

Menopause

For Menopause Champions



**Support and solutions
for you and your employees**



Welcome and Introductions

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Group Agreement



Mobiles off or on silent, please.



We respect each other's views and anything that is shared in our Q & A space is kept **confidential by participants**.



You won't need to do or say anything that makes you feel uncomfortable



Please put any questions into chat or use the raise hand function.

Aims of today's session

- Gain insight into the concept of menopause and the evolving medical history and understanding.
- Explore taboos and stigma and identify the four stages of menopause.
- Understand the influential and causation factors of menopause, including hormones that impact such.
- Identify the common physical, emotional, and psychological symptoms associated with menopause.
- Briefly explore treatment options, including Hormone Replacement Therapy (HRT) and alternative/complementary therapies.
- Explore the impact of menopause on personal and professional relationships.
- Explore discrimination.
- Menopause Champions:
- Case Studies, how to have supportive conversations & self care

Quick Quiz..... (keep a note of your answers, as results at the end of the session)

1.Question: What is the average age at which menopause typically occurs?

1. **A)** 40 years
2. **B)** 50 years
3. **C)** 60 years
4. **D)** 70 years

2.Question: What is the term for the transition period leading up to menopause?

1. **A)** Andropause
2. **B)** Perimenopause
3. **C)** Climacteric
4. **D)** Postmenopausal

3.Question: Which hormone decreases significantly during menopause, leading to symptoms like hot flashes and mood swings?

1. **A)** Oestrogen
2. **B)** Progesterone
3. **C)** Testosterone
4. **D)** Insulin

4.Question: True or False: Menopause automatically weakens bones.

1. **A)** True
2. **B)** False

5.Question: What lifestyle factors can help support bone health during menopause?

1. **A)** Regular exercise
2. **B)** Adequate calcium intake
3. **C)** Vitamin D supplementation
4. **D)** All of the above

**Gain insight into the concept of
menopause and the evolving medical
history and understanding.**

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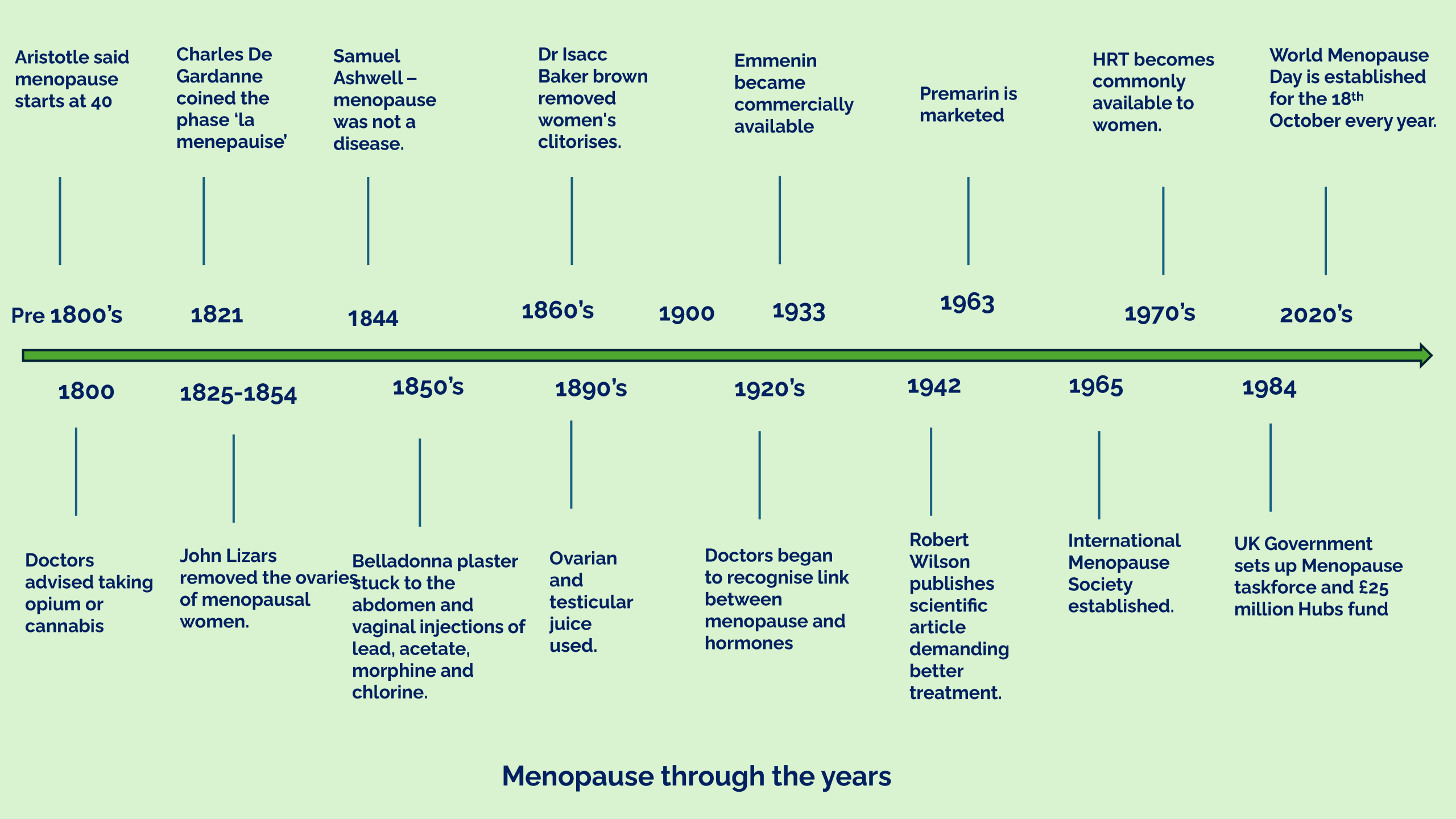
What is Menopause?

The National Institute for Health and Care Excellence (2017), defines menopause as:

"A biological stage in a woman's life when menstruation stops permanently due to the loss of ovarian follicular activity. It occurs with the final menstrual period and is usually diagnosed clinically after 12 months of amenorrhoea."



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**Explore taboos and stigma and identify
the four stages of menopause.**

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Group Discussion

Do you feel that there is still stigma or taboos around menopause?

