthing people may also be at risk for issues like cardiomyopathy, postpartum depression, and urinary incontinence.

The late stage of postpartum often includes issues that arise as the body's muscles and tissues return to their pre-pregnancy state, including pelvic floor dysfunction, painful sex, and uterine prolapse. Additionally, if a birthing person undergoes a cesarean (C-section) during delivery, they will require up to 12 weeks to fully heal from their abdominal surgery.

While many new moms experience what is known as the “baby blues” in the first few days after delivery (a temporary state that includes crying, mood swings, and difficulty sleeping), some birthing people experience postpartum depression (PPD). Research indicates that around 1 in 7 women can develop PPD, and the condition is characterized by at least five depressive symptoms that are present for two or more weeks. These symptoms might include depressed mood, loss of interest or pleasure, insomnia, fatigue, feelings of worthlessness or guilt, suicidal ideation, and more. PPD is a serious mental health condition that often requires therapy and/or medication to treat.

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Time commitment

Every birthing person's postpartum journey may be different, but generally speaking, the postpartum period can last from childbirth through six months after delivery, and sometimes longer. According to Carrot's [Maternal health in the workplace](#) report, only 38% of women feel prepared for the postpartum stage, and just 39% of women feel prepared returning to work. While maternity leave policies may differ between companies, employers that offer flexible work scheduling are much more likely to retain top talent.

There are numerous other ways employers can support workers through this time period, but one of the most important — yet overlooked — benefits they can provide is financial assistance for doula support.

A doula is an individual who provides non-medical services, education, guidance, and emotional support to birthing people and research shows that working with a birth doula can lead to reduced labor time, an improved birthing experience, and more. Postpartum doulas can also teach new parents about newborn care and some may provide overnight support.

Individuals navigating the postpartum period can also benefit from a variety of additional employer-provided resources and services, including educational materials, virtual or in-person sessions with physical, psychological, and emotional health experts, access to pelvic health specialists, and much more.



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Infant care and parenting: The basics

Pregnancy and postpartum can be full of challenges, but the immediate transition into parenthood can be even more intense and confusing to navigate. Learning to care for a newborn baby and adapting to evolving feeding and sleeping schedules can pose new obstacles for parents into the infancy period and beyond. Comprehensive support, educational resources, and accessible care services can make it much easier to move through this complicated time.

What's involved

For many new parents, transitioning from the newborn stage to the infant stage can be rewarding, challenging, and overwhelming. Babies entering the infant stage may begin to explore their surroundings, express personality traits, and require new and changing routines to accommodate their evolving abilities. All of these new developments can be exciting and stressful for those still learning to manage life as a new parent. In addition to establishing and maintaining regular pediatric appointments and facing potential nutrition, safety, and sleep issues for the first time, many parents will also return to work during the infant stage and encounter novel scenarios and obstacles.

Time commitment

Infancy generally begins at around two months and lasts until one year of age, at which point babies become toddlers. The infant stage is full of developmental milestones that may be joyful and difficult for new parents to navigate, making specific resources and services invaluable for those maneuvering through this stage for the first time. The right personalized, expert support can make all the difference in an infant parent's experience, and potentially impact their decision to return to work at all.

