

Menopause and Me

Experiences of Support and Information on Perimenopause
and Menopause

February 2024



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"It has affected the very essence of 'me' and who I am, how I operate, my zest for life and my ability to function."

About Us

Healthwatch Bolton is your local health and social care champion. We exist to listen to your feedback about your experiences of using your health and care services. If you access GPs and hospitals, dentists, pharmacies, care homes or other NHS support services in your area, we want to hear about your experiences. As an independent statutory body, we have the power to make sure NHS leaders and other decision-makers listen to local feedback to help shape and improve standards of care. We can also help you to find reliable and trustworthy information and advice.

About this project

Throughout our engagement activities in 2023, we have been receiving intelligence from the community about issues relating to the menopause and perimenopause. In particular, people are seeking knowledge and information about what the menopause and perimenopause is, and where to find and access support and information.

- **What is Menopause and Perimenopause?**

Menopause is when your periods stop due to lower hormone levels. It usually affects women between the ages of 45 and 55, but it can happen earlier. Perimenopause is when you have symptoms of menopause, but your periods have not stopped. Perimenopause ends and you reach menopause when you have not had a period for 12 months.¹

There is evidence supporting low rates of reported menopausal symptoms amongst women from ethnically diverse communities due to cultural barriers and associated stigma towards woman's health care

¹ Source: <https://www.nhs.uk/conditions/menopause/>

needs². Furthermore, experiences and views of menopause influencing women's wellbeing and daily life can vary between different cultures and societies. The impact of menopause can often be psychologically and physically diminishing. Menopause is a life course transition, globally it is forecast that there will be 1.2 billion women post-menopausal after 2030³.

It is estimated that **35,664** women are affected by symptoms of menopause in Bolton⁴. There is no specific contract in place to provide menopause services. From the feedback we received from our community engagement activities at events and group meetings in Bolton, it was clear there was a real gap in knowledge, support and understanding about menopause and perimenopause. We found that many women from ethnic minority backgrounds felt particularly uninformed.

Because of this, and linking into our mental health priority, we decided to do a piece of research exploring what information and support women have found useful, where they found such information, and if there were any barriers to accessing support and information. We also wanted to find out how menopause and perimenopause was affecting the lives of women regarding mental and physical health, family life, work, social life and relationships. We also asked women if they felt that health and care professionals had the knowledge and expertise to support them.

We also arranged for local GPs to attend a women's group at Changing Life Directions⁵ (women's resource centre), to talk to women from ethnic minority backgrounds, about the symptoms and treatments they could access. A summary of this session can be found on page 23.

² Source: Lankoon, I, M. P, S., Samarasinghe, k and Elgan, C. (2021) Menopause is a natural stage of aging: a qualitative study: *BMC Women's Health*, [Online] vol. 21, no. 1, pp. 47-47. https://www.ncbi-nlm-nih-gov.ezproxy.bolton.ac.uk/pmc/articles/PMC7849153/pdf/12905_2020_Article_1164.pdf.

³ Source: Jermyn, D. (2023) "'Everything you need to embrace the change': The 'menopausal turn' in contemporary UK culture", *Journal of aging studies*, vol. 64, pp. 101114-101114. <https://www-sciencedirect-com.ezproxy.bolton.ac.uk/science/article/pii/S0890406523000154>

⁴ Greater Manchester Integrated Care Partnership

⁵ <https://changinglifedirections.org/>

As a result of conversations within the community, a local mosque reached out to us to support an event 'recognising menopause symptoms and management'. Dr Kalika Sonara led an informative session to approx. 100 women. This presentation led to empowered conversations and encouraged women from marginalised communities to speak about their personal experiences openly on a subject which is deemed as taboo in many cultures and societies.

We have inspired and supported menopause information stalls within events at the University of Bolton. We have also encouraged people to access bespoke training and support available through Voluntary and Community Sector organisations across Bolton. The Wellbeing Project CIC⁶ have launched a new lottery funded project called: 'It's Not Just Hot Flushes' and can work with voluntary sector organisations to create a menopause supportive organisation.

We have engaged in conversations across Bolton with organisations, partners, and statutory and community organisations to encourage menopause awareness in workplaces / teaching environments / cultural settings / places of worship. We have inspired the university of Bolton to highlight a need for students and staff alike to access menopause information and support. As a result, there will be an awareness stall at the University of Bolton's International Women's Day Event 2024.

Bolton Community College has also been inspired to address a need for more menopause wellbeing awareness sessions within the community.

⁶ <https://thewellbeingproject.co.uk/>

Summary of Findings

There were 143 respondents to the survey. Comments have also been recorded from engagement activity sessions.

Symptoms and Impact

The majority of respondents were either post-menopausal or perimenopausal, with 20 respondents reporting that they were not sure. It is clear from the feedback that many women report the same symptoms, with brain fog being the most common, followed by difficulty concentrating, hot flushes, night sweats, low mood and joint pain.

Out of 131 respondents who answered the question, 94 reported that it had impacted on their mental health, 87 saying family life had been affected, and 84 saying their physical health was affected. This has also impacted on social life and working life. Feelings of being alone and isolation were also expressed by respondents.

Information

When asked about whether they had found any useful information about peri/menopause, the majority (63) said they felt somewhat informed with only 24 saying they felt well informed and 17 saying they did not feel they had found any suitable information.

When asked about what they had found was the best source of information, respondents said; the internet and websites, friends and family and peer/support groups.

