

Reproductive Health Policy



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Policy Overview

An Post's Reproductive Health Policy provides a framework for supporting employees through diverse reproductive health experiences, including menstrual health, pregnancy loss, fertility, surrogacy, and male reproductive health. It sets out leave entitlements, confidentiality standards, and practical supports designed to promote employee health, wellbeing, and inclusion.

The policy applies to all employees and aims to foster a respectful and stigma-free workplace. Managers are responsible for ensuring flexibility, confidentiality, and fair access to resources, and employees are invited to engage with available supports and help build a workplace that prioritises fairness and care.

1. Introduction

1.1 Purpose

An Post is committed to creating an inclusive workplace where everyone feels accepted, supported, and valued, and where all employees experience a sense of belonging. We strive to create a work environment where diversity is appreciated, employees are empowered to reach their full potential, and where access to opportunities and career development are available to all.

1.2 Commitment

Reproductive health is multifaceted and can significantly influence personal wellbeing, workplace participation, and career progression. This policy affirms our commitment to supporting employees through a diverse range of health experiences. Employees with needs related to any of these areas will receive equitable support and confidentiality.

1.3 Inclusivity

This commitment applies to all employees, including those who are transgender, non-binary, or have diverse gender identities. Our goal is to provide equitable access to resources and information, and to build a workplace free from stigma, discrimination, and gender-related barriers.

1.4 Manager Guidance

Managers are guided to offer informed, respectful support, and the policy acknowledges that reproductive health needs vary for each individual. Examples provided below are not exhaustive, and other needs will be considered on a case-by-case basis. Employees are encouraged to seek appropriate medical advice and support when necessary.

1. Introduction Continued

1.5 Reproductive Health Conditions: Scope of Policy

Category	Examples
Menstrual & Reproductive Health	<ul style="list-style-type: none">• Menstrual health (e.g. dysmenorrhea, heavy bleeding)• Chronic reproductive conditions (e.g. endometriosis, polycystic ovary syndrome (PCOS), adenomyosis)
Pregnancy & Fertility	<ul style="list-style-type: none">• Pregnancy loss (miscarriage, stillbirth, ectopic, molar pregnancy, termination for medical reasons)• Fertility challenges and assisted treatments (e.g. IVF, IUI, egg/sperm preservation)• Surrogacy
Reproductive Health (Male)	<ul style="list-style-type: none">• Sperm health (quality, mobility & morphology)• Varicocele (enlarged veins in the scrotum), reproductive tract blockages

1.6 This policy has been developed in collaboration with the An Post Group of Unions. It builds on our existing **Menopause Support Toolkit** and aligns with An Post's broader Diversity, Equality & Inclusion (DEI) strategy, and overall employee wellbeing.

2. Scope and legislative framework

2.1 Scope

This policy is designed to support:

- **Employees** directly experiencing reproductive health issues, including those outlined in **Section 1.5**.
- **Partners** of those experiencing reproductive health issues.
- **Managers**, who play a critical role in fostering a supportive work environment and responding appropriately to health-related disclosures.
- **All colleagues**, to help build a culture of understanding, respect, and inclusion across An Post.

2. Scope & legislative framework Continued

2.2 Alignment

In alignment with An Post's broader approach to employee wellbeing, this policy complements existing statutory and non-statutory leave entitlements, as outlined in the [Work Life Balance Initiatives wallchart](#). This policy should be read in conjunction with all other relevant employee policies to ensure a cohesive, inclusive, and supportive framework.

2.3 Legislative Frameworks

This policy aligns with the following key legislative frameworks:

2.3.1 Employment Equality Acts 1998-2015

These Acts prohibit discrimination in employment on nine grounds: gender, family status, civil status, sexual orientation, religion, age, disability, race, and Membership of the Traveller Community. Under this legislation, An Post is legally required to:

- Ensure equal access to employment, promotion, and training opportunities
- Provide reasonable accommodations for health-related needs
- Prevent harassment, sexual harassment, or victimisation related to gender or reproductive health.