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Stigma and Taboo

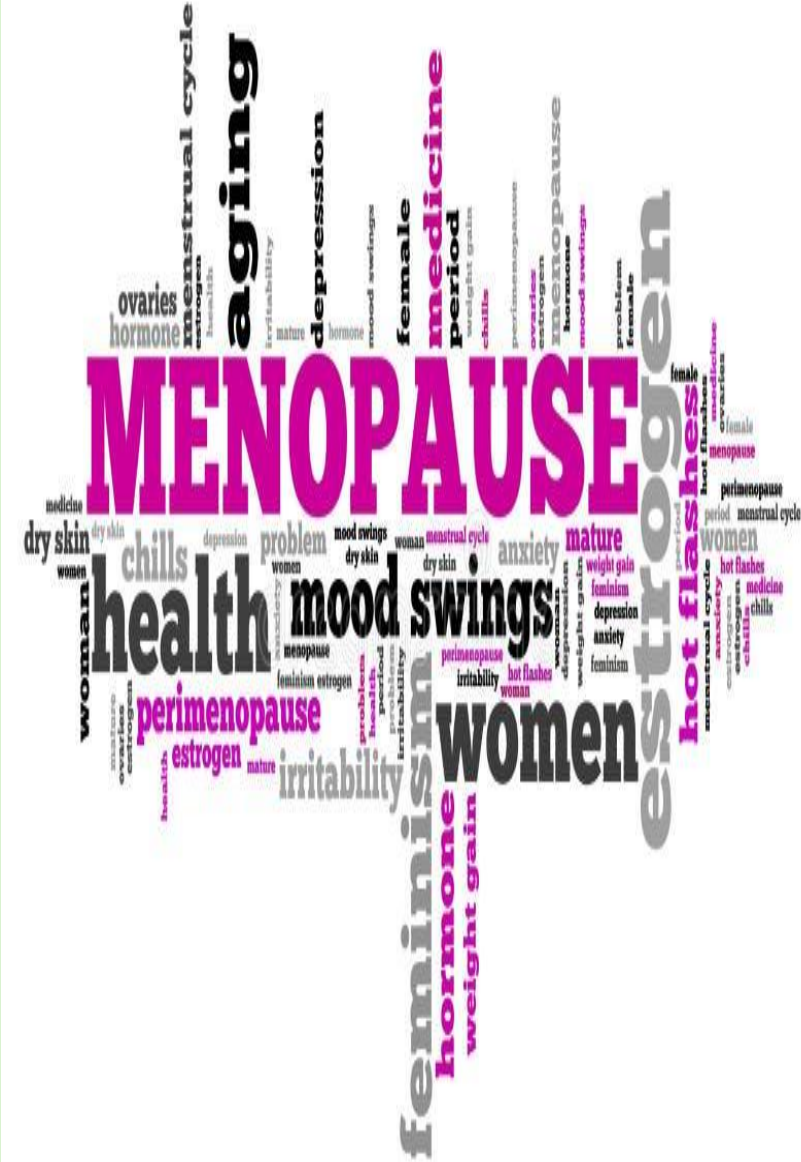
- Silence and lack of open discussion
- Embarrassment
- Ageism and stereotypes
- Negative perceptions of femininity and sexuality
- Workplace challenges
- Cultural and regional variations
- Religious taboos and associations
- Societal impacts
- Lack of Knowledge

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The Stages of Menopause

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Premenopausal	Perimenopause	Menopause	Postmenopause
Age: puberty to mid 40's	Age: mid 40s to menopause	Age: average age is 51	Age: menopause onwards
Symptoms: none	Symptoms: intense	Symptoms: mild to intense	Symptoms: none to mild
Fertility: at its highest (some women may experience fertility issues, and this area of women's health needs further support and discussion).	Fertility: declines rapidly	Fertility: officially ends	Fertility: ended

Understand the influential and causation factors of menopause, including hormones that impact such.

Menopause – Causes and Types

Natural menopause

- Occurs when ovaries naturally decrease their production of oestrogen and progesterone
- No other biological or physiological cause can account for this.

Induced menopause

- Brought on by an unusual event e.g. ovaries damaged by cancer treatment or other medication
- Also occurs when the ovaries are surgically removed.

Menopause is a natural phase in every woman's life, which occurs due to aging. The ovaries run out of their egg supply, stop hormonal production and halt reproductive functions.

Menopause – Causes and Types

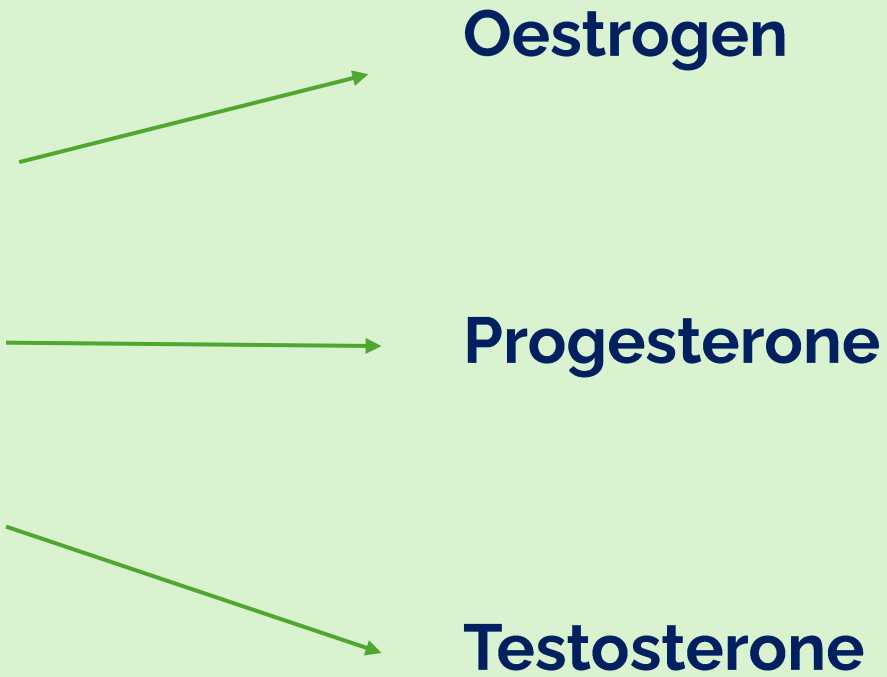
Causes of Menopause

- Aging
- Genetics
- Hysterectomy
- Chemotherapy and Radiation Therapy
- Autoimmune Disorders

Types of menopause

- Natural Menopause
- Surgical Menopause
- Premature Menopause
- Perimenopause

Menopause – The Hormonal Impacts and Symptoms



The Effects of Oestrogen on the Body

Regulates body temperature

Prepares uterus for pregnancy or menstrual cycle

Lowers risk of heart disease by protecting from cholesterol

Causes breast tissue to grow

Enhances memory and libido

Regulates amount of water in the skin and improves collagen

Increases bone strength and density

Lowers blood pressure

(Keay, 2020; Nichols, 2020)



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The Effects of Progesterone on the Body

Acts as a mild antidepressant by regulating certain chemicals in the brain

Signals body to use fat as an energy source

Lowers 'bad' cholesterol

Prepares breasts for lactation

Counteracts overgrowth of uterus and breast tissue

Maintains the proper amount of water in the body

Increases libido

Increases bone density

Prepares uterus for the fertilised egg



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(Keay, 2020; Nichols, 2020)

The Effects of Testosterone on the Body



(Keay, 2020; Nichols, 2020)

Critical for energy levels

Helps with growth, bone health, fertility and libido

Upholds greater skin collagen content

Crucial role in muscle mass and fat distribution

It stimulates production of red blood cells

Impacts metabolic rate

Influences intelligence and ability to acquire knowledge

Menopause and the Brain.



