# **Team Leeds Hearts and Minds**

Findings from Team Leeds Chat (TLC)-including notes -female workforce in perimenopause /menopausal transition-

### **About Team Leeds Chats (TLCs)**

TLCs create a space for our health and care workforce to talk, listen, connect and share experiences of living and working during the pandemic, or working in partnership with health and care colleagues from across the system. Workforce experience is critical for shaping the future of health and care in Leeds and the learning that was shared will help to increase awareness, making Leeds an even better place to work.

#### **Context**

Covid-19 has disproportionately impacted certain groups of people. In acknowledgement of this a TLC was hosted with members of our health and care teams belonging to Leeds and York

Partnership Foundation Trust (LYPFT) Menopause Support Group. 18 women were asked to share their experiences of living and working during the pandemic, whilst experiencing symptoms of perimenopause / menopausal transition. The group comprised a mixture of women working remotely throughout the pandemic and some in people facing front-line roles.

# **Key findings**

- The feeling from this group could be summed up as a result of the removal of 'normal life', loss of human contact, isolation with working from home and managing the effects of perimenopause.
- Increased isolation and mood changes are commonly attributed to the pandemic. This has
  delayed the identification of perimenopausal symptoms, women seeking medical help
  and identifying coping strategies.
- Some women believe they are taken less seriously by colleagues during highly symptomatic episodes such as hot flushes / brain fog.
- Some women experience challenges in accessing healthcare for support and report the use of anti-depressants to support symptom control.
- Changing Information Technology (IT) has increased levels of anxiety in some women.
- Sickness / absence rates increase when women struggle to manage symptoms.

## **Conclusion:**

For some women, perimenopausal symptoms significantly increase feelings of anxiety which can lead to self-doubt in relation to workplace competence. It is notable that **only one positive sentiment** was captured in this session, '*It's been good to be at home when I experienced heavy and irregular bleeding*'. This suggests that living and working during the pandemic, whilst experiencing perimenopausal symptoms / transition to menopause, has caused significant

challenges for some female employees. Whilst the profile of perimenopause is increasing within the media and the workplace; members of this support group tell us that more can be done.

#### **Top 3 Recommendations**

Participants suggested ways to improve support in the workplace during this transitional life phase:

- **Increase awareness** to decrease stigma and improve support amongst colleagues and managers.
- Offer adjustments for women who are experiencing challenging symptoms during work time.
- Provide access to support for affected staff.

# Some useful links shared by women experiencing perimenopause / menopausal transition:

- <a href="https://www.newsonhealth.co.uk/resources/">https://www.newsonhealth.co.uk/resources/</a> Dr Louise Newsome's resource guide.
- <u>Davina McCall: Sex, Myths and the Menopause All 4 (channel4.com)</u> Davina McCall channel 4 documentary on menopause.
- Cracking the Menopause: By Mariella Frostrup and Alice Smellie.

Thank-you to everybody who took part in this Team Leeds Chat: we hope this findings report provides a good summary of the key issues discussed. If you have would like to provide further feedback please email us at: <a href="mailto:leedsth-tr.heartsandmins@nhs.net">leedsth-tr.heartsandmins@nhs.net</a>.

#### Appendix – detailed notes from the Team Leeds Chat

What participants said were the challenges / experiences of living and working during the pandemic whilst experiencing perimenopausal symptoms / transition to menopause:

- I feel really anxious, scared, worried and ashamed.
- First lockdown was hard going, struggling mentally, couldn't function. Didn't know it was the menopause. Menopause conversations with employers /colleagues were not happening.
- During the first lockdown I was working from home, home schooling, menopausal and couldn't handle it all and went off sick for 6 weeks. It was awful.
- I've found it difficult when working at home, I didn't get frustrated before this episode in my life; I do now.
- I'm new to experiencing the perimenopause and for a couple of years I didn't know what was wrong with me. It took me ages to get my GP to listen and the pandemic, home schooling, shielding etc. did not help at all.
- It's nice to be in this group to see I am not alone. It's been difficult to do my job sometimes and I think the brain fog has probably given me a bit of a bad reputation as forgetful, perhaps insensitive and ineffective.

- Before going on levothyroxine and HRT I felt bad tempered and shouted a lot and I don't feel like that now.
- I finally plucked up courage and asked for a 2nd opinion and was put on a low dose of Evorel
  Conti (HRT) patches, it's been an absolute life changer and I can now function again!
  Definitely worth questioning a GP's decision if they tell you No.
- They offered me anti-depressants, I challenged it, and the GP told me it tends to be the first option.
- I asked for an appointment with a GP who has a special interest in the menopause and finally felt listened to.
- I was lucky that I realized what was going on and went to the GP and pretty much told them what I wanted. I saw a practice nurse, I didn't even see a GP, and I don't think they wanted to see me after 4 phone calls and a visit to the practice.
- There was a perception amongst some women that others 'could tell that something was wrong' because they were experiencing blank patches, whilst managing physical symptoms of hot flushes, reduced continence, feeling irritable, enraged and angry over relatively minor issues.
- Loss of function leading to feelings of guilt and an intensely 'overly emotional response' at times undermines confidence levels.
- The isolation of working from home for significantly protracted periods, as a result of the pandemic, is a common theme. 'Felt like I was going crackers. Spoke to the GP who offered anti-depressants, but I knew I wasn't depressed. No alternative suggested unless you are able to suggest your own alternatives such as HRT or beta blockers'.
- I struggle to sleep at night, leading to under-performance during the day.
- I have had so many symptoms, but had no way to recognise them as working from home has interrupted incidental coffee /corridor conversations, where you might anecdotally share stories, learn about the experiences of other women and gain reassurance from others.
- No breathing space. Low energy levels and reduced motivation at the onset of perimenopause.
- Some women reflected that Covid-19 has shouldered a large proportion of the blame when life changing events occurred, such as changes in physical health and emotional wellbeing. Natural life changes appear to have been masked to an extent, if not exacerbated, by the resulting isolation from the pandemic.
- I've flat-lined in my life.
- Long periods of on-line interaction-waiting patiently for my turn to speak. Then by the time it arrives I have forgotten what I intended to say!
- Previously well-established work performance has been replaced with severe 'imposter syndrome' for some women, with thoughts of reduced professional competence.
- 'Anxiety provoking' probably sums it up. All the 'crutches' of normal life that you use to get you through tricky times have not been there. Social isolation from working from home is intensified with the menopause and sense of perspective just disappears. It has been difficult to know what is menopause and what is just 'going mad' due to the pandemic.
- IT and system demands have increased levels of anxiety for some women.
- Request for managers / leaders to provide regular honest, high quality performance feedback and reassurance.
- Raise awareness for male staff, to increase understanding and empathy, and offer support to men experiencing personal impact either at work, or at home.

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