2.3.2 Safety, Health, and Welfare at Work Act 2005

This Act places a duty of care on employers to ensure the health, safety, and welfare of all employees. In the context of reproductive health, this includes:

- Providing a safe and supportive working environment for employees managing chronic conditions or undergoing fertility treatments
- Conducting risk assessments and making adjustments for pregnant employees or those recovering from pregnancy loss
- Ensuring access to appropriate facilities and rest areas.

3. Confidentiality and Privacy

An Post is committed to safeguarding employee privacy in all discussions related to reproductive health needs. All personal information will be handled confidentially, in line with GDPR and An Post's Data Protection Policy.

To support this commitment, the following principles apply:

- Employees are encouraged to speak with their line manager, if comfortable, to access support and practical accommodations. Alternatively, a referral to Occupational Health can be requested for confidential advice and support related to any reproductive health issues.
- Information will only be shared on a need-to-know basis and with the employee's consent. Health records will be managed exclusively by the relevant HRBP or Occupational Health. Managers must not request or retain any medical documents; all health-related documentation must be submitted directly to the relevant HRBP or Occupational Health only.
- Managers and colleagues are expected to handle conversations with professionalism, respect and discretion. Maintaining confidentiality is essential and any breach may lead to disciplinary action.
- Managers will receive training on this policy and reproductive health awareness to ensure informed, respectful, and confidential support.

4. Menstrual & Reproductive Health

4.1 Menstruation & Menstrual Health

Menstruation is a natural and recurring biological process experienced by many people.

Menstrual symptoms can vary significantly in severity and may impact physical comfort, concentration, and overall wellbeing. Some people may also experience diagnosed menstrual health conditions that require additional support.

Examples of menstrual health conditions include:

- Dysmenorrhea - painful periods.¹
- Menorrhagia - heavy menstrual bleeding.²
- Premenstrual Dysphoric Disorder (PMDD) - a severe form of premenstrual syndrome (PMS)³ that can significantly affect mood and functioning.
- Polycystic Ovary Syndrome (PCOS) - a hormonal condition that can cause irregular or painful periods and is one of the leading causes of infertility.⁴
- Anaemia - often linked to heavy bleeding, increasing the risk of iron deficiency and symptoms such as fatigue, weakness and dizziness.⁵

Symptoms can be severe and may require medical attention.

Employees experiencing these conditions may request workplace supports as outlined in this policy and should seek medical advice where needed.

4.1.1 Available supports

- Free menstrual products are available in all workplace restrooms, restocked regularly and provided discreetly to ensure privacy and accessibility
- Accessible toilet facilities to maintain comfort and dignity
- Access to flexible working arrangements where feasible
- Individualised risk assessments as required by the employee to ensure safety and wellbeing.

¹ One in five women suffer pain severe enough to interfere with daily activities.
<https://eurohealth.ie/policy-brief-women-and-menstruation-in-the-eu/>

² One in four women experience heavy menstrual bleeding.
<https://eurohealth.ie/policy-brief-women-and-menstruation-in-the-eu/>

³ Estimated to affect between 3 - 8% of women
<https://www.frontiersin.org/journals/psychiatry/articles/10.3389/fpsy.2024.1363875/full>

⁴ PCOS affects between 6 - 10% of women of reproductive age in Ireland
<https://irishpracticenurses.ie/wp-content/uploads/2021/09/Polycystic-ovary-syndrome.pdf>

⁵ Anaemia affects approximately 12% of women aged 15-49 in Ireland
<https://www.indexmundi.com/facts/ireland/prevalence-of-anemia>

4. Menstrual & Reproductive Health Continued

4.2 Chronic Reproductive Conditions

Chronic reproductive and pelvic health conditions often involve persistent pain, fatigue, and fluctuating symptoms, many of which may not be visible to others. These conditions can significantly impact physical, emotional and professional wellbeing.

