

Changing the  
Change

Policy, Practice  
& Personal  
Issues

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**Welcome!**

**WORLD**

**MENOPAUSE**

• **DAY** •

**18**  
**OCTOBER**

**BASW**

The professional association for  
social work and social workers

**Welcome!**

**Shantel Thomas**

*Anti-Racism Lead*

*British Association of Social  
Workers*

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## Programme

**Siobhan Maclean, Kirwin Maclean Associates -**

Bringing together the personal and the professional: It's silence that does the harm

**Nina Kuypers, BSc, PGCert Education, PGCert Health and Exercise, Founder Black Women in Menopause -**

The bias that blinds: why menopause for some is different

**Lizzie Furber, Principal Social Worker, Practice Education & Daisy Long, Director, DCC-i -**

Menopause and non-binary inclusivity

**Lyse Hurd, Trade Union Official, Social Workers Union/British Association of Social Work -**

Menopause in the workplace

**Q&A**

**Workshops**



Siobhan Maclean

World Menopause Day 2022

Bringing  
together the  
personal and  
the  
professional:  
It's silence that  
does the harm

# My 'personal'

- I've been a social workers for 32 years
- Just over nine years ago I had a significant stroke
- I returned to work around 6 months later, with a fear that I wouldn't be seen as 'capable'
- Not long after that I started to notice some 'strange' things were happening to me...
- Initially I put these down to the stroke and the medication that I need to take
- Speaking to the stroke nurse I realised that these were symptoms of the menopause



...and yet I kept SILENT

# Symptoms of the menopause

- Hot flushes
- Night sweats
- Fatigue
- Bloating
- Vaginal dryness / pain / infections
- Digestive problems
- Lowered libido
- Mood swings
- Depression
- Headaches
- Weight gain
- 'Brain fog'
- Muscle tension
- Changing (and often thinning) hair
- Irritability
- 'Hot mouth' – metallic taste, tingling tongue
- Gum disease
- Pins and needles
- Lack of focus
- Lapses in memory
- Itchy skin
- Anxiety
- Dizzy spells
- Body odour changes
- Allergies
- Dry / painful eyes
- Palpitations
- Panic attacks
- Plantar fasciitis
- Brittle nails
- Poor sleep
- Urinary tract issues (e.g.: repeated Infections)
- Painful breasts
- Joint pain
- Electric shocks

And every woman will experience it differently

There are just so many...

34, 37 or 45?





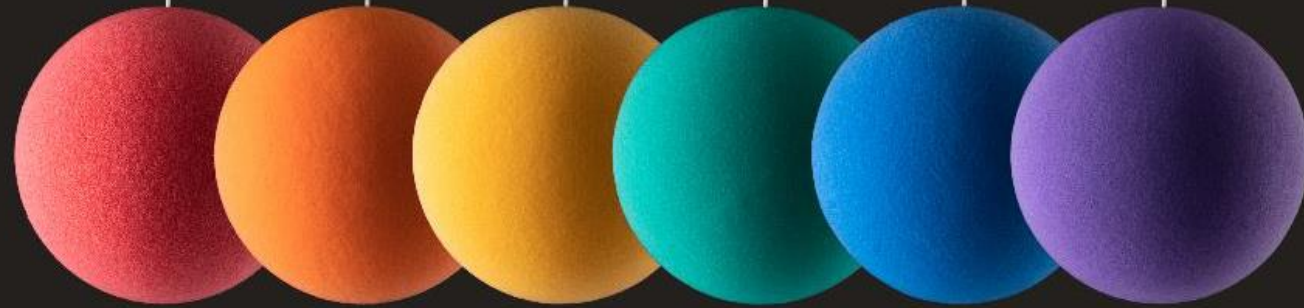
...and yet I kept SILENT

# My 'professional'

- I've been a social workers for 32 years
- I've been delivering training around reflective practice and theory for many years
- I have a lived commitment to anti-oppressive practice
- Since the start of the pandemic I have been doing a great deal of work on moral injury in social workers - drawing on the importance of feeling emotionally safe in our practice

Bringing the  
personal and  
professional  
together

I've been a  
social worker  
for 32 years



**“It’s silence that will do the harm, not talking...”**

(Esther Murray 2021)



# Social work and the menopause



Webinar number 57  
October 2021

I asked people to share their  
experiences and so many women did...