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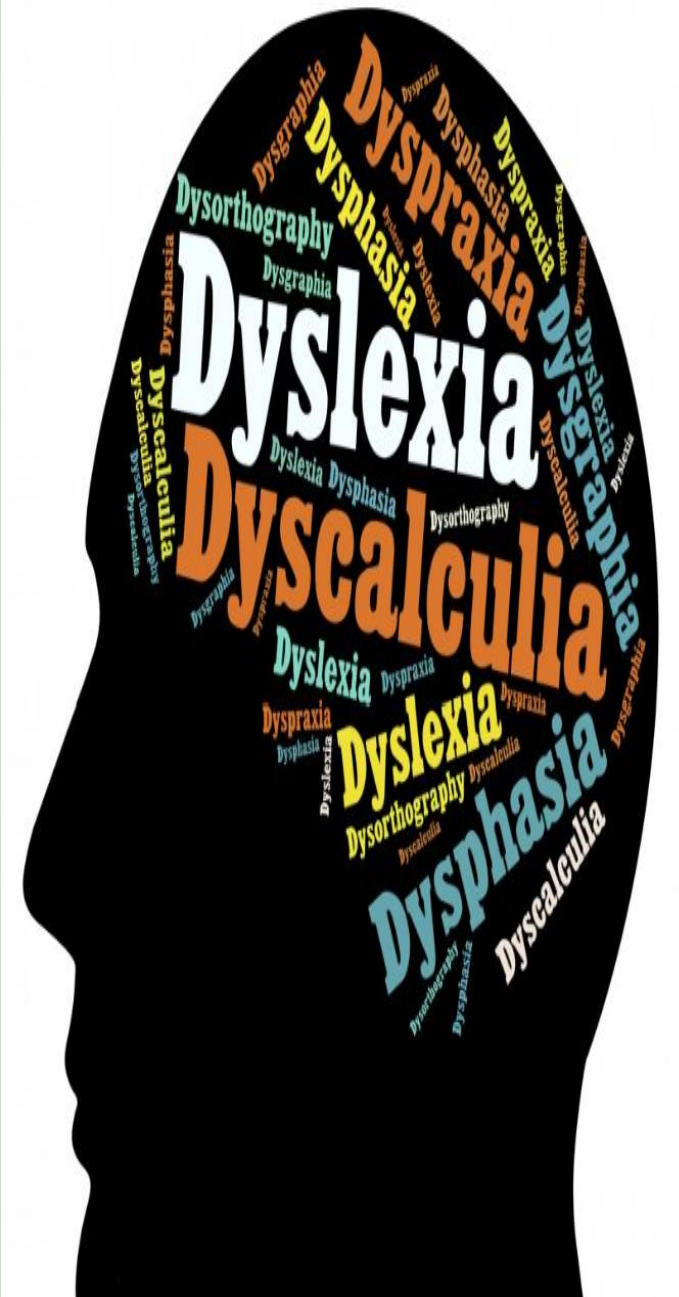
THE BRAIN ANATOMY OF MEN



Neurodiversity and Menopause:

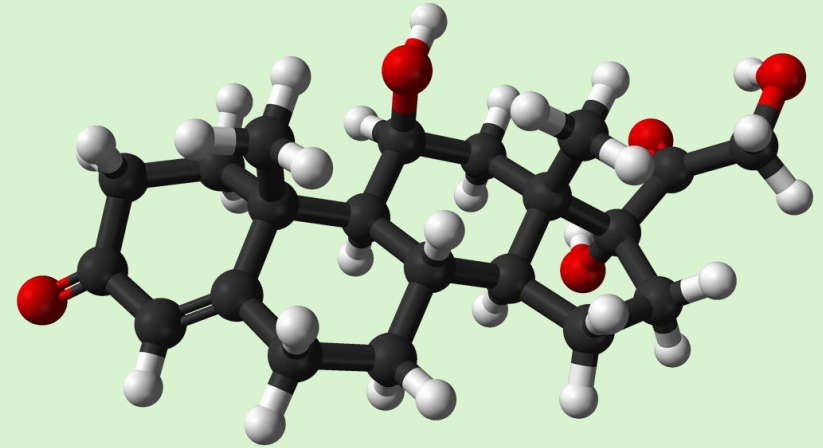
- Increased sensitivity to physical symptoms.
- Common challenges: both Menopause and Neurodiversity
- Overwhelm, due to sensory changes.
- Misdiagnosis or under-recognition of menopause symptoms in neurodivergent individuals
- Greater difficulty with emotional regulation and other common neurodiverse symptoms.

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Trans and Non-Binary Menopause

- Hormonal fluctuations
- Symptoms and challenges
- Healthcare access
- Workplace support
- 121-Line Manager support



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Cultural Considerations

- Race, ethnicity and cultural beliefs can affect a woman's experience of the perimenopause and menopause
- Language barriers and lack of awareness can impact upon women accessing help and treatment
- Symptoms and onset can vary in different ethnicities
- Ethnicity can impact on pre-existing medical conditions such as pre-disposition to weight gain, impact upon vitamin D levels and osteoporosis.
- The impact of cultural beliefs and accessing healthcare.

Dr Maqsuda Zaman, a GP who works in a practice with a significant number of women from various ethnic communities in Greater Manchester and who is a menopause specialist at Newson Health, says:

'Women of Bangladeshi origin tell me menopause is associated with loss of fertility and youth. A patient of Iraqi Kurdish origin also told me it's generally not discussed in her community as women feel embarrassed about getting older and the loss of fertility.'

Balance - Menopause

Identify the common physical, emotional, and psychological symptoms associated with menopause.

Group Discussion

What symptoms do you think may arise during menopause when these hormones are in decline.

Oestrogen	Progesterone	Testosterone
Changes in the pattern of periods	Changes in the pattern of periods	Changes in the pattern of periods
Hot flushes/night sweats / itchy skin	Palpitations	Hot flushes/night sweats
Sleep disturbance/ Fatigue	Anxiety	Sleep disturbance/ Fatigue
Memory lapses / poor concentration	Low self-esteem	Memory lapses / poor concentration
Loss of confidence / Depression	Headaches/migraines	Loss of confidence / Heightened fears
Weight gain / changed body shape	Reduced libido	Anxiety / low self-esteem
Digestive changes / Incontinence	Muscle tension	Muscle aches / joint pain
Electric shocks/ Tingling extremities / brittle nails	New allergies	Loss of motivation/self-esteem
Reduced libido/dizziness/incontinence	Dry, itchy skin	Mood impacts /Irritable/snappy
Muscle tension / cyclical breast pain		Weight gain / changed body shape
Frequent urinary tract infections		Tearfulness / Intrusive thoughts
Vaginal dryness and pain	(NHS, 2022; UK Meds, 2019)	Reduced libido
Burning tongue/gum problems		Hair loss / dry itchy skin

**Briefly explore treatment options,
including Hormone Replacement
Therapy (HRT) and
alternative/complementary therapies.**

Hormone Replacement Therapy	Lifestyle Changes	Non-Prescription Remedies	Behavioural Therapies	Other Medical Treatments
Used to relieve the symptoms of menopause and restore female hormone levels	Dietary adjustments	Phytoestrogens	Cognitive Behavioural therapy (CBT)	Selective Oestrogen Receptor Modulators (SERMS)
Variety of administration methods.	Regular exercise	Herbal Supplements	Counselling	Medication to support side effects.
Can have a variety of side effects	Stress management	Vitamin and mineral supplements	Mindfulness	Prescription medications i.e. Tibolone
Some medical histories where HRT may not be suitable	Giving up smoking	Acupuncture	Stress management	Antidepressants

Hot Flashes

What do they feel like....

A sudden feeling
of heat
spreading
through your
body.

Sweating

Heart
palpitations.