Examples of chronic reproductive conditions include:

- Endometriosis - where tissue like the lining of the womb grows outside the uterus, often causing severe pain and fatigue
- Polycystic Ovary Syndrome (PCOS) - a hormonal disorder that can cause irregular periods, pain, metabolic complications, and fertility challenges
- Adenomyosis - where the inner lining of the uterus grows into the muscle wall, leading to heavy bleeding and pain
- Fibroids - non-cancerous growths in the uterus that can cause discomfort, pressure, or heavy periods
- Pelvic Inflammatory Disease (PID) - a chronic infection that can cause long-term pelvic pain and fertility issues

Employees experiencing these conditions may request workplace supports as outlined in this policy and should seek medical advice where needed.

4.2.1 Available Supports

Employees experiencing these conditions may request temporary or ongoing accommodations to support their health, wellbeing, and productivity. These may include:

- Flexible working hours or adjusted shift patterns
- Remote or desk-based work during symptom flare-ups where feasible
- Modified duties for physically demanding roles, such as:
 - Temporary reassignment to lighter tasks
 - Reduced walking or lifting requirements
 - Additional rest breaks during shifts
- Access to quiet or rest areas where feasible, practical and available

All accommodations will be considered in collaboration with the employee, their manager, HR/Occupational Health, and/or Trade Union Representative with full respect for privacy and operational feasibility.

5. Reproductive Health Challenges

5.1 Pregnancy Loss

5.1.1 Overview

Pregnancy loss - whether through miscarriage, stillbirth, ectopic pregnancy, molar pregnancy, or termination for medical reasons - is a deeply personal and often devastating experience. An Post is committed to supporting employees and their partners⁶ with empathy and flexibility during such a challenging time. We aim to foster a compassionate and inclusive workplace, acknowledging the physical and emotional impact of pregnancy loss regardless of gestational stage.

- **Miscarriage:** The loss of a pregnancy before 24 weeks
- **Stillbirth:** The loss of a pregnancy after 24 weeks
- **Ectopic Pregnancy:** A pregnancy that develops outside the womb
- **Molar Pregnancy:** A rare complication of pregnancy involving abnormal growth of trophoblasts (the cells that form the early placenta and help the embryo implant).

5.1.2 Available Supports

Managers will work with employees in all roles - operational, frontline, and desk-based - to explore supports that may help during recovery or at times of difficulty. Depending on individual needs, this may include:

- Temporary reassignment to less physically demanding duties, if required
- Additional rest breaks, adjusted hours, or time off during the recovery period
- Paid Bereavement Leave, as outlined below under 5.4

Employees may request flexible scheduling or extended leave to support a safe and manageable return to work.

To protect employee privacy, medical documentation should not be provided to managers. Any documentation should be submitted directly to the relevant HRBP or Occupational Health.

5. Reproductive Health Challenges Continued

5.1.3 Pregnancy Loss Before 24 Weeks

- An Post offers up to five days' paid compassionate leave for employees who experience a miscarriage or other form of early pregnancy loss.
- **Partners and Surrogates:** Up to two days' paid leave is available to employees whose partner or surrogate experiences pregnancy loss.

Note: This leave is granted in addition to any statutory entitlements and does not require a medical certificate.

5.1.4 Pregnancy Loss After 24 Weeks (Stillbirth)

- An Post provides up to five days' paid compassionate leave in cases of stillbirth. Employees are entitled to full statutory maternity leave (26 weeks), in accordance with the Maternity Protection Acts 1994 - 2022. (Please note that Maternity Benefit is paid by the Department of Social Protection (DSP) and eligibility is dependent on PRSI contributions. Employees are encouraged to check their DSP eligibility early to avoid any unintended gaps in income).

Maternity leave is available from the first day of service in line with statutory entitlements. No minimum service requirement or completion of probation is needed to access maternity leave.

- Partners are eligible for up to five days' paid compassionate leave and may also avail of statutory paternity leave (two weeks), where eligible, under the Paternity Leave and Benefit Act 2016.

⁶Partner: A spouse, civil partner, or partner – defined as a person with whom the employee has a committed, long-term personal relationship, whether cohabiting or not - of the person experiencing reproductive health challenges.