When asked why they found this information useful, respondents reported a range of answers. Some have found GPs to be reliable, trusted and informative. Particular internet sites have been quoted such as the NHS website, and Menopause Matters as being very useful and trustworthy. Some found friends and family were very helpful for talking to and discussing symptoms, with some friends and family having similar experiences.

Some respondents have found social media channels, and in particular, Instagram accounts and Tik Tok to be good, trusted sources of information. (however, how trustworthy these sites are is debatable). Some respondents

found peer support groups very useful and menopause cafes. Being able to share similar experiences with peers was useful. The Balance App and the Davina McCall book 'Menopausal' were also quoted as being very useful.

When asked what could **improve awareness and information** about peri/menopause, most people said:

- More training for GPs and less reliance on issuing anti-depressants.
- Better information on the use of Hormone Replacement Therapy (HRT)
- More awareness, normalising it as a natural part of life
- Being taught from an early age in schools/sex education/biology
- More openness and discussions in the community
- A safe women's health community space café to speak with like-minded people and health care practitioners/ womens healthcare champions

Barriers

When asked what barriers people felt there were to accessing information, the majority of people felt there were barriers, comments as follows: (92)

➤ **Comments about GPs/Health professionals**

- Lack of understanding from the GP, out of date knowledge and poorly informed
- Unable to get GP appointments
- Being 'fobbed off' by the GP
- GPs over-medicalising symptoms
- Symptoms not being recognised and investigated properly
- GPs and health professionals are not trained in peri/menopause
- Uncomfortable speaking with male GP's

➤ Language Barriers

- Language and understanding is a barrier
- Language, doctors need to make you feel more comfortable

➤ Stigma and Culture

- It isn't talked about in our community
- Some people know nothing about it
- Fear of what others think
- Sometimes laughed off
- Embarrassment, women can't always talk about it
- Can be the butt of jokes
- Sexist attitudes, societal and cultural attitudes
- Dismissed as 'women's problems'
- Good to see improvements around stigma being made
- Dismissive culture
- Fear of being judged
- Taboo and embarrassing to talk about
- Black and Minority Ethnic communities need more information

➤ Healthcare Professionals

The majority of respondents did not feel that health and care professionals had enough knowledge to support them. Some people did report that their GP was very supportive and well informed, but many people commented that GPs did not know enough about the subject. Some respondents did report that other health professionals such as female practice nurses, did have more knowledge and expertise. Some respondents felt that they were being prescribed anti-depressants to deal with the symptoms rather than being treated for their menopausal symptoms. Some felt that Hormone Replacement Therapy (HRT), was the only treatment being offered, without

much else. HRT information was also problematic with some finding the information leaflet very negative and worrisome.

The report highlights the need for more menopause visibility. Having empowering discussions around women's healthcare in general can encourage confidence, and improve overall health and wellbeing.

Methodology

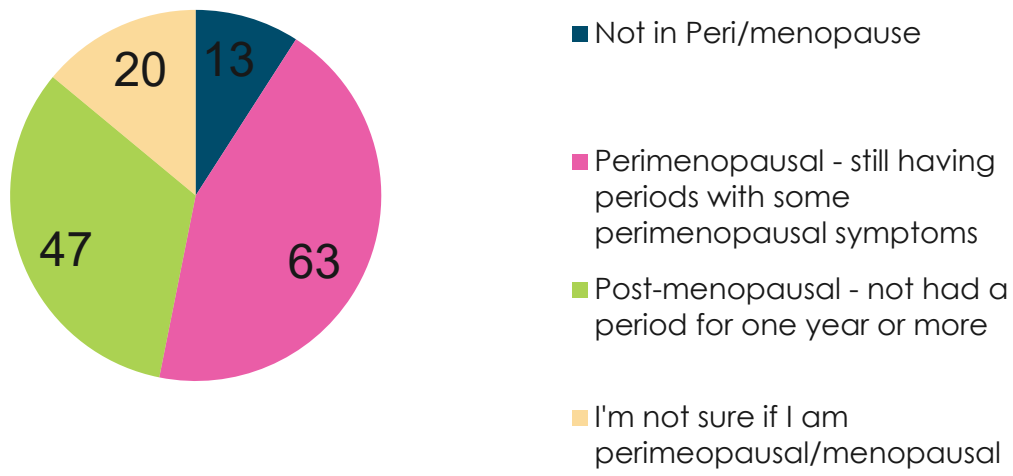
In June 2023, Healthwatch Bolton launched a survey to find out more about individual experiences of peri/menopause symptoms, what people's experiences were on trying to find good and reliable information and support, how peri/menopause has impacted on life, family, work and relationships. The survey also asked what people found useful and to suggest ideas to improve the availability of information and support.

A draft survey was produced which was shared with Bolton Locality Integrated Care Partnership health and care commissioners and providers, for comment and to suggest questions. From this the survey was produced and launched online in July 2023. The online survey was shared on social media channels, newsletters, bulletins and the website. In addition to this, extensive community engagement also took place with various groups and events in the community. A list of groups can be found in the appendices.

