

Migraine An Advice Guide for Usdaw Reps



What is a Migraine?

Migraine is more than 'just a headache'; it is a complex condition with a wide variety of symptoms. For many people the main feature is a painful headache. Other symptoms include disturbed vision, sensitivity to light, sound and smells, dizziness, nausea and vomiting.

Migraines can be very frightening and may result in the sufferer having to lie still for several hours. The symptoms will vary from person to person and individuals may have different symptoms during different attacks.

Attacks can also differ in length and frequency. Migraines usually last from four to 72 hours and most people are free from symptoms between attacks. Migraines can have a serious impact on work, family and social life.

Migraine is a common neurological condition. It is more prevalent than diabetes, epilepsy and asthma combined – eight million people in the UK have migraine. Severe migraine attacks are classified by the World Health Organisation as among the most disabling illnesses.

At present it is not known what causes migraine; there is no clear diagnostic test and, as yet, there is no cure. However, there are many ways to help manage the condition and lessen its impact.

Supporting Disabled Members in the Workplace

Someone who suffers from migraine may be entitled to the protection of the Equality Act (Disability Discrimination Act in Northern Ireland). This can help them get the right support at work because the Equality Act gives members important legal rights.

Members who suffer from migraine may need the support of their Union rep. Their condition may affect their attendance or performance and this may lead to them being disciplined under capability procedures or absence management policies. They may also find that aspects of their job make their condition worse.

Unfortunately, managers sometimes do not realise that members who suffer from migraine may have rights under the Equality Act.

This leaflet explains what migraine is and how reps can use the Equality Act to help support members with this condition.

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Migraine Attack Phases

Although not all migraines follow the same pattern, there are five common phases of a migraine attack. Not everyone will experience each phase, and they can vary in length and severity:

The warning stage: Signs, such as mood changes, tiredness, an unusual hunger or thirst can happen up to 48 hours before an attack.

The aura: This part of the attack can last up to an hour and usually precedes the headache. Symptoms may include visual disturbances, pins and needles, confusion etc.

The main stage of the attack:

A headache will often be present along with other symptoms, such as nausea and/or vomiting and can last between four and 72 hours.

Resolution stage: The pain gradually eases or may disappear, but feelings of lethargy or being 'washed-out' may remain.

Recovery stage: It can take a few days to fully recover, or for some, recovery can be surprisingly quick.

Migraine Triggers

Although there is no known cause for migraine, it is often possible to identify a trigger or triggers for an attack. Not everyone will experience trigger(s), and different people will be affected in different ways, however some common triggers include:

- Changes in routine.
- Stress.
- Sleep eg too little or too much.
- Hormonal changes in women eg during the menstrual cycle, pregnancy or menopause.
- The environment eg flickering lights, light glare or loud noises.
- Computer screens/VDUs.
- Food-related triggers occur in about 10% of people with migraine:
 - Missing meals.
 - Additives.
 - Alcohol and cheese.
 - Mild dehydration.

Supporting Members With Migraine

Members with migraine may not think of themselves as disabled. However, people with long-term health conditions such as migraine may have rights under the law that can help them stay in work.

The Equality Act has replaced the Disability Discrimination Act (the DDA) in England, Scotland and Wales, but all of the rights members had under the DDA still apply and in some cases have been strengthened. The DDA and not the Equality Act still applies in Northern Ireland.

The advice in this leaflet applies to members across the UK.

A member who experiences migraine is entitled to the protection of the Equality Act if they meet the definition of a disabled person as set out in the Act. If you can show that the member meets this definition, you will have a much stronger case in arguing that the employer should support the member.

Many members with migraine will be covered by the Equality Act, though not all. Very few conditions are automatically covered under the Act and migraine is not one of them. Instead, you have to show that a member meets the definition of a disabled person as set out in the Act. When deciding if a member is covered by the Equality Act (DDA in Northern Ireland), look at the following:

1. Does the member have a physical or mental impairment?

Migraine is clearly a physical impairment so members who suffer from migraine would normally meet this part of the definition.

A person who suffers from migraine may not look disabled and managers may therefore not believe they have anything wrong with them. It is not always obvious that someone is disabled. Nonetheless they can be covered by the Equality Act.

2. Is it more than a trivial condition?

Some members may not find their migraines too much of a problem, but for others they could have a significant impact on their life. You would have to show that the impact migraine has on the member's life is more than trivial. Keeping a migraine diary can help to document the effects of migraine on the member and help with getting a diagnosis from their doctor.

3. Has the condition lasted or will it last for more than a year?

People often live with migraine for several years. The member does not have to be constantly experiencing symptoms and fluctuating conditions such as migraine can be included. Official guidance to the definition of disability published by the Office for Disability Issues makes it clear that impairments with fluctuating or recurrent effects such as migraine can be covered. Where a person has a condition that fluctuates or comes and goes then it is to be treated as continuing throughout if it is 'likely to recur'. Likely in this context simply means it could well happen.