5. Reproductive Health Challenges Continued

5.2 Fertility Treatments

Fertility challenges and assisted reproductive treatments, such as IVF (In Vitro Fertilisation), IUI (Intrauterine Insemination), and egg or sperm preservation, can be physically, emotionally, and financially demanding. These treatments often involve multiple medical appointments, hormonal treatments, and periods of uncertainty or stress.

Employees undergoing fertility treatment may request time off for:

- Medical consultations, scans, and procedures
- Recovery from treatment or side effects

An Post will provide the following supports::

- Paid leave for fertility-related medical appointments (including eligible partners who are also An Post employees)
- Access to rest facilities where practicable
- Flexible working arrangements, including adjusted hours or remote work where feasible
- Shift swaps or temporary reassignment for operational roles to accommodate treatment schedules.

5.3 Surrogacy

5.3.1 Overview

Surrogacy is a valid and increasingly common path to parenthood. An Post is committed to supporting employees who are intended parents through surrogacy arrangements - domestic or international - with the same flexibility and care afforded to all family-building journeys.

5.3.2 Types of Surrogacy

Surrogacy may involve:

- Gestational surrogacy, where the surrogate carries an embryo created using the intended parents' or donors' genetic material.
- Traditional surrogacy, where the surrogate's own egg is used
- Domestic surrogacy, within Ireland or the UK
- International surrogacy, involving travel and legal coordination across borders.

5. Reproductive Health Challenges Continued

5.3.3 Entitlements

Intended parents through surrogacy are entitled to parental leave equivalent to that offered to biological and adoptive parents, in accordance with An Post's family leave

policies. Flexibility will be provided to accommodate the unique coordination of surrogacy, including:

- Travel to meet the surrogate or attend medical appointments
- Time off for the birth and postnatal bonding
- Legal processes such as parental orders or court hearings

5.3.4 Available Supports

Managers will work with employees in all roles - operational, frontline, and desk-based - to explore supports that may help them during key stages of the surrogacy process. Depending on individual needs and the nature of the role, this may include:

- Accommodating time off for important stages of the surrogacy journey
- Temporary reassignment to lighter or alternative duties, where operationally feasible
- Flexible scheduling to support appointments or recovery needs

Desk-based employees may also request remote working arrangements or adjusted hours during critical phases of the surrogacy journey.

5. Reproductive Health Challenges Continued

5.4 Leave Entitlements (available from Day 1 of service)

Type of Leave	Duration	Eligibility	Certification Requirements	Key Notes
Pregnancy Loss Leave	Up to five days' paid leave per calendar year.	Employees experiencing pregnancy loss (including miscarriage, ectopic pregnancy, molar pregnancy, or termination for medical reasons).	No medical certificate required for up to two consecutive days.	Full or half days allowed; Confidential; Recorded as Bereavement Leave; Applies only to the person who was pregnant. Additional to statutory sick leave.
Pregnancy Loss Leave for Partner / Surrogate	Up to two days' paid leave per calendar year.	Non-primary caregiver, partner of the person experiencing the loss, or intended parent in surrogacy.	No medical certificate required for up to two consecutive days.	Confidential; Recorded as Bereavement Leave.
Fertility Treatment Leave ⁷	Up to ten days' paid leave per calendar year.	Employees undergoing fertility treatment (e.g. IVF, IUI, egg/sperm preservation).	No medical certificate required for up to two consecutive days. For leave beyond two consecutive days, a letter from Fertility Clinic or Specialist is required. ⁸	Full or half days allowed; Recorded as Special Leave; Confidential; Supports physical and logistical needs. Signpost to specialist services & EAP.
Fertility Treatment Leave for Partner	Up to five days' paid leave per calendar year.	Partners supporting an employee undergoing fertility treatment.	No medical certificate required for up to two consecutive days. Thereafter, letter from Fertility Clinic or Specialist is required. ⁸	Full or half days allowed; Confidential; Recorded as Special Leave; Flexible for appointments & recovery.