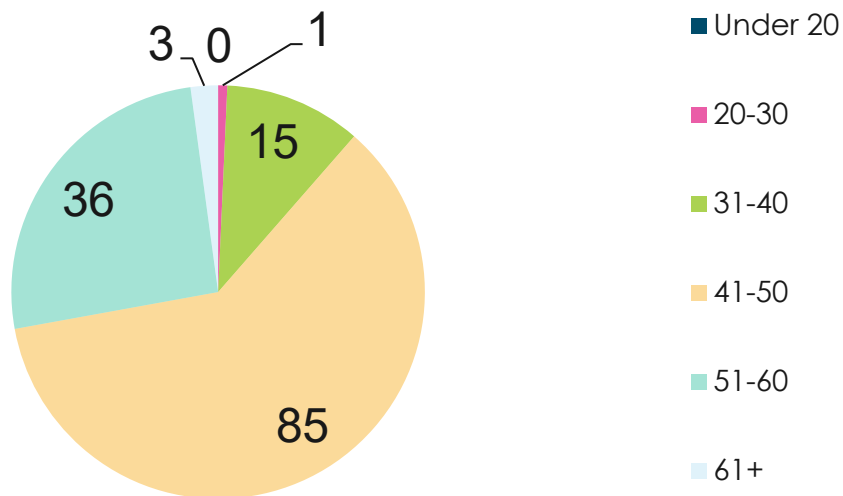
Interviews were also undertaken to produce case studies of individual experiences of peri/menopause.

Findings

Q.1 Which of the following best describes you?



Q.2 At what age did you experience peri/menopausal symptoms?



Q.3 Have you had, or are you having, any of the following symptoms since becoming perimenopausal or menopausal?

Hot flushes	98
Irregular periods	69
Night sweats	95
Depression	63
Anxiety	91
Heavy periods	47
Painful periods	40
Vaginal dryness	49
Low mood	92
Difficulty in concentrating	99
Brain fog (confusion and trouble thinking straight)	108
Reduced confidence	71
Irritability	81
Joint pain	88
Headaches/migraines	60
Reduced libido	65
Problems sleeping	94
Weight gain	84
Bloating	69
Fatigue (tiredness)	91
Hair loss	39
Body odour	27
Facial hair growth	49
Urinary symptoms (problems when peeing)	39
Constipation (problems with opening bowels)	18
Tummy cramps	19
Palpitations - (your heartbeat becoming more noticeable)	39
Other (please specify)	22

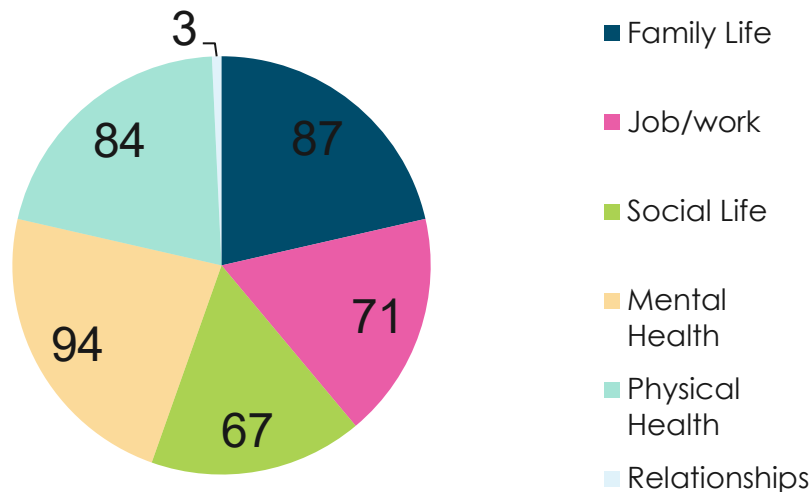
Respondents also reported the following symptoms:

- ✚ Mental health problems
- ✚ Dry and splitting skin on hands and nails
- ✚ Anger
- ✚ Painful breasts
- ✚ Eye problems
- ✚ Blood Pressure
- ✚ Arthritis

- ✚ Thrush
- ✚ Itchiness
- ✚ Change in taste
- ✚ Stiff legs and bum
- ✚ Blurry vision
- ✚ Fibromyalgia triggered
- ✚ Visual disturbances
- ✚ Forgetfulness
- ✚ Itchy ears
- ✚ Spots and oily skin
- ✚ Itchy feet at night

Symptoms such as brain fog, difficulty in concentrating, hot flushes, night sweats, low mood, fatigue and joint pain were the most common.

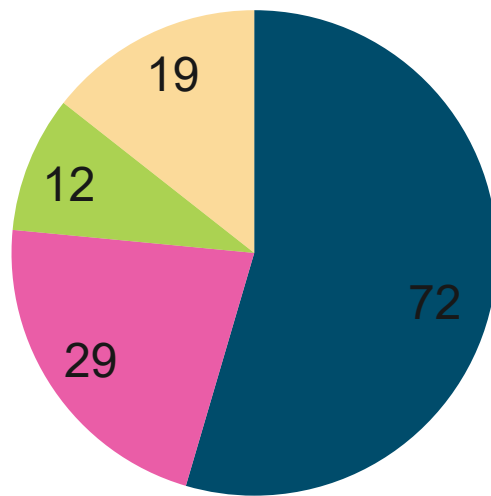
Q.4 Have peri/menopausal symptoms impacted on your life?



5 respondents also reported:

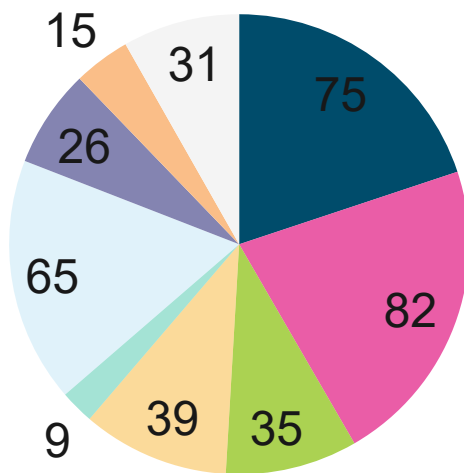
- ✚ Irregular inconvenient periods
- ✚ Extreme Fatigue, emotional, muscle and joint pain

Q.5 When did you start to look for information about Peri/Menopause?