As a pre-menopausal social worker... when this came up as a care planning consideration for the first time with someone I was working with, I was shocked at my own ignorance.

I actually thought I had dementia as my short term memory was shocking, not great when you're newly qualified

I feel like I can take on the world some days then others left feeling like my brain is a fog, confidence crushed.

I started googling leukaemia because I was convinced that I had something life threatening

When my manager said "My wife sailed through it. Perhaps you are making more of it than you should" it devastated me.

I was unaware of what were symptoms of peri menopause and got to the stage that combined with other factors I decided to leave my job, it took 4 years to return to social work

It's like being in a fog of tiredness, heat and confusion. Your mind and body don't do what they are supposed to do and everything feels different. It's a loss of identity and sense of competence, a complete new beginning in terms of how your body functions.

I thought the menopause was hot flushes and brain fog. I didn't know about the great waves of anxiety/low mood, lack of sleep, weird unexplained pain and that there would be a total transformation of who I was.

I really struggled / am struggling to work whilst going through the menopause. Actually had to cut my hours to deal with it. I experienced anxiety for the first time ever. I remember coming in on a Monday morning and looking at my emails and just crying.

My manager said "Oh I didn't have any problems with the menopause. Are you sure it's the menopause that's making you feel this way?"

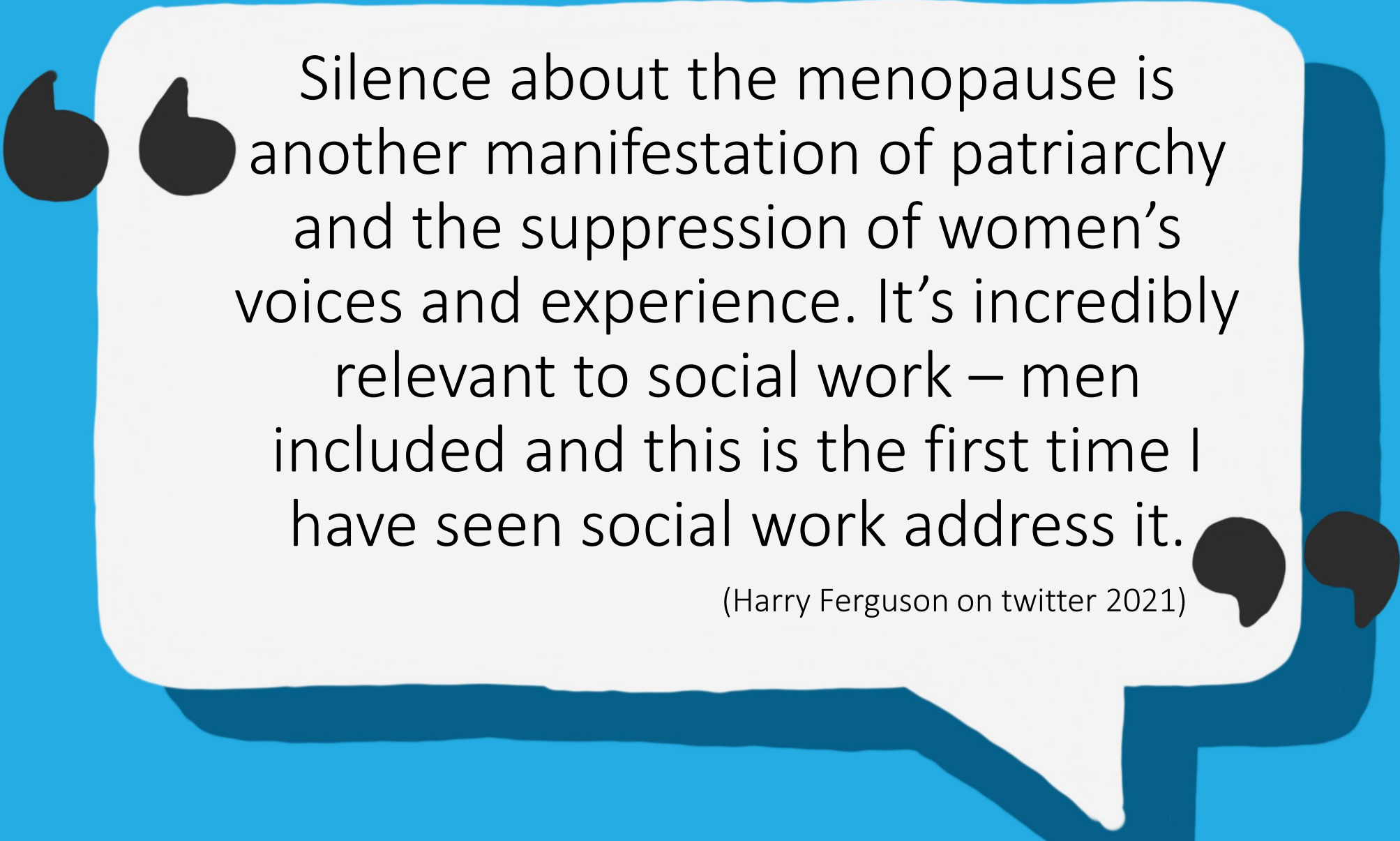
I have just qualified as a social worker. I am 27 and in a clinical menopause due to a health condition and at the moment occupational health have said I am unable to do my social work role due to being in the menopause and a side effect of memory loss. It is such an awful situation I feel so helpless in my own life. I'm so sad that my career is being held back from me before it has even started because I am in the menopause.