A lack of
concentration.

A red flush
spreading
across your
chest, neck,
face and head.

Feelings of
anxiety.

BUPA.co.uk

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Hot Flushes

What may help.....



Avoid triggers, sometimes caffeine, alcohol, spicy food and stress can trigger.



Lighter fabrics, natural breathable materials and loose styles with layers can assist.



Keep bedrooms cool, layer light bedding with natural fabrics, 100% cotton sheets are cool and comfortable.



Keep a fan in the bedroom / on desk, have a mini battery powered fan or traditional hand-held fan.



Carry a small spray bottle with water to spritz.



If possible, take a lukewarm shower.



Try to lead a healthy lifestyle, can help with other symptoms of menopause too.

Breathing Techniques

Sitali or Sheetali pranayama (cooling breath)



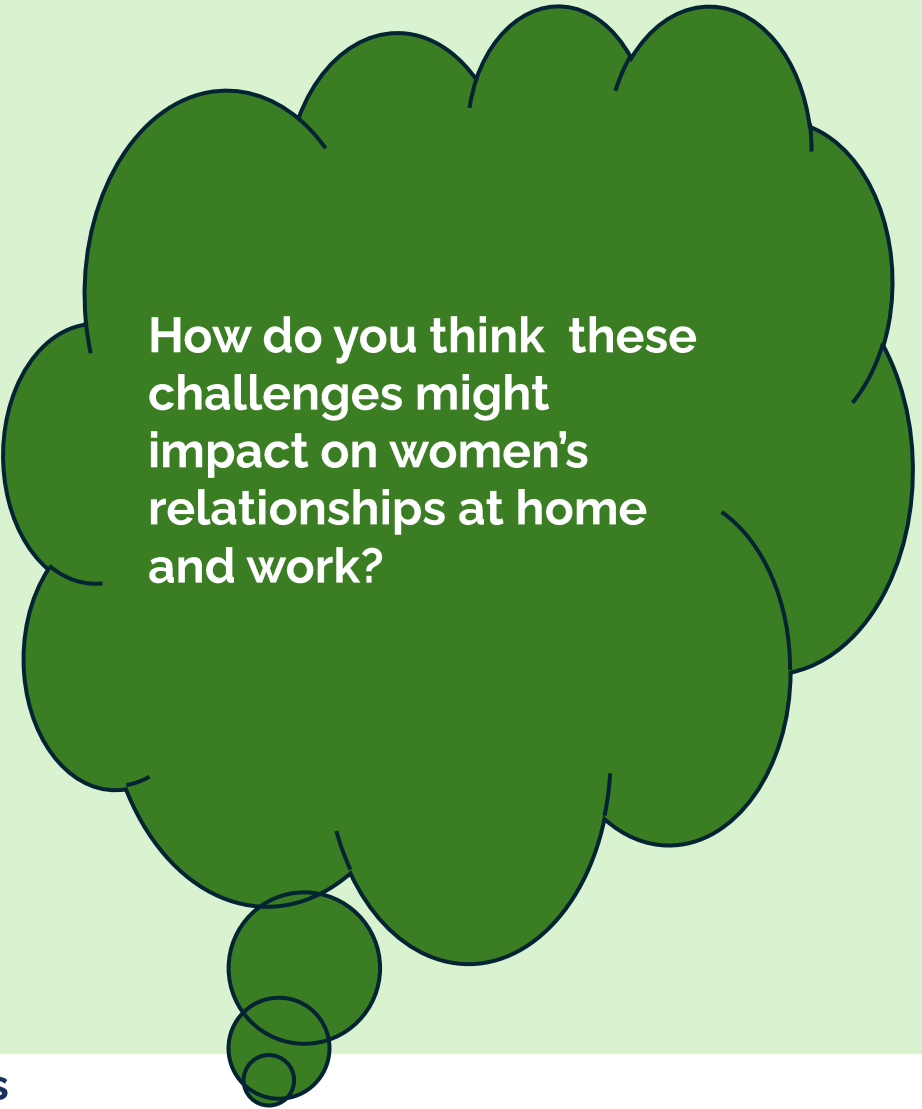
Healthline.com

Break 10 Minutes



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Explore the impact of menopause on personal and professional relationships.



How do you think these challenges might impact on women's relationships at home and work?

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Loved Ones



Friends

Menopause and Relationships.....



Family

Colleagues



Support and solutions
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- Educate yourself
- Communicate openly
- Support healthy lifestyles
- Provide emotional support
- Stay informed
- Look after yourself too!



- Encourage healthy lifestyle and accompany the person
- Stress relief activities
- Be there!

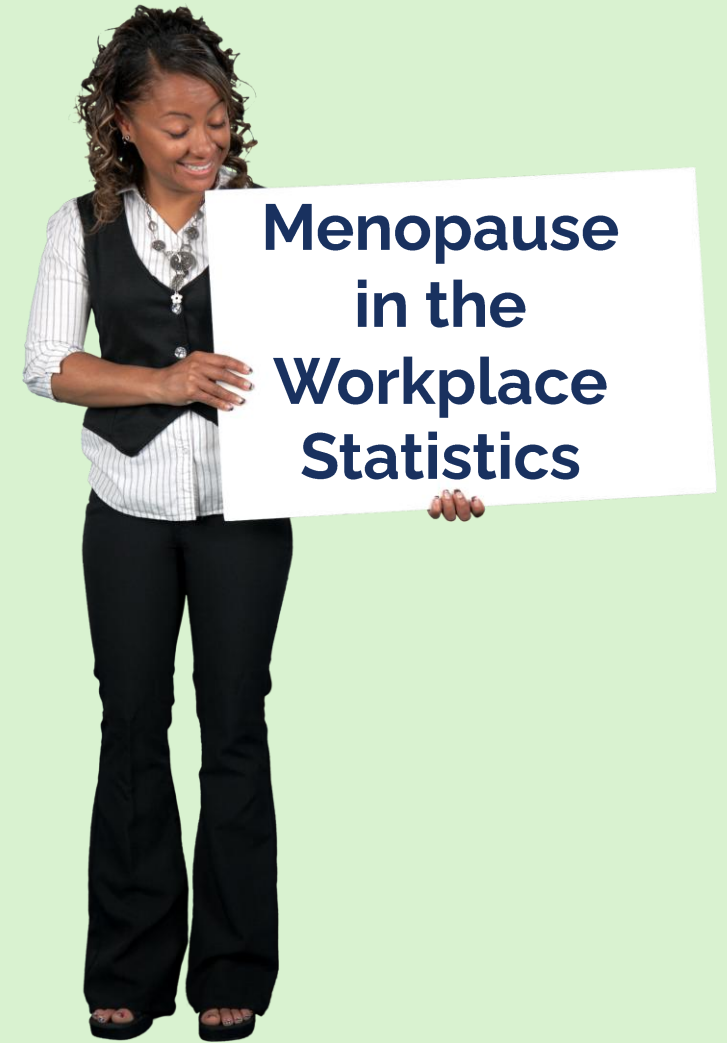
- Support
- Knowledge
- Signposting
- Reasonable Adjustments
- Check ins
- Ask the ?

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Explore discrimination and Identify how to support menopause within the workplace as Champions.