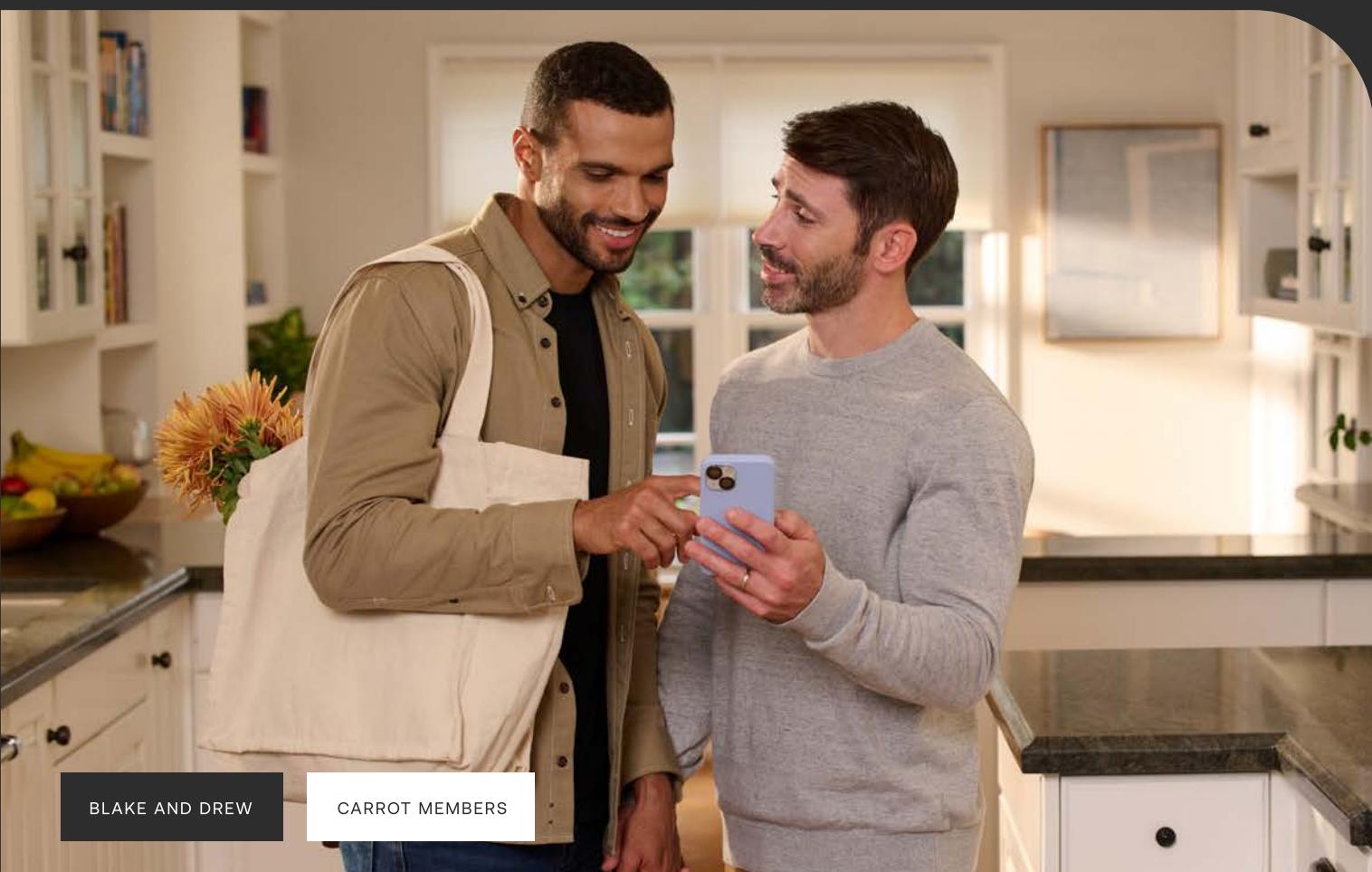
Through robust and comprehensive one-on-one coaching sessions with pediatric nurses, pediatricians, emotional support experts, and more, Carrot can help infant parents better understand and move through challenges related to breast/chestfeeding and/or bottle feeding, safety precautions, sleep changes, and much more. These personalized sessions, as well as Carrot's full library of educational content, can also help infant parents navigate their own sleep deprivation, emotional challenges, and return-to-work transition. By providing evidence-based insight and guidance from a variety of experts, Carrot can help parents through the infant stage and beyond with confidence and the comfort of knowing they are far from alone.

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Preparing for conversations

Now that you understand the basics of the various journeys, it's time to start preparing for conversations with your employees. It's easy to just say "be empathetic," but how do you actually put this into practice — especially when it comes to a topic that you may not feel entirely comfortable with yet?

In this section, we'll share actionable advice to help you navigate these discussions.



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Put yourself in their shoes

When employees approach their manager about a fertility healthcare or family-building journey, it's usually to let them know about scheduling changes. But an exercise in empathy can help you consider what else they may be wondering about — and help you respond with compassion.

Here are a few examples of concerns your employee may have:

Will they support me with time off and a flexible work schedule?

How will this impact my team and workload?

Will this impact my career progression in any way?

Will this personal information be kept confidential?

Think about how you would want your manager to respond if you were in a similar situation. What would make you feel supported?

Don't make assumptions

Because every employee's situation will look very different, it's important not to make assumptions about what they need. For instance, although some people may want a reduced workload during their treatment, others may not. Some individuals may actually welcome work as a distraction while they go through a stressful process.

The best way to find out what your employees need is to ask. Of course, you want to wait until they bring up the subject with you first, but, once they do, it's perfectly acceptable (and encouraged) to say: "what can I do to help you through this journey?"

Respect their privacy

It's critical to keep any information shared with you by an employee private. Even though you may think it's helpful to let a teammate or senior leader know what they're going through, this isn't your call to make. So unless your direct report explicitly asks you to share with other people, keep all details to yourself.