I remember during home visits, that I would have to keep taking my coat off, and stand close to the door. Not for safety reasons, but because I was so hot. I remember this starting conversations with some carers/parents about the menopause which enabled them to share their experiences

Most (male) managers I've had have hardly acknowledged comfort breaks in meetings to address menstruation so doing the same for menopause hot flashes will be way off their radar!

I remember that I had 3 fans around my desk in the office at times, and when they were all running all the office knew what was happening.

I was chairing a professionals meeting with over 20 in attendance and literally stopped mid sentence as I couldn't remember what I had planned to say next



Silence about the menopause is another manifestation of patriarchy and the suppression of women's voices and experience. It's incredibly relevant to social work – men included and this is the first time I have seen social work address it.

(Harry Ferguson on twitter 2021)



It's silence that  
will do the  
harm, not  
talking...

And listening too!

So let's start talking...  
*Really* talking

# The bias that blinds: Why menopause for some is different



**BLACK WOMEN**  
IN MENOPAUSE

Nina Kuypers

What do you see when  
looking at me?



**BLACK WOMEN**  
IN MENOPAUSE





# 'Representation Matters'



**BLACK WOMEN**  
IN MENOPAUSE

# Menopause doesn't happen to Black Women!

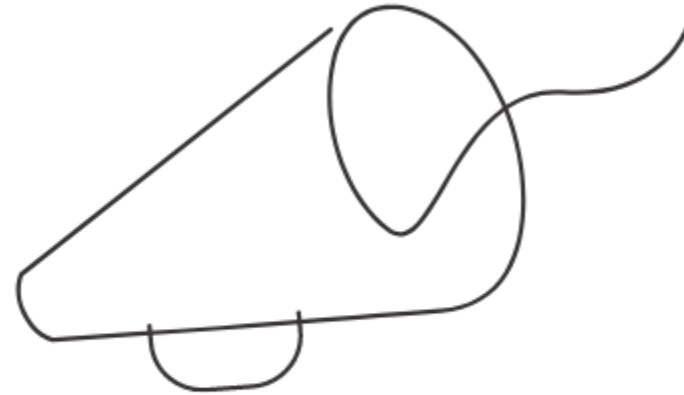


**BLACK WOMEN**  
IN MENOPAUSE





# Menopause 'Amplifies' Everything



**BLACK WOMEN**  
IN MENOPAUSE

# Why Black Women in Menopause?



**BLACK WOMEN**  
IN MENOPAUSE



**BLACK WOMEN**  
IN MENOPAUSE

**MENOPAUSE  
DOES NOT  
~~DISCRIMINATE~~  
DISCRIMINATE**

# Menopause and non- binary inclusivity

*Daisy Long, Director &  
Lizzie Furber, Principal  
Social Worker, Practice  
Education*