⁷See also: Retrospective Fertility Treatment Leave at 5.6

⁸For fertility treatment leave beyond two consecutive days, employees must provide:

- Letter from a fertility clinic or specialist confirming:
- Treatment is underway (employee or partner)
 - Approximate timeframe or number of appointments (no detailed medical history required)

Submission guidelines:

- The letter should be sent confidentially to the relevant HRBP or Occupational Health, not line managers.

5. Reproductive Health Challenges Continued

Surrogacy Preparation Leave Entitlements				
Type of Leave	Duration	Eligibility	Certification Requirements	Key Notes
Primary caregiver	Up to ten days' paid leave per calendar year for preparatory arrangements.	Employees who are the primary intended parent in a surrogacy arrangement.	Supporting documentation confirming the surrogacy arrangement and intended parent status (legal or medical), handled confidentially by HR.	Full or half days allowed; Confidential; Recorded as Special Leave; Supports medical, legal, and travel needs. Applies regardless of surrogacy location.
Supporting caregiver / partner	Up to two days' paid leave per calendar year.	Employees who are supporting caregivers or partners in a surrogacy arrangement.	Same documentation required as above.	Full or half days allowed; Confidential; Recorded as Special Leave; Flexible for appointments and support.

Surrogacy Leave Entitlements (Available from Day 1 of service)				
Type of Leave	Duration	Eligibility	Certification Requirements	Key Notes
Primary caregiver	24 weeks' fully paid leave commencing on the date of birth (DOB) of the child. Additional unpaid leave may be available upon request.	Employee who is the primary intended caregiver in a surrogacy arrangement.	Supporting documentation confirming the surrogacy arrangement and intended parent status (legal or medical), handled confidentially by HR.	Recorded as Special Leave; Minimum four weeks written notice before the due date of birth of the child is required; Additional unpaid leave may be requested.
Supporting caregiver/partner	Two weeks' fully paid leave	Employee who is the supporting caregiver or partner in a surrogacy arrangement.	Same documentation as is required above.	Recorded as Special Leave; Minimum four weeks' written notice before due date.

5. Reproductive Health Challenges Continued

5.5 Leave Notification and Confidentiality

Employees are expected to notify their manager or HR Business Partner (HRBP) of their intention to take Fertility Treatment or Surrogacy Leave at the earliest opportunity, in accordance with standard absence-reporting procedures. To protect employee privacy, all health-related records are managed confidentially by the relevant HRBP or Occupational Health only.

5.6 Retrospective Fertility Treatment Leave

Fertility treatment is a deeply personal journey. Employees may not wish to disclose their treatment plans, particularly due to emotional uncertainty involved or concerns about signalling a potential future maternity or paternity leave.

To support privacy and flexibility:

- Fertility Treatment Leave can be applied for retrospectively, within a reasonable timeframe (within 3 months), if the employee prefers not to disclose treatment in advance.
- Employees may request to reclassify previously taken annual leave or unpaid leave as Fertility Treatment Leave.
- This option is available regardless of the outcome of the treatment - whether it is successful, not progressing, or ongoing.
- No medical certificate is required for up to two consecutive days.
- All requests will be managed confidentially by the relevant HRBP or Occupational Health **only**.

This approach ensures that employees can access support on their own terms, without needing to disclose sensitive information prematurely.

6. Reproductive Health (Male)

6.1 An Post recognises that reproductive health includes conditions and treatments affecting sperm health and male reproductive systems. Employees may experience challenges such as:

- **Sperm health** (quality, mobility, and morphology)
- **Low sperm count** (oligospermia)
- **Hormonal imbalances** affecting fertility
- **Varicocele** (enlarged veins in the scrotum)
- **Reproductive tract blockages**
- **Post-surgical recovery** (e.g., vasectomy reversal)

Employees with these challenges are entitled to the same level of support and confidentiality as all other reproductive health experiences. Leave entitlements for fertility-related appointments and procedures are outlined in the Fertility Treatment Leave section. Managers are expected to provide flexibility for medical appointments, maintain strict confidentiality, and foster a workplace free from stigma or discrimination.