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Know what to say — and what not to say

If your team member is going through a fertility healthcare or family-building journey, they may approach you about needing to take time off for appointments or procedures. For those who haven't been through these journeys themselves, it can be difficult to know what to say in the moment to be both respectful and supportive. To help, we asked our Carrot Expert, Farah Ali, PsyD, to share some ideas of what managers should and should not say when having conversations with their employees.

What to say:

We encourage managers to offer words of compassion, first and foremost. Then, if the employee seems open to it, offer more tangible support. It is also critical for managers to be mindful of using gender-inclusive language and to consciously use terms and phrases that reflect the reality of gender diversity, promote gender equality, and help eliminate gender bias.

"Thank you for taking the step to tell me about this."

"This sounds like a really tough time for you/your family."

"I know there are lots of appointments you have to attend and time off you need to take. Is there anything I can take off your plate?"

"I know you have many projects with upcoming deadlines. How can I support you in reaching these goals? Or, if you don't think you can meet these deadlines, let's brainstorm other alternatives."

"I can only imagine how difficult it must be to go through this process while working."

"I appreciate the work you're doing while navigating all these challenges."

"How would you like me to follow up with you after a treatment/procedure? Should I ask how it went or would you prefer I leave it up to you to update/not update me?"

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What not to say:

In general, avoid telling people what to do and what to feel grateful for. This implies you understand their experiences better than they do, and it can come off as condescending. Also, don't use words like "just," which can diminish the seriousness of their situations. In addition, continually use terms and phrases that are reflective of gender diversity, consciously eradicating words or concepts that may (even unintentionally) reinforce gender discrimination or transphobia. Here are phrases you should avoid:

"Why don't you just adopt?"

"You're still young, you have plenty of time to have kids."

"Kids are hard. Maybe it's good you can't have them."

"Everything happens for a reason."

"Maybe it's part of God's plan."

"You need to relax. Take a vacation."

"Have you tried [insert suggestions on how to get pregnant]?"

"Should we start thinking about a parental leave plan if you're trying to have kids?"

"What are you thinking in terms of parental leave? Now that you are expecting?"

"But you're so young to be going through menopause."

"At least you already have children."

**Providing support for pregnant employees**

Parental leave policies have been a standard part of benefits packages for some time. But supporting employees through pregnancy can include more than just coordinating coverage for their leave and creating a return-to-work plan. Fertility benefits like Carrot also include resources for a healthy pregnancy — many of which are not a standard part of care they receive from their OB/GYN.

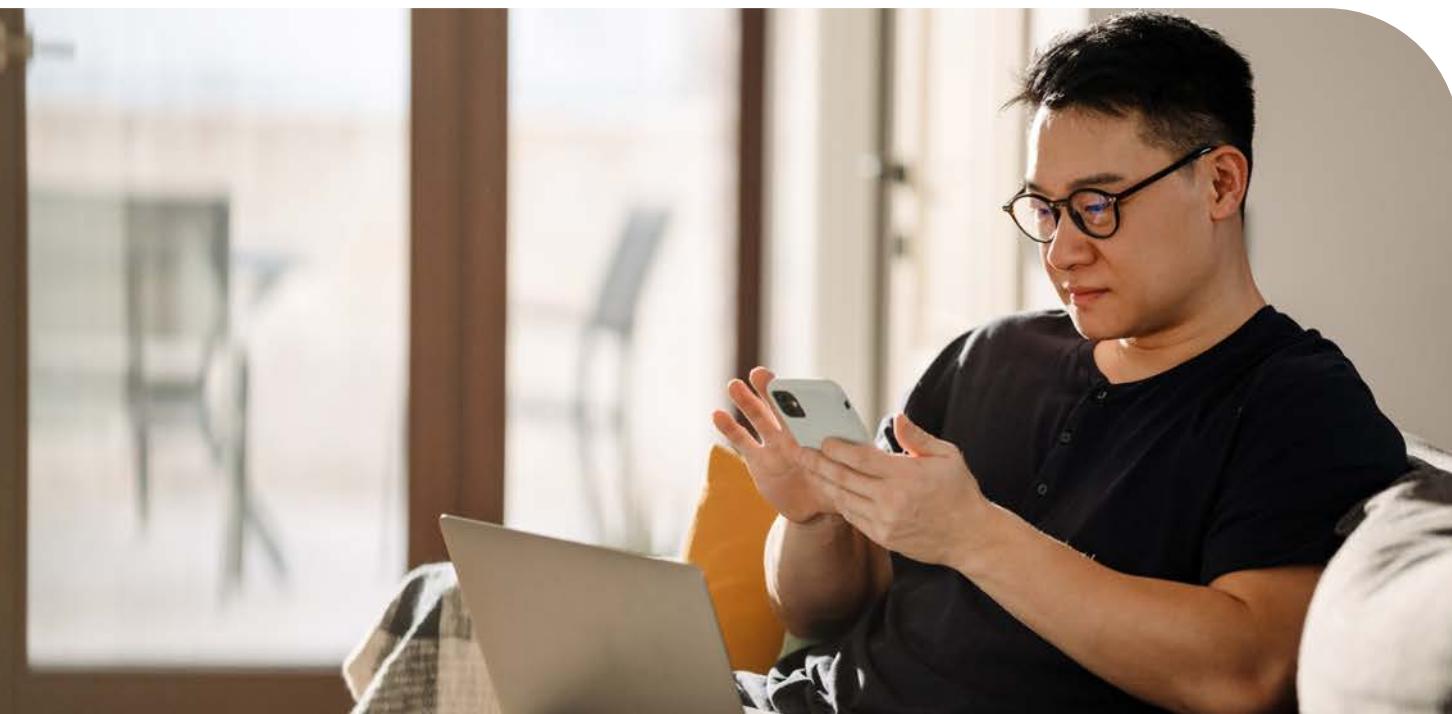
When an employee lets you know about their pregnancy, consider asking if they're aware of the resources available through your fertility benefit.