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- 23% of all women in employment in the UK are of menopausal age.
- On average, women miss 3.27 days off work each year, due to menopausal symptoms
- Almost half of these women would not tell their employer the real reason
- Nearly 1 million women have been forced out of the labour market due to menopausal symptoms.
- There is currently no legal requirement for workplaces to have a menopause policy or protect employees experiencing menopause symptoms, however, there are two main areas of relevant law.



- **Severe symptoms are worse for working class women.** 44% of women described three or more symptoms as 'very difficult', and women in a household where the main earner works in semi-skilled or unskilled manual work were more likely than those where they work in managerial roles to have difficulty with physical and psychological symptoms
- Menopause **impacts women's work.** 44% of women said their ability to work had been affected, comprising 18% of women who said that their symptoms currently affected their ability to do their jobs, and 26% in the past. 61% said that they had lost motivation at work due to their symptoms, and 52% said they had lost confidence.
- **Disabled women** are affected more by menopause symptoms. 22% said they had left a job due to menopause symptoms, compared to 9% of non-disabled women





Menopause In the Workplace

The CIPD advises that:

Employers should support people with menopausal symptoms in the same way as they would with any other health condition. Organisations have a responsibility to create a stigma-free environment that encourages open discussion and disclosure; this will encourage women to not suffer in silence and discuss the practical steps needed to support their full engagement and productivity at work.





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Responsibility as Menopause Champions

Menopause and the Law

Equality Act 2010, which protects workers against discrimination

Health and Safety at Work Act 1974, which says an employer must, where reasonably practical, ensure everyone's health, safety and welfare at work

The menopause is not a specific protected characteristic under the Equality Act 2010.

But if an employee or worker is put at a disadvantage and treated less favorably because of their menopause symptoms, this could be discrimination if related to a protected characteristic, for example:

Age/disability/gender reassignment/Sex

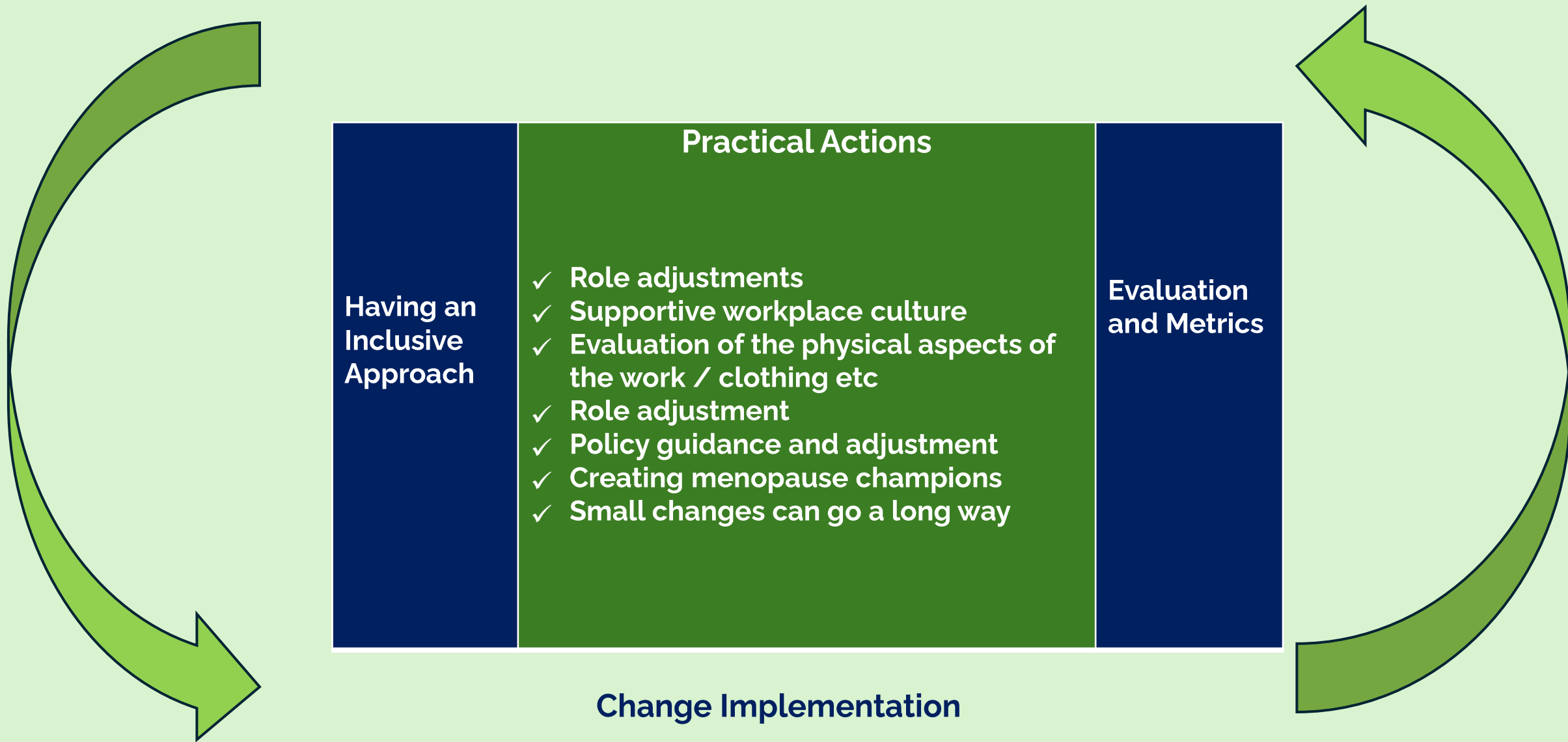
(www.acas.org.uk)

Responsibility as Menopause Champions

Important to understand

- ✓ Who can be affected by menopause
- ✓ How to support your teams to deal with menopause issues sensitively and fairly
- ✓ How the menopause at different stages can impact on staff
- ✓ The potential wider impact on colleagues, carers and those supporting a person during menopause
- ✓ What support your organisation has in place for menopause including policy and adjustments
- ✓ How the law relates to menopause

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Workplace Adjustments	What adjustments are available?	What support is needed?	What are the intended outcomes of the adjustments?
• Identification – individuals may not know which adjustments may be helpful • Implementation Challenges • Consequences – impacts on wellbeing and policy • Support / suggestions in People Leaders Leaflet and Menopause Policy.	• Physical environment and equipment. • Job role and management processes • Social and cultural practice	• Physical mobility and access • Social • Mental health and wellbeing • Cognitive • Sensory • Skill / experience	• Remove barriers to access • Minimise discomfort / distraction • Enhance comfort / focus / performance • Facilitate transitions (into work, through work and across work-life balance)

Further support?

Group Exercise:

Write down 1 or 2 actions/wishes you would like granted, to make your workplace more comfortable/understanding whilst going through the menopause **and place them into chat** (we will forward the key themes to your training team anonymously)

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Cold water
dispensers /
taps

Support for
work/life
balance

Cotton /
relaxed
uniforms

Suitable
washroom
facilities

Desk fans

More frequent
/ longer breaks
when needed

Menopause
champions in
the
workplace

Training and
information
for Line
Managers

Female manager
to speak to if
requested

Flexible working
arrangements to
support attending
appointments.

Peer
support
groups

Maybe a form to
complete, to
support discussions
collaboratively?