*DCC-i*





# Inclusive Menopause?

*Menopause is not binary, NICE agrees, so why is society trying to make it so?*

# What is nonbinary gender?

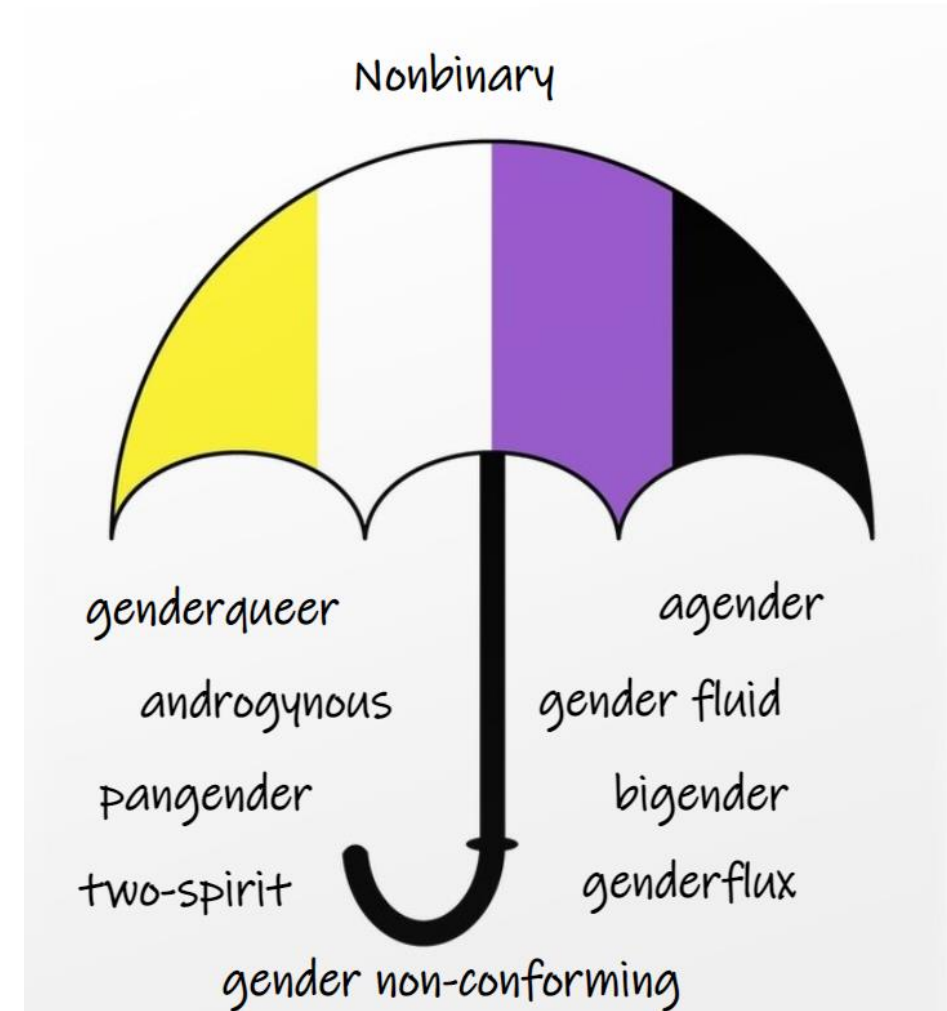
*How many people are nonbinary?*



## Government definition:

*“Someone who identifies as in some way outside of the man-woman gender binary.”*

- 7% of respondents to 2018 National LGBT Survey identified as nonbinary.
- May use gender-neutral pronouns, e.g. they/them/theirs.
- May feel excluded by gendered language, e.g. “hello ladies/lads!”
- Could socially transition and/or medically transition, or neither.





# Nonbinary menopause

*Yes, it's a thing!*



- Existing literature about the menopause focuses almost entirely on the experience of heterosexual, cis women (Glyde, 2021).
- Menopause is not explored in the World Professional Association for Transgender Health *Standards of Care* (WPATH, 2012).
- NICE currently updating menopause guidance and will include nonbinary people.