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Providing support for employees going through menopause or low T

The senior leaders at many companies are often the ones navigating hormonal changes, which may make broaching the subject feel intimidating. However, it's important to remember that these employees are going through changes that they may feel embarrassed or reluctant to discuss with you. Age-inclusive and gender-affirming fertility healthcare benefits like the ones offered through Carrot help end the stigma associated with hormonal health and offer resources to educate, build community, and connect people with the right care.

If an employee shares more about their challenges with menopause or low T, or any obstacles related to accessing GAC, consider asking if they're aware of the support available through your fertility benefit.



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Promoting your company's policies

Finally, one of the best ways to support your employees is to make them aware of the employer-sponsored benefits that are available to them.

In this section, we'll share tips on how to promote your company's hormonal health, fertility, and family-building benefits.



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Familiarize yourself with the company's hormonal health, fertility, and family-building benefits

For non-HR managers

By familiarizing yourself with your organization's offerings, you can more easily point employees in the right direction. Some people may be nervous to go directly to the HR team and ask for resources, so having you as the middle person can help alleviate their anxiety and increase the chances that they'll access the care they need. Employees may also find comfort knowing they can get personalized, confidential guidance directly from the company's fertility benefits provider instead of their manager or HR.

While you don't need to have a thorough understanding of every nuance of your company's fertility benefit, it's helpful to know what fertility and family-building journeys your benefit supports in general. For example, someone might not realize that adoption support is available through Carrot, as well as support for fertility treatments and hormonal health.

For HR teams

Chances are, if you're on the HR team, you're familiar with your company's general benefits offerings. For more detailed questions about fertility and family-building coverage, don't feel like you need to answer specific questions — direct employees to your vendor for support.



Being a supportive leader

As a manager, you can play a pivotal role in your employees' fertility healthcare or family-building journeys. By giving them the flexibility, support, and resources they need for their unique journeys, you can help them have a less stressful, more positive fertility. If you're curious to learn how Carrot can support the lifelong fertility needs of your employees, [get in touch](#).

If your company already provides Carrot, connect with your Customer Success Manager for support at any time.

About Carrot

Carrot Fertility is the leading global fertility and family-building platform providing care for everyone, everywhere. Trusted by more than a thousand multinational employers, health plans, and health systems, Carrot's comprehensive clinical program delivers industry-leading cost savings for employers and award-winning experiences for millions of people worldwide. From maternity through menopause and pre-pregnancy through parenting, Carrot is dedicated to expanding access and improving outcomes. Carrot empowers members with compassionate, personalized, and inclusive support.

Carrot has received national and international recognition for its pioneering work, including Best Diversity, Equity, & Inclusion Product from the Anthem Awards, Fast Company's Most Innovative Companies, CNBC's 100 Barrier Breaking Startups, and more. Carrot is regularly featured in media reporting on issues related to the future of work, women in leadership, healthcare innovation and diversity, equity, and inclusion, including MSNBC, The Economist, Bloomberg, The Wall Street Journal, CNBC, National Public Radio, Harvard Business Review, and more.

Carrot teams span more than 40 states across the United States and dozens of countries around the world. Carrot has received numerous workplace awards, including Fortune's Best Workplaces in Healthcare, Quartz's Best Companies for Remote Workers, and Great Place to Work and Age-Friendly Employer certifications. Learn more at carrotfertility.com.