- As my symptoms started
- A long time after my symptoms started
- Before I had symptoms
- I have looked for any information yet

Q.6 Please tell us where you have looked for information on Peri/Menopause?

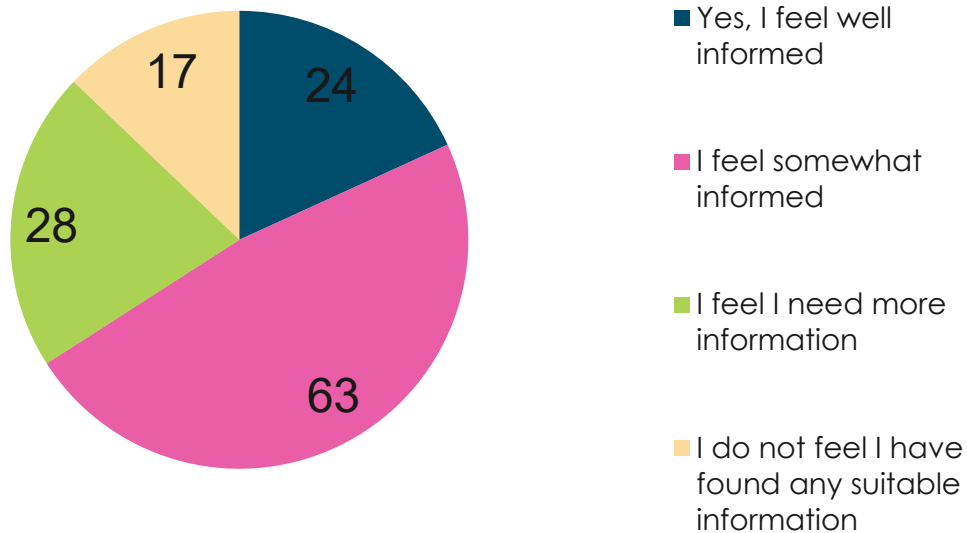


- Friends/family/peers
- Websites
- Specific website eg. Menopause Society
- Social Media channels
- You Tube
- Health professionals eg. GP
- Books/magazines
- TV/radio
- Documentaries

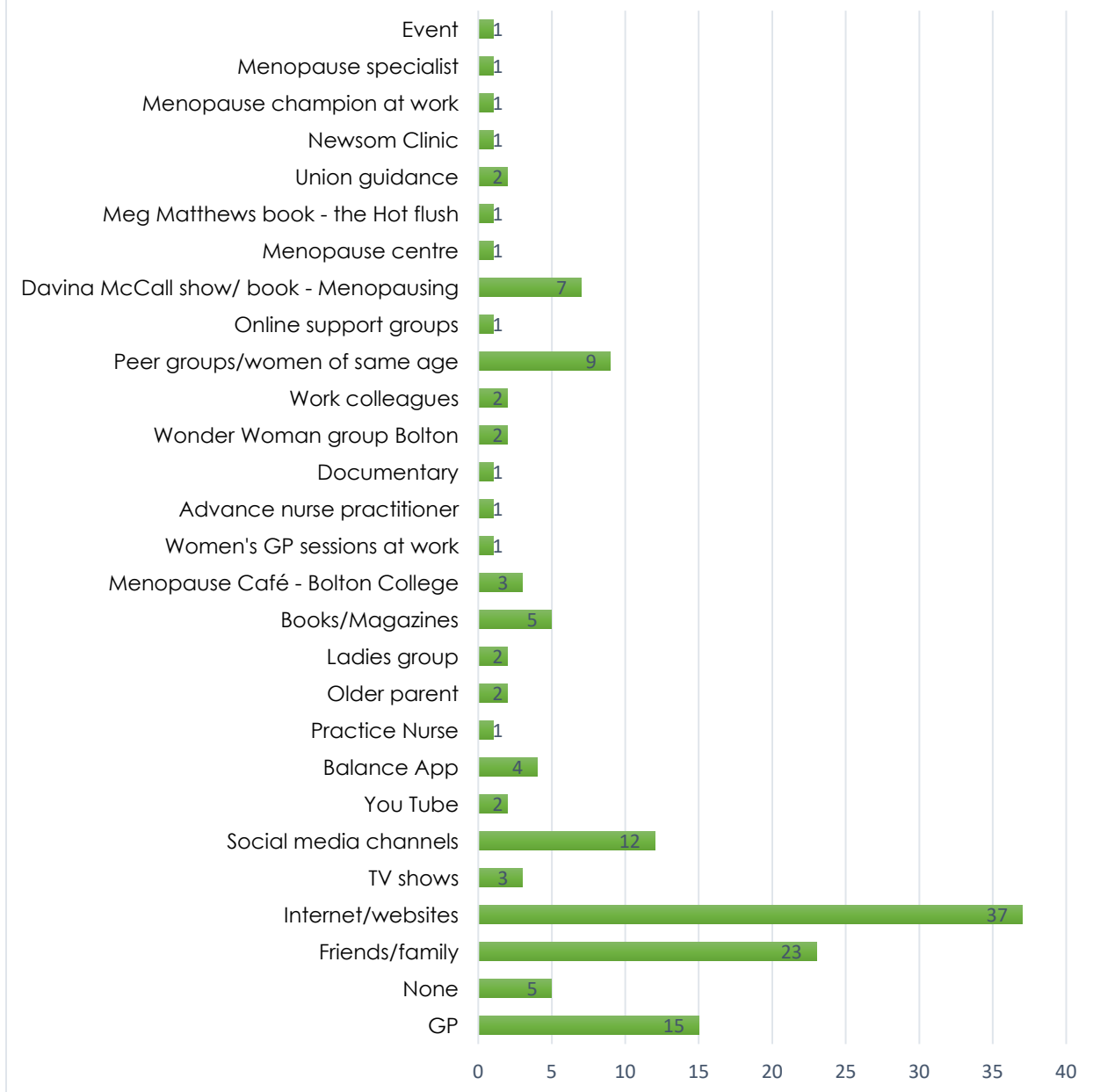
People who answered 'Other' to this question also said:

- ✚ An educational course
- ✚ Leaflet
- ✚ GP but told was too young
- ✚ Got information from Wonder Woman group
- ✚ Mumsnet
- ✚ Local group support
- ✚ Menopause Matters
- ✚ Google
- ✚ The Balance App
- ✚ Newsom Clinic

Q.7 Have you been able to find the information you needed to understand the Peri/Menopause and the symptoms you experience?



Q.8 Where or what has been the best source of information and support to you?



Particular websites that people said were useful were:



'NHS'



'Menopause Matters'

 'Menopause Doctor'

 'Meg's Menopause'

Q.9 Why did you find this information useful?

<p>GPs</p>	<p><i>You assume menopausal symptoms are the same for everyone, but that is not the case.</i></p> <p><i>I've only followed advice from a qualified and specific practitioner. They've understood and then guided me with advice and solutions.</i></p> <p><i>Could make informed decisions about my personal journey and have also been confident with advice from doctors when trialling new treatment/medication (HRT).</i></p> <p><i>Advised to have Coil</i></p> <p><i>Dr Matta specialises in women's health</i></p> <p><i>Factual/scientific and real life – empathy</i></p> <p><i>Informative</i></p> <p><i>Reliable</i></p> <p><i>Sympathised with my situation</i></p> <p><i>To talk about what I'm feeling.</i></p>
<p>Internet and website/specific websites</p>	<p><i>Menopause Matters – sufficient information</i></p> <p><i>Explained symptoms and possible solutions; felt "not alone"</i></p> <p><i>Felt less isolated and frustrated</i></p> <p><i>NHS website provides information on symptoms</i></p> <p><i>Website information is up to date and current</i></p> <p><i>Menopause Matters website is useful</i></p> <p><i>Meg's Menopause website</i></p>

<p>Friends/family</p>	<p><i>It made me realise I was not going mad</i></p> <p><i>Others share the same experience</i></p> <p><i>Friends share useful tips</i></p> <p><i>Friends are trusted resources and understand</i></p>
<p>Social Media – Instagram and Tik Tok</p>	<p><i>Reliable and can relate to others experiences</i></p> <p><i>It's relatable and not dismissive like some GPs can be</i></p> <p><i>Very informative</i></p>
<p>Menopause cafes</p>	<p><i>Bolton college menopause café, speakers are knowledgeable and supportive</i></p>
<p>Work/Union support</p>	<p><i>Menopause champions really useful – not feeling so alone with it</i></p>
<p>Books /magazines</p>	<p><i>Davina McCall 'Menopausal' – Full of practical advice and guidance that prepared me to speak with my GP surgery about my symptoms and needs</i></p> <p><i>Realise what I have been experiencing is what others do & that it's not just hot flushes – there are so many other symptoms</i></p>
<p>Gynecologist</p>	<p><i>Up to date, correct specialised information</i></p>

Digital Apps	<p><i>The Balance App - It recognises that some symptoms can only be relieved with off label doses of HRT. Whilst many scaremongering articles focus on breast cancer risks, Newson Health always puts this in perspective and describes the myriad of benefits of HRT which far outweigh the tiny risks. It also explains how off label doses are not dangerous (contrary to GP warnings).</i></p> <p><i>The Balance App is easy and very simple to use</i></p>
Support Groups	<p><i>Wonder Women group menopause talk - It was both informative and interesting and it was talked about in an informal way which makes the women feel more at ease.</i></p>

Q.10 What do you think could improve awareness and information about Peri/Menopause?

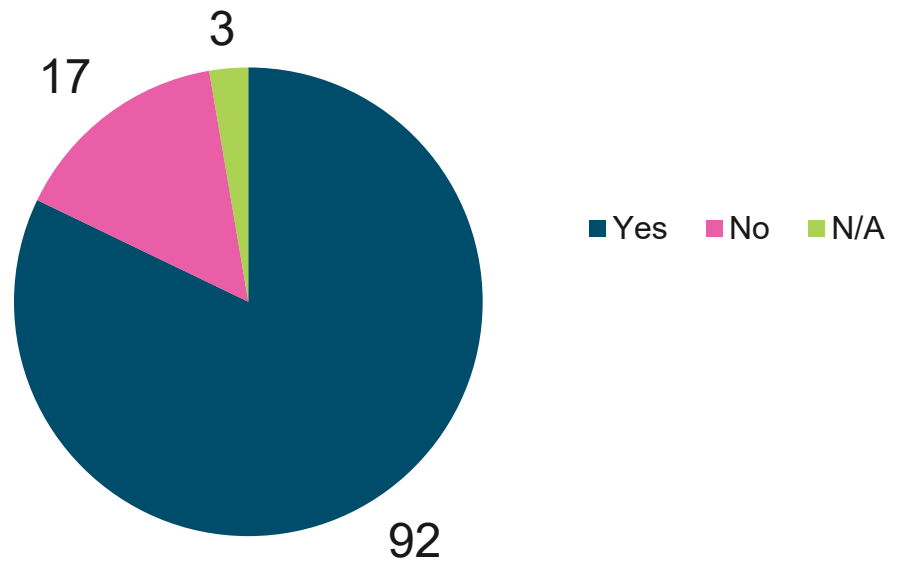
- ✚ Group talks with GPs
- ✚ Workshops
- ✚ Education
- ✚ Sessions with **specific age group**
- ✚ Have **dedicated nurse** at GP/hospital to help people
- ✚ More tolerance and to **talk about symptoms** – not shy away
- ✚ More awareness of **support in workplaces**
- ✚ Talk about it **within society, TV/radio/social media**, community groups
- ✚ Doctors having more **specialised training**
- ✚ More information in **different languages**
- ✚ Campaigns or group chat
- ✚ Acknowledgement in the **workplace**
- ✚ GPs need **information in their surgeries**
- ✚ Check-in service from GP once you turn 50 years old
- ✚ GPs should invite you in to talk about it
- ✚ **Lessen the shame**, need more talking about it