(Garlick, 2018; Hardy *et al*, 2017)

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How can we all help?

Menopause – Resources / Websites

- Menopause and Me
- British Menopause Society
- Menopause Matters
- NHS
- Menopause Support
- The British Standards Institute Guide
- The Menopause Charity
- Rock My Menopause
- Wellbeing of Women
- Women's Health Concern
- Daisy Network (premature menopause)
- CIPD Guide

Quiz Results

1. Question: What is the average age at which menopause typically occurs?

- 1. A) 40 years
- 2. B) 50 years
- 3. C) 60 years
- 4. D) 70 years

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3. Question: Which hormone decreases significantly during menopause, leading to symptoms like hot flashes and mood swings?

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4. Question: True or False: Menopause automatically weakens bones.

- 1. A) True
- 2. B) False

5. Question: What lifestyle factors can help support bone health during menopause?

- 1. A) Regular exercise
- 2. B) Adequate calcium intake
- 3. C) Vitamin D supplementation
- 4. D) All of the above

Continuing the journey....

- World Menopause Day
- National Curriculum
- Menopause taskforce
- TV/ Media coverage
- GP curriculum
- Women's health hubs - £25 million transformation fund.
- Workplace involvement makes business sense
- Menopause champions.

(BBC News, 2020; Connolly, 2021; GOV.UK, 2022; McGleenon, 2021; National Today, 2022)

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Break
10 Minutes



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Menopause Champions

Case Studies, Conversations & Self-Care

Aims

- Understand the role of a menopause champion
- Explore case studies and supportive conversations
- Learn self-care strategies for champions
- Signposting



Organisational Benefits of Menopause Champions

- Reducing stigma
- Enhancing employee well-being
- Improving organisational culture
- Staff retention
- A vehicle to support change and highlight potential areas for improvement.



What do you feel are the organisational benefits of having the menopause champion role?

The Role.....

Definition: Supportive peer role in the workplace

Responsibilities: Awareness, safe space, signposting

Skills: Listening, empathy, confidentiality, advocacy

Boundaries: Champions are not clinicians or therapists

Being culturally competent – being aware of culture and its impact on menopause and mental health..



Consider **Your** Frame Of Reference

The structure of associated responses which provide the individual with an overall perceptual, conceptual, affective and action set, which is used to define the self, other people and the world.

Jacqui and Aron Schiff



Values, achievements, place of birth, work, age, gender, socio-economic background, cultural influences, sexuality, education, spirituality, relationships, family situation / size etc, mental health, hobbies/interests, aspirations, likes/dislikes, disability, chronic illness all impact our window on the world.

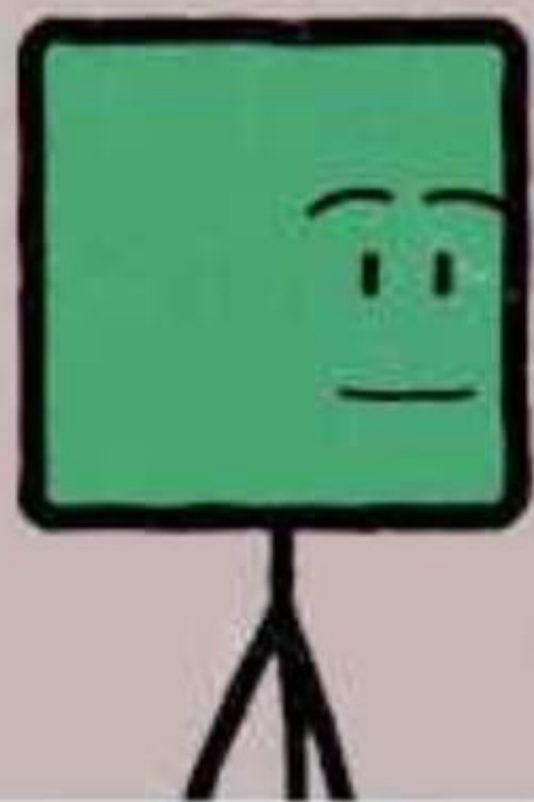
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Skills of a Menopause Champion

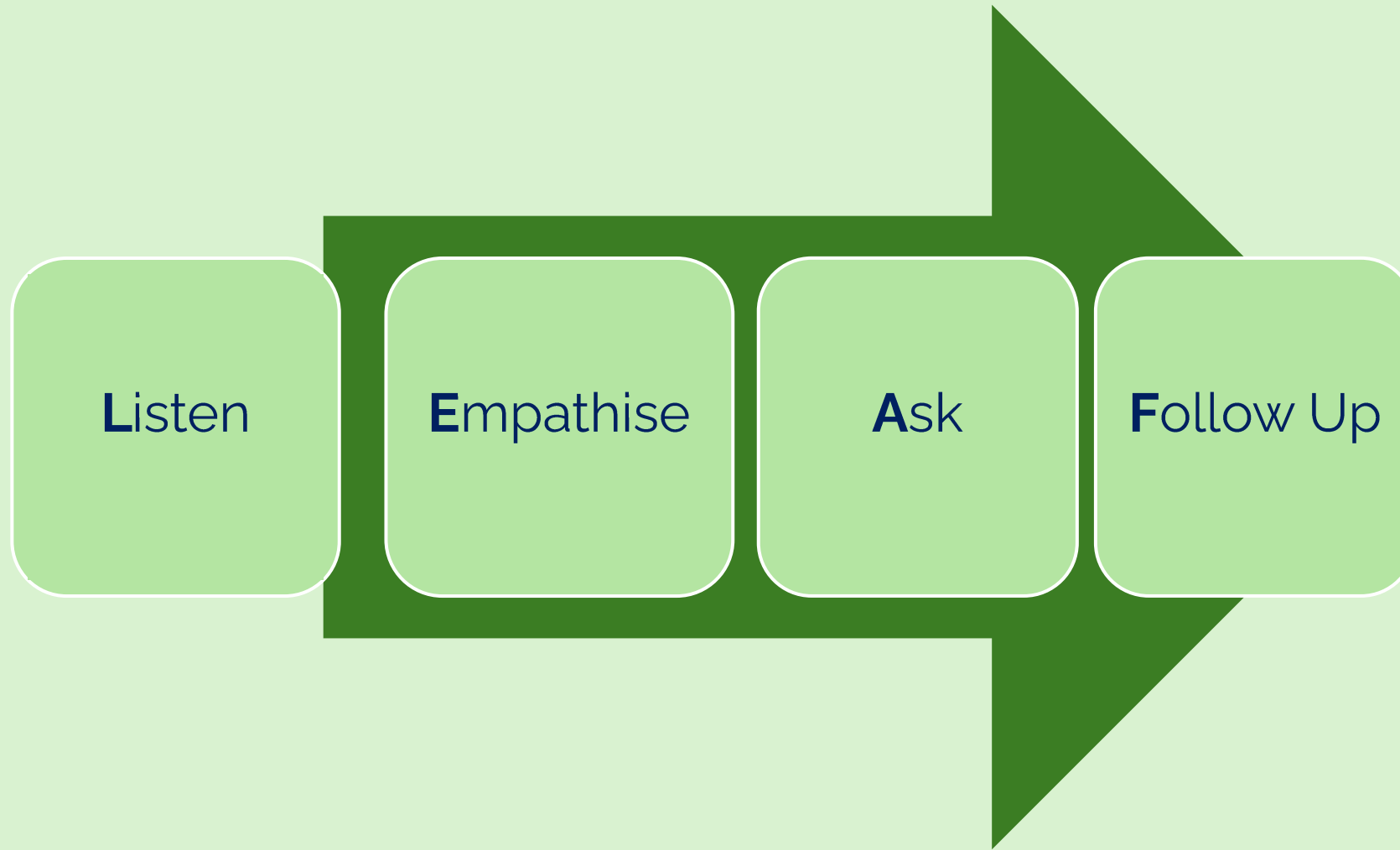


**What do you
consider to be the
most important
skills of a
menopause
champion?**

- ✓ Empathy
- ✓ Communication
- ✓ Advocacy
- ✓ Resourcefulness
- ✓ Collaboration
- ✓ Education
- ✓ Support
- ✓ Active Listening



Supportive Conversations –LEAF Model.