7. Roles and Responsibilities

7.1 Management Responsibility

7.1.1 Manager Supports

To help managers respond sensitively and appropriately to reproductive-health-related disclosures, An Post will provide a short, on-demand podcast available to all people managers. The podcast will offer practical guidance on understanding the impact of reproductive health challenges and supporting employees with empathy and care in the workplace.

Managers are encouraged to listen to this resource to help them feel confident providing sensitive support and directing employees to the relevant HRBP or Occupational Health service where appropriate.

In line with Health and Safety Authority (HSA) recommendations, managers will be trained to foster a safe, supportive work environment, apply risk assessments and reasonable accommodations, and maintain confidentiality while meeting health and safety obligations.

7. Roles and Responsibilities Continued

7.2 Employee Responsibility

7.2.1 Communication

Employees are expected to communicate any health-related needs to their line manager or HR promptly and in line with standard absence and accommodation procedures.

7.2.2 Workplace Conduct

Employees are expected to contribute to a respectful and inclusive workplace by treating colleagues affected by reproductive health issues with dignity, empathy, and understanding. Participation in relevant training or awareness initiatives is encouraged to help foster a more informed and supportive organisational culture.

8. Additional Supports

8.1 An Post is dedicated to ensuring that all employees have access to the supports they need to manage their health and wellbeing with confidence. In addition to leave entitlements, the following resources are available:

8.2 An Post Occupational Health & Support Services (OHS)

The team's email address for general queries is ohsreferrals@anpost.ie
Within OHS there are two disciplines:

- (i) **Occupational Health Advisors** provide specialist advice and support in areas of work-related wellbeing. These include sick leave management, rehabilitation, health promotion, and health screenings.
- (ii) **Occupational Support Specialists** assist employees in managing personal difficulties, which, if left unattended, may adversely affect their work performance and/or attendance. They offer confidential, unbiased support for issues such as:
 - Mental health and stress
 - Addictions
 - Retirement and deployment
 - Bereavement and trauma
 - Bullying and harassment
 - Sexual harassment

8. Additional Support Continued

8.3 An Post Employee Assistance Programme (EAP)

This support service offers counselling, mental health resources, and guidance for personal or work-related challenges. It is a free, confidential support available to An Post employees, their partners, and dependent children over the age of 16.

Freephone 24/7/365: 1800 903 542

<https://anpost.spectrum.life/eap>

Organisation Code: AnPost

8.4 Return-to-work coaching

Employees taking maternity leave or returning from it can access up to three complimentary coaching sessions. These sessions are designed to support the transition back to work, address work-life balance, and maintain career momentum. Coaching is confidential and can be requested through HR.

8.5 Counselling Support

Employees experiencing reproductive health challenges—such as pregnancy loss, fertility treatment, surrogacy, or chronic conditions—can access confidential counselling through An Post's Employee Assistance Programme (EAP).

Where additional support is needed, An Post will fund up to three counselling sessions with a qualified external counsellor.

To arrange counselling, employees can contact HR or the EAP service directly.

8.6 Confidentiality

All support services are provided in line with GDPR and An Post's Data Protection Policy. Information will only be shared on a need-to-know basis and with the employee's consent.

9. Monitoring and Review

9.1 Policy Review

This policy and its associated leave entitlement will be monitored and reviewed in association with the Group of Unions on a regular basis to ensure alignment with employee needs, best practice, and legislative changes. In any event, the policy will be reviewed every two years, or sooner if legislation changes.

9.2 Collective Agreement

The An Post Reproductive Health Policy is a collective agreement registered with the Joint Conciliation Council and any amendments will be made through that forum.