- ✚ Training for GPs who may have **negative attitudes towards HRT**
- ✚ **Menopause champion** in the GP surgery
- ✚ Free **phone line** support
- ✚ Being given information and advice **earlier in life**
- ✚ **More funding**, more dialogue
- ✚ More information about signs of menopause
- ✚ More community members giving **wellness talks**
- ✚ More **information and support** services
- ✚ Better **education** and protocols for doctors
- ✚ Offering **HRT when asked for instead of anti-depressants**
- ✚ Teach about it from a young age in education
- ✚ Reduce **the stigma** around it
- ✚ More community events are needed
- ✚ **Male** employers need educating
- ✚ GPs that listen and don't fob off as something else, especially male GPs
- ✚ Support groups at work
- ✚ TV Programmes
- ✚ **Well women** clinics being re-established
- ✚ **Normalisation and less sexism**
- ✚ More media campaigns
- ✚ More TV programmes with famous people championing it
- ✚ Making information **accessible to everyone**
- ✚ **Community group events/talks**

From the above topics the comments most frequently mentioned were:

- More training for GPs and less reliance on issuing anti-depressants
- More awareness, normalising it as a natural part of life
- Being taught from an early age in schools/sex education/biology
- More openness and discussions in the community
- More sources of support needed

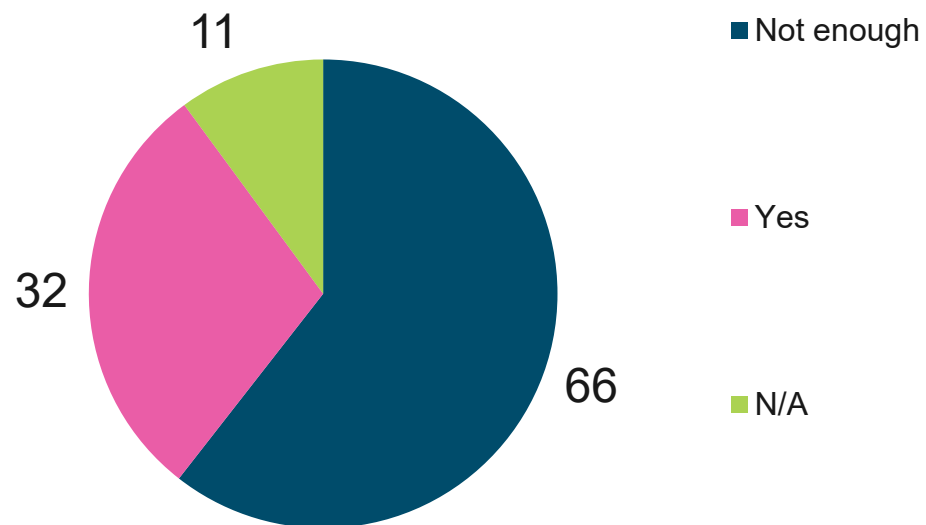
Q.11. Do you think there are any barriers to accessing support and information about peri/menopause?



<i>Yes, because it isn't talked about in the community</i>
<i>Yes, because people assume it is only for the older population</i>
<i>Yes, because symptoms can be vague so only the symptoms get treated and not the cause</i>
<i>Yes, not much help and support</i>
<i>Yes, long waiting times to see a specialist gynecologist</i>
<i>Some people laugh it off, workplaces are not always understanding</i>
<i>Language is a barrier for some people</i>
<i>Lack of trained professionals, GPs don't know enough about it</i>
<i>Doctors over-medicalise symptoms & don't sympathise with women</i>
<i>Stigma and the 'keep calm and carry on' mentality from older people</i>
<i>Embarrassment is a barrier</i>
<i>Fear of what others think</i>
<i>Not being computer literate could be a barrier</i>
<i>Prejudice and lack of information</i>
<i>Stigma, embarrassment and lack of understanding</i>
<i>Doctors don't support women, people should talk more about menopause</i>
<i>Difficult to get GP appointment</i>
<i>Blood test said I wasn't peri/menopausal, but I had so many symptoms, I wasn't offered any other advice or information</i>