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What not to do in active listening

- Don't make assumptions
- Don't interrupt
- Don't be dismissive
- Don't give advice
- Don't be distracted
- Remember your frame of reference isn't theirs
- Don't overpromise or forget to follow up.



What works for us may not work for other people, so being careful to provide Information, not personal advice.

Boundaries



Time – how much can I offer?



Confidentiality – be clear on what is confidential and its boundaries. (risk)



Skills and information - Am I keeping my knowledge up to date and our resources current?



Supporting your own health and wellbeing.



Not sharing **personal** contact details, use **internal means of communication** to follow up / send resources.



Temperature check yourself -Know when to step back, where needed debrief with peer champions or HR. Access monthly drop-in support where needed. Use team's channel.

**Trigger Warning – we will be
discussing suicide and risk.**



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Confidentiality and Risk

Don't be afraid to discuss suicide – asking about suicidal thoughts does not give people ideas that they don't have already,

- Are you having thoughts of suicide?
- Do you have a plan to end your life?
- Do you have everything you need to carry out your plan?

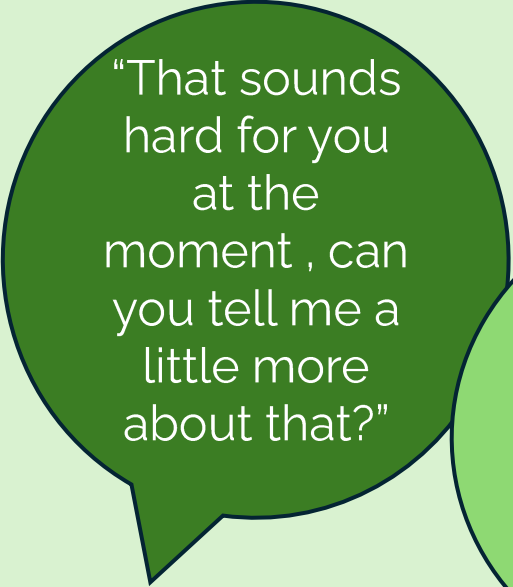
If someone admits to thoughts of suicide, continue listening and ask open questions.

Confidentiality doesn't apply to risk....

Zero Suicide Alliance free training

[ZSA - General](#)

Current Plan
Prior Behaviour
Resources



"That sounds hard for you at the moment, can you tell me a little more about that?"



"I'm going to stay with you until we can get you some support."

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Confidentiality and Risk – how can we help?

Help the person to feel hope and optimism.

Explain that depression is real, well known and common

Feedback to the person that you heard what they said and the feelings they are having

Reassure them that effective help is available and you will support them to access that.

Immediate risk – stay with the person and **contact HR/ LM for support and management.**

Possible Support Resources

- Primary Care/GP
- Stepped Care – Talking Therapies
- Counselling
- EAP
- Local groups
- Charities
- Samaritans - 116 123
- Medication
- Specialist Psychiatric Services (Secondary Care)

Make sure to de-brief yourself with a colleague, your LM, HR or EAP service.

Break 5 minutes



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Case Studies



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Case Study 1: Sarah – Line Manager Support

Background:

Sarah is 48 years old and works as a project manager in a busy team. Recently, she has been struggling with **brain fog**, difficulty concentrating, and frequent **hot flushes** during meetings. She often feels embarrassed and worries her colleagues are noticing. Her workload is suffering, and she is missing deadlines.

Sarah is hesitant to disclose her struggles to her line manager because she fears being judged as “less capable” or overlooked for promotion. She has not spoken to anyone at work about what she is experiencing.

Discussion Questions:

- If Sarah came to you as a Champion, how would you support her?
- What practical adjustments could be suggested?
- How can you encourage her to feel safe having a conversation with her line manager?
- At what point would you signpost Sarah to HR, occupational health, or medical advice?



If Sarah came to you as a Champion, how would you support her?

Sarah is 48 years old and works as a project manager in a busy team. Recently, she has been struggling with **brain fog**, difficulty concentrating, and frequent **hot flushes** during meetings. She often feels embarrassed and worries her colleagues are noticing. Her workload is suffering, and she is missing deadlines.

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What practical adjustments could be suggested as a champion to Sarah?

Sarah is 48 years old and works as a project manager in a busy team. Recently, she has been struggling with **brain fog**, difficulty concentrating, and frequent **hot flushes** during meetings. She often feels embarrassed and worries her colleagues are noticing. Her workload is suffering, and she is missing deadlines.

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How can you encourage her to feel safe having a conversation with her line manager?

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At what point would you signpost Sarah to HR, Occupational Health or medical advice?

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Learning Points:

- Importance of creating a safe, confidential space.
- Role of Champions in reducing stigma and normalising menopause.
- Practical adjustments: flexible working, desk fans, wellness breaks, private workspace.
- Company policy for support and guidance.
- Champions are *not clinicians* — boundaries matter.



Case Study 2: Fatima – Colleague Dynamics

Background:

Fatima is 52 and works in a customer service team. She has started experiencing **forgetfulness** and sometimes loses her train of thought during calls. A few of her colleagues have started making **jokes** about her memory, calling her “scatty” or saying, “it’s her age showing.”

Fatima laughs it off in public but confides in you that she feels humiliated and isolated. She is now avoiding team social events because of the comments.

Discussion Questions:

- How would you intervene as a Champion without shaming or embarrassing her colleagues?
- How can you raise awareness within the team about menopause in a respectful way?
- What advice could you give Fatima to help her feel supported?



**How would you
intervene as a
Champion without
shaming or
embarrassing her
colleagues?**

Background:

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Fatima laughs it off in public but confides in you that she feels humiliated and isolated. She is now avoiding team social events because of the comments.

How can you raise awareness within the team about menopause in a respectful way?

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What advice could you give Fatima to help her feel supported?

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Fatima laughs it off in public but confides in you that she feels humiliated and isolated. She is now avoiding team social events because of the comments.

Learning Points:

- Addressing workplace culture and tackling stigma.
- Using education and awareness campaigns (e.g., lunch & learn sessions, posters).
- Building allyship in teams.
- Supporting Fatima with confidence and dignity.



Case Study 3: Alex – Self-Care for Champions

Background:

Alex has been a Menopause Champion in the organisation for 6 months. They have supported many colleagues through difficult conversations and feel proud of their contribution. However, Alex has started to feel **emotionally drained** and is finding it harder to switch off after conversations.