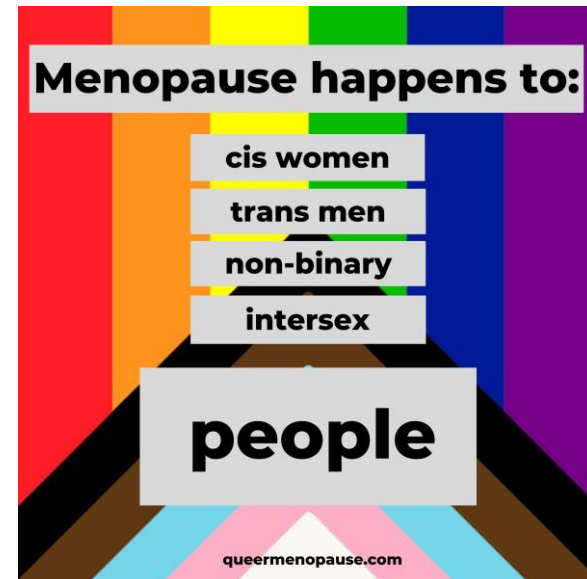


# Finding points of connection

*Maybe we're more similar than we are different?*



- Menopause as transition. It's a biopsychosocial process (Hunter & Edozien, 2017).
- All bodies need oestrogen, testosterone and progesterone to function. Hormones aren't gendered.
- HRT, the struggles with access and alternatives where HRT isn't possible - menopause healthcare and trans healthcare.
- Many people don't fit the standard menopause narrative, e.g. premature/early menopause, surgical menopause, child-free by choice, not straight.
- Current menopause narrative is sexist, ageist, heterosexist, Eurocentric. Narrow focus is harmful to all.





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# Menopause in the workplace

Lyse Hurd

*Trade Union Official,  
Social Workers Union /  
British Association of Social  
Work*

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# Workshops

Please choose one workshop and click the relevant link in chat or on your programme to access at 17:35

<p><b>Workshop A</b></p>	<p><b>Karen Grinter, <a href="#">Northants Pilates</a> - What's the menopause got to do with bone health?</b></p> <p><i>What do you know about your bone health and how does the menopause affect you? What can you do to improve your bone health BEFORE and AFTER menopause. 1 in 2 women and 1 in 5 men will suffer an osteoporotic fracture after the age of 50. It's not all doom and gloom though, there is much you can do to ensure you keep your bones healthy and this session is about understanding bone health and what you can do to improve yours.</i></p>
<p><b>Workshop B</b></p>	<p><b>Caroline Hill, Freelance Dietitian, <a href="#">Caroline Hill Nutrition</a> - Nutrition for menopause...what should I eat?</b></p> <p><i>Workshop to discuss the role of nutrition in managing menopause symptoms. Exploring whether nutritional supplements are needed and helping you to feel in control of your food choices to make positive dietary changes.</i></p>
<p><b>Workshop C</b></p>	<p><b><a href="#">Siobhan Maclean</a>, <a href="#">Kirwin Maclean Associates</a> - Heart Work: Kindness in Menopause</b></p> <p><i>Because of health issues, I am not able to take HRT. Experiencing very significant symptoms for a number of years, I have felt desperate at times and also very alone. Over the last few years I have been doing a lot of work about the importance of kindness in social work practice and kindness and certain pivotal moments in my own menopause journey made me recognise the importance of kindness in the menopause. In this workshop I will share how the menopause affected me (and my family) and how kindness was key.</i></p>
<p><b>Workshop D</b></p>	<p><b><a href="#">Daisy Long</a>, Director &amp; <a href="#">Helen Kane</a>, Principal Social Worker (Adult Practice) from <a href="#">DCC-i</a> - The HRT journey</b></p> <p><i>HRT is a journey, and why is that? Because it needs a map to navigate and asking for directions is like asking a tourist where the local night spots are! While less controversial than previously has been the case, making an informed decision about whether HRT is right for you is still far more difficult than it should be, fraught with misinformation, bias, and assumptions rather than objective accepting support. This workshop will consider the good, the not so good, and the sometimes not so pretty role HRT might (or might not!) play in the menopause experience!</i></p>