<i>Don't feel male GPs understand</i>
<i>Work, because I don't want a sickness record</i>
<i>Some ethnic minorities are reluctant to seek help or advice around this subject. This needs to be addressed to that all women are informed about what to expect and how to deal with the symptoms</i>
<i>Culture, fear, ignorance and embarrassment</i>
<i>One of the biggest issues is not being aware that symptoms may be linked to the peri/menopause. If women are not aware then they won't seek support. Symptoms are so wide and varied, and so different for everyone. Information and awareness is key</i>
<i>Yes, such as being prescribed prescriptions, then being told can only buy them privately (Testogel). Medications can be expensive, GPs need to tell patients about pre-payment prescription certificates to help with the cost.</i>
<i>BAME community need more information</i>
<i>Hearing mixed messages about experiences with doctors has put me off visiting the doctor about my symptoms</i>
<i>Yes, many GPs still think HRT is dangerous. Mental health services do not join the dots and think about hormones, but immediately prescribe anti-depressants. Even the patient information leaflets inside transdermal HRT products talk about DVT risk which is incorrect. Lots of scaremongering and outdated info</i>
<i>Not knowing what you don't know – hence an automatic information session for all women at age 40 from GP. Women don't know that symptoms are peri/menopause. Often confused for getting older and having to just put up with it.</i>

Q. 12. If you have tried to speak to a healthcare professional, do you feel they had sufficient knowledge to support you?



Comments:

- ✚ *2 gynecologists I saw were male, they could not really understand the impact of it on us women and the pain of heavy periods that we experience*
- ✚ *My doctor, I asked about HRT, I am 67 years old and have been depressed. He just shut me down and said risks of breast cancer, ovarian cancer. Blood clots – so he really scared me!*
- ✚ *Excellent information and support from practice nurse*
- ✚ *At first no, (it was a young male doctor), but after 1 year, I was dealt with by a woman who sorted me with HRT immediately*
- ✚ *No, GP support is inconsistent, trial and error, ANP at surgery has been more helpful*
- ✚ *My GP – Dr Webster, was very understanding*
- ✚ *The doctor just offered a blood test, there was no other support*
- ✚ *No, they did not appreciate my anxiety was part of the menopause*
- ✚ *No, the message was it's just normal so get on with it*
- ✚ *Had to do my own research, GP info was very vague*
- ✚ *One conversation I had with my GP was very dismissive, a tone of 'another one', and this has made me reluctant to bring it up again.*

Almost like – it's your age, what do you expect? But I don't feel like they understand the impact it's having on my work life. I actually wanted to check that it was peri/menopause and not something more serious!

- ✚ It continues to feel like HRT is the only solution, and I had to push for increase in dosage*
- ✚ No, I was treated like I had depression*
- ✚ At first, absolutely not, but when I moved and had to change my GP, I could not believe the difference with my new GP. She was knowledgeable, had up to date information and trusted me as the patient to know my body best*
- ✚ GPs should tell you about prescription prepayment certificates for help with medication costs*
- ✚ No, they told me you are too young, which is inaccurate*
- ✚ Bolton NHS Trust have a menopause clinic*
- ✚ My GP has been amazing, although the waiting is cumbersome*
- ✚ My main issue has been trying to get prescription items due to meds shortages*
- ✚ No, you feel like you are wasting their time*
- ✚ I feel like they don't have the time or interest in this subject*
- ✚ Only Newson's Health have had the knowledge and empathy to support me. But this kind of care shouldn't only be accessible to those who can afford it. It should be available for all, for free.*
- ✚ They have the knowledge, but it's hard to get an appointment*
- ✚ My own GP gives me the impression she doesn't know enough, however where I work we had 2 experts which has now given me the confidence to re-visit my GP and insist on trying medical interventions*
- ✚ No, spoke with a lady doctor who prescribed anti-depressants. I am not depressed so I refused them*
- ✚ "I feel that Asian women do not have enough information about perimenopause".*
- ✚ I am concerned about the information leaflet you get with HRT, it is very scary and doesn't really say what the benefits are, it is too negative*
- ✚ Is HRT acceptable to take due to my religious beliefs?*

Q.13 Is there anything else you would like to tell us about your experience of peri/menopause?

- *My sister's husband left her because she was struggling with mental health problems as a result of the menopause. He moved on and remarried.*
- *The effect on mental health which impacts on family life due to lack of information, feel isolated*
- *Can be overwhelming and lonely*
- *It is often very frustrating when periods stop for several months, and then come back regularly, as we struggle to know when to pray and what to do when spotting occurs regarding our prayers/fasting in Ramadan*
- *I feel that Asian women do not have enough information about menopause*
- *I'm still trying to figure out the symptoms*
- *Go find someone to help you if you are struggling*
- *I wish there were more clinics for people to go*
- *Felt like I was alone, nobody would listen, just laughing it off*
- *Luckily my GP has a menopause specialist*
- *It is a continuous journey, one that I wish I had been more knowledgeable about at a younger age*
- *While seeking support for physical symptoms, I am being offered anti-depressants. I don't have a mental health condition.*
- *I did not know much about the menopause, I did not know I was at risk of osteoporosis. More prevention info is needed*
- *Having been on the coil and not having periods for 13 years, it's difficult to determine if I'm menopausal or not*
- *I have two friends, who are both peri/menopausal, who were refused HRT at multiple doctors appointments. One of them paid £200 to see a private consultant to get HRT. Since it has been prescribed she has seen a massive improvement. The other lady is still suffering.*
- *Nobody tells you how difficult it will be*
- *I worry about work/career*

- *A one stop shop approach would be excellent. A phone contact to see if it's a menopause symptom or something else.*
- *I was surprised that a female GP took me off HRT after deciding that my family history was incompatible, without suggesting an alternative. An earlier GP was aware and had prescribed HRT a couple of years before. GPs need to be properly educated about the menopause.*
- *Thought I was going mad, the brain fog is terrible. My behaviour changed drastically and I did not know why*
- *Would have liked more information about it when I was younger, so I could be prepared and recognise it when it happens.*
- *I've heard about private hormone tests that you pay for, but that they are not very good. We need better information*

Engagement Session with Fit4Life Group – Changing Life Directions

Fifty ladies from South Asian communities took part in this information session which was led by two local GPs.