Symptoms of Migraine

4. What would happen if the member stopped taking medication?

This is a key issue for someone with migraine, as medication often helps to manage their condition. Employers sometimes argue that the member is not disabled because their condition is controlled by medication. However, in deciding whether or not someone is disabled they must be assessed as if they were not taking their medication. This means that a person who would meet the criteria for protection under the Equality Act, but whose condition is controlled by medication, would still come under the definition of a disabled person. This is because medication controls the symptoms of migraine, they do not make the condition go away.

5. Does the condition affect the member's everyday life?

If you can show that the member's migraines have a substantial effect on how they carry out normal day-to-day activities, they should meet this definition. Go through the list of common symptoms in this factsheet with the member and mark off which they experience. Then go through a typical day with them and ask how their symptoms affect their day-to-day activities. It does not matter if the effect is not there everyday.

The most common symptoms of a migraine attack include:

- Throbbing headache.
- Sensitivity to light and noise.
- Nausea.
- Vomiting.
- Lethargy.

It can be difficult to diagnose migraine, however a general rule of thumb is that if a headache and/or other associated symptoms prevent you from continuing with normal daily activities it could be a migraine.

If you have two or more of the following symptoms during an attack, it is probable you are suffering from migraine:

- Intense throbbing headache, often on one side of the head only.
- Nausea and/or vomiting and/or diarrhoea.
- Increased sensitivity to light and/or sound and/or smells.
- Visual disturbances such as blind spots, distorted vision, flashing lights or zigzag patterns.
- Other common neurological symptoms you may experience include: dizziness, vertigo, tingling or pins and needles in the limbs, an inability to concentrate, confusion, difficulty in speaking, paralysis or loss of consciousness (in very rare cases).

Reasonable Adjustments

If you can show that the member meets these five criteria they would be entitled to the protection of the Equality Act. If, for a reason relating to their migraines, the member is put at a substantial disadvantage by any aspect of their working environment, job duties or their employer's policies and procedures, their employer falls under a duty to make what are called reasonable adjustments to take account of the member's migraines.

This means that they have to change some aspect of the member's working arrangements to help them stay in or get back to work. The member will be the best judge of what adjustments they need but examples of reasonable adjustments could include:



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- Allowing disabled workers to take additional breaks is one way that an employer can fulfil their duty to make reasonable adjustments. This may be helpful for someone with migraine, as sometimes medication accompanied by a short rest can enable them to carry on with their
- Making a quiet room available, with blinds so the room can be darkened, may also help relieve an attack.
- Changing elements of the member's job to help with avoiding any identified trigger factors at work. For example, it is known that changes to sleep patterns can be a trigger in some people, therefore shift work may increase the likelihood of a migraine attack.
- Many people with migraines are light sensitive so proper maintenance of the lighting system, to try to reduce glare and ensure flickering is minimised, could help to reduce the likelihood of a migraine attack.
- Adjusting sickness absence formula so that absences related to migraine are counted separately and not used to trigger disciplinary action may also be classed as a reasonable adjustment.



The Social vs the Medical Model of Disability

For some time now disabled people have emphasised that it is not so much their disability that prevents them from fully participating in society, but instead it is the way in which society fails to make adjustments for their disability that excludes them.

This emphasis on changing the barriers put up by society, rather than seeing the disabled person as the 'problem', is known as the 'social model of disability'. In other words, disabled people are people with impairments/ health conditions who are disabled by discrimination, exclusion, prejudice and negative attitudes towards disability. Their impairment is not the problem.

The 'medical model' attributes the problems resulting from a disability to medical conditions alone. It concentrates on a person's impairment. Rather than focusing on the barriers society throws up that prevent disabled people from participating equally, the 'medical model' focuses on what disabled people should do to adapt to fit into the world as it is. If they are unable to adapt, the medical model accepts their exclusion.

For example, while a mobility difficulty can have an adverse effect on a person's ability to walk, the fact that the transport system is inaccessible to them has a far greater effect on their ability to get around.

The law is unfortunately rooted in the medical model. It has been rightly criticised for focusing on an individual's impairments and their ability to carry out normal day-to-day activities, rather than on getting rid of the barriers society puts in the way of disabled people.

This leaflet is designed to help understand how the law can support disabled members in the workplace and therefore tends to focus on the medical model.



More Information

Usdaw Nationwide

Wherever you work, an Usdaw rep or official (Area Organiser) is not far away. For further information or assistance, contact your Usdaw rep or local Usdaw office. Alternatively you can phone our Freephone Helpline 0800 030 80 30 to connect you to your regional office or visit our website: www.usdaw.org.uk

You can also write to the Union's Head Office. Just write **FREEPOST USDAW** on the envelope and put it in the post.

Join Usdaw

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What Happens Next

Once we process your application, you will receive a membership card with our Helpline telephone number and a New Member's Pack giving details of all the benefits and professional services available to you.