9.3 Alignment with DEI Strategy

This policy forms part of An Post's broader Diversity, Equity & Inclusion (DEI) strategy. All DEI policies are developed in collaboration with our union partners and publicly available at anpost.com. Related policies include:

- Menopause Support Policy
- Disability Inclusion Policy
- Reasonable Accommodation Policy
- Dignity at Work Policy
- Domestic Violence Policy
- Mental Health Support Policy
- Equality, Diversity & Inclusion Policy
- Maternity Policy and Procedures
- Statutory Leave Available to Parents
- Non-Statutory Leave Available to Parents

10. Appendix (a) Glossary

(a) Quick reference glossary

Confidentiality: Your health information will be treated with respect and kept private, shared only when necessary and with your consent.

Fertility Treatment: Medical care to assist with conception, such as IVF (in vitro fertilization) or IUI (intrauterine insemination).

Leave Entitlements: Types of leave available for reproductive health needs, including fertility treatment, surrogacy, and pregnancy loss.

Menopause: The natural life stage marking the end of menstrual cycles, often accompanied by symptoms such as hot flashes and other hormonal changes.

Menstrual Health: Conditions and experiences related to menstruation, such as painful periods or heavy bleeding.

Partner: A spouse, civil partner, or partner – defined as a person who has a committed, long-term personal relationship, whether cohabiting or not - of the person experiencing reproductive health issues.

Pregnancy Loss: The loss of a pregnancy, including miscarriage or stillbirth. Compassionate support is available.

Reasonable Accommodation: Adjustments at work to support health needs—such as flexible hours or workspace changes.

Reproductive Health: Wellbeing in matters related to the reproductive system, including hormonal health, fertility challenges, pregnancy, menopause, and other conditions.

Surrogacy: An arrangement where another person carries and delivers a baby for someone else. Support and leave options are available.

Work-Life Balance Initiatives: Programs and supports to help you manage personal and professional responsibilities.

10. Appendix (b) External Supports

(b) External Supports

(i) Reproductive Health & General Support

- **Irish Family Planning Association (IFPA)**
Ireland's leading sexual health charity offering reproductive health services, pregnancy counselling, and education.
<https://www.ifpa.ie>
- **Irish Maternity Support Network (IMSN)**
Free, confidential support and independent information on maternity care and reproductive health.
www.maternitysupport.ie
- **The Menopause Hub**
Ireland's first dedicated multidisciplinary menopause clinic offering medical, psychological, and lifestyle support.
www.themenopausehub.ie
- **Beacon CARE Fertility**
Provides advanced male-fertility testing and support services, including semen analysis and sperm freezing, to assess and optimise sperm health for fertility treatment.
<https://www.beaconcarefertility.ie/treatments-services/tests-treatments/semen-analysis>

(ii) Fertility & Pregnancy Loss

- **National Infertility Support and Information Group (NISIG)**
Offers peer support and resources for individuals and couples experiencing fertility challenges.
<https://nisig.com>
- **A Little Lifetime Foundation**
Supports parents and families whose baby has died or is expected to die, offering counselling and remembrance services.
www.alittlelifetime.ie
- **Pregnancy & Infant Loss Ireland**
Directory of support and advocacy groups for pregnancy loss and perinatal death.
www.pregnancyandinfantloss.ie
- **Irish Fertility Counsellors Association (IFCA)**
Provides emotional support and counselling for individuals and couples on fertility journeys.
www.fertilitycounsellors.ie

10. Appendix (b) External Supports Continued

(iii) Inclusive Fertility Services

- **Beacon CARE Fertility**
Offers fertility options for same-sex female couples (IUI, IVF, Reciprocal IVF), donor sperm programs, and services for trans individuals.
<https://www.beaconcarefertility.ie/treatments-services/donation/lgbtplusoptions/>
- **Sims IVF**
Provides donor sperm programs, Shared Motherhood (Reciprocal IVF), and tailored support for LGBTQ+ couples.
sims.ie

(iv) Surrogacy Guidance

- **Citizens Information - Surrogacy in Ireland**
Provides clear guidance on surrogacy arrangements, legal status, parental rights, and advice on getting legal support.
<https://www.citizensinformation.ie/en/birth-family-relationships/adoption-and-fostering/surrogacy/>