Alex worries that if they step back, colleagues will feel unsupported. They are beginning to doubt whether they are cut out for the role.

Discussion Questions:

- What should Alex do to protect his own wellbeing?
- How can Champions set clear boundaries while still being supportive?
- What support should the organisation put in place for Champions like Alex?



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Learning Points:

- Champions need to practice self-care and know when to step back.
- Peer supervision, debriefing sessions, and organisational support are vital.
- Boundaries help maintain sustainability in the role.
- Menopause awareness is a *shared responsibility*, not just the Champion's.



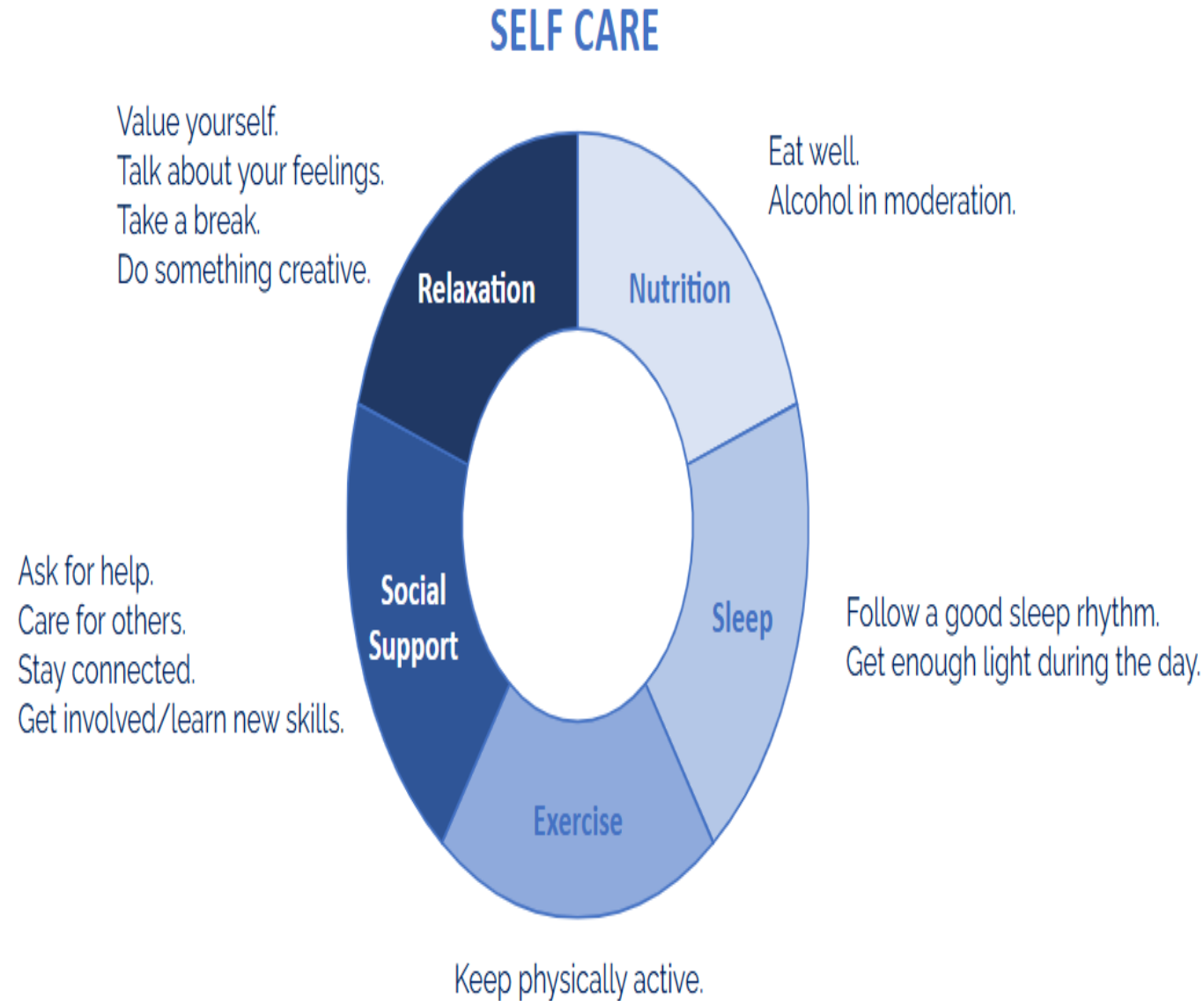
Self-care strategies for champions



Support and solutions
for you and your employees

Looking After Yourself

- Potential emotional effect of the champion role
- Self-care toolkit: Boundaries, peer support, mindfulness
- Know when to step back
- Organisational responsibility too
- Monthly drop-in sessions are available, and you can join the menopause champions team chat.



(Noakes, 2017)

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Additional Resources for Champions

NHS Every Mind Matters - Online self-help CBT techniques - Every Mind Matters – NHS which has a range of short video guides on topics such as reframing unhelpful thoughts, tackling your worries, bouncing back from life's challenges, and more including ways to boost your mental health.

CBT Workbooks – NHS Cumbria, Northumberland, Tyne and Wear – cover a wide range of topics and are an excellent resource – anxiety / Bereavement / Depression and Low Mood (and a guide for partners) / Managing Anger / Panic / Obsessions and Compulsions / Stress / Sleeping Problems etc. (useful at home or work). All available in leaflet, easy read, audio and BSL video format. Home :: Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

Hub of Hope – www.hubofhope.co.uk - is the UK's largest mental health support directory. It can help you to find a service for yourself, or others close to where you live or work. It includes support for under 25's, support for adults and where to access help in an emergency.

Final Thoughts.....

- **Champions** = are awareness raisers, listeners, sign posters
- **Supportive** conversations matter
- **Self-care** and **boundaries** are essential
- One action you will take away as a Champion following today's training and how have you found the session?
- Any questions?



Thank you



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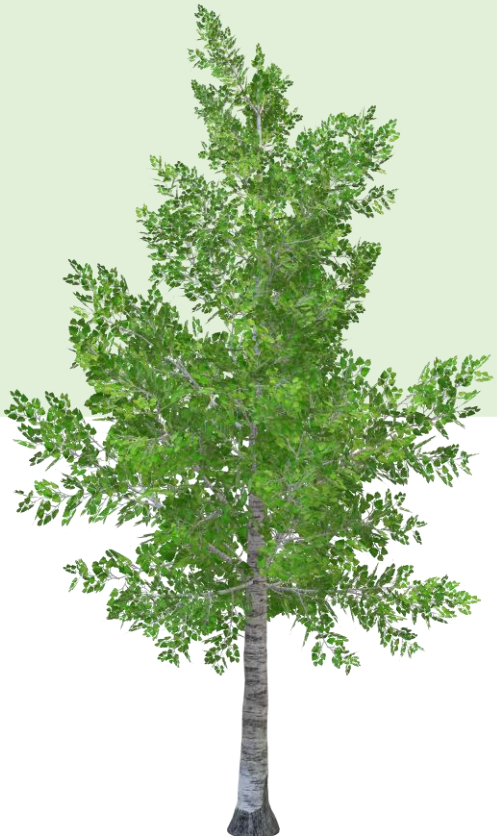
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