Age 47-55, 24 Indian, 23 Pakistani, 3 Bangladeshi

Several ladies have been struggling to complete their exercise programs and reported feeling tired and described their bodies as broken, feeling like they are going crazy, and not feeling like themselves and not understanding what is happening to their bodies

Aged range 47-55-When asked about possibility that they may be going through the menopause, **none of the ladies had any understanding of what menopause is.**

We introduced small groups sessions to gather feedback from the group, approx. 50 ladies took part. **37 were not aware that they were going through the menopause**, 17 did, however have never discussed this with family members or their GP. **Ladies reported that they feel embarrassed and ashamed.**

The event clearly demonstrated that there is a gap in provision of support for women who have cultural and language barriers in accessing information and services related to women's health.

Case Study 1 – Mrs A, Aged 52

Has had depression for three years due to lack of sleep, body aches and feeling abnormal.

"I did not know what was happening to me, I was still having some periods but not like normal, my body felt different though. I did not want to tell my doctor as my husband always comes with me and I was also worried I might have to have an internal examination.

I kept everything to myself and just cried when it got bad. It was at the centre, the gym, where I found out what was happening to my body. I did not know or ever hear about the word menopause. I came to the event and found out that other women were going through the same, we all started talking and were able to ask the staff questions.

Case Study 2 – Khadija, Aged 45

Please could you share your experiences of perimenopause/ the menopause?

I have struggled with peri/menopausal symptoms for the past seven to eight years. I work in the teaching profession within my role there is lots of accountability which can be very stressful at times. Menopausal symptoms have greatly impacted on my life.

Did you seek advice or support from your GP or another health Professionals? If not, why not? did you receive support advice from anywhere else?

I spoke to my GP/ Nurse practitioner on many occasions, the first time I was given Fluoxetine and lifestyle advice. I am a high taxpayer I expected more support from the NHS. In the last two to three years, I looked up Newson Health Menopause and Wellbeing centre, two months ago I made a decision to book a private appointment which cost £195.

Do you feel health professionals have the knowledge and expertise to understand and treat menopause symptoms?

I felt that the healthcare professionals and the nurse practitioner did not have the level of knowledge, understanding and expertise to support me and my symptoms.

What was your experience? Did you feel supported?

I did feel listened to and offered lifestyle advice and was offered the antidepressant route. I feel that it is very challenging for healthcare professionals to truly understand the impact menopause has on people.

How are you feeling now? Are you managing your symptoms?

I felt greatly supported by Newson menopause and wellbeing centre since taking HRT I feel generally my symptoms have been greatly elevated, some symptoms are still there before I felt I could not function properly. I experienced suicidal thoughts, feeling like I did not want to be here.

For yourself what do you feel has been the best advice/support that you have been given?

Newson Health Menopause and Wellbeing Centre provided me with a very detailed report which my GP found helpful. This led to a recommendation of body identical HRT being prescribed for me.

What kind of support would you like to see being offered locally?

I would like the subject of menopause information and awareness to be added to the national curriculum within schools to help young people understand 'what is menopause?'. I would like to see menopause cafes set up in the community where women confidently visit and meet other likeminded women in the community to gain health information and support in a comfortable environment.

Is there anything else that you would like to add?

I studied extremely hard for 10 years, resitting my GCSE maths twice to achieve a teaching qualification and work within the field. Unfortunately, I did not feel supported within my workplace, I was told that the trust was working on a policy. Menopause symptoms made me feel like quitting my job!

Case Study 3

Please could you share your experiences of perimenopause/ the menopause?

I haven't had a period since I was 40 after having a procedure that stopped them so I wouldn't know if I was starting the menopause. I am also adopted so don't know any family history on the female side. I knew my body was changing, gaining weight, low mood, low libido, confusion, forgetting things, restless legs, palpitations, head flushes and so on but it was a build up until it got to the point where I didn't know me anymore – I wasn't my usual self and it began to affect me at work (I also had a male manager, which didn't help mainly due to his lack of recognising or acknowledging the menopause that made him unsympathetic) family and in social environments. At the same time, I had health issues and was under Gynaecology, Respiratory and my GP for investigations. As you can imagine a stressful time, but it all came at once and I thought I was losing my mind...I even thought I had dementia at one point. I had been backwards and forwards to my GP with various health issues, but never once did anyone mention I could be going through the menopause. I went for a routine BP check with the nurse practitioner, and I mentioned all these changes, and she was on it straight away – we had an in-depth conversation about menopause, and she was of a similar age and could relate and empathised a lot – it was at this point I realised I could be menopausal and not crazy. It's from this stage that I began to learn more and research and new then what I had to do.

Did you seek advice or support from your GP or another health Professionals? If not, why not? did you receive support advice from anywhere else?

Not initially as I didn't know most of my symptoms where menopausal – I was putting them down to being symptoms from other health conditions.

Do you feel health professionals have the knowledge and expertise to understand and treat menopause symptoms?

Some do and some don't – it was a conversation with a nurse practitioner I was seeing over another issue that took the time out to listen to me and she explained a lot to me. I have been backwards and forwards to my GP with various issues over the last couple of years and never once did a GP say all these symptoms could be part of the menopause.

For yourself what do you feel has been the best advice/support that you have been given?

Friends and the nurse practitioner.

What was your experience? Did you feel supported?

It was after the conversation with the nurse practitioner that I began to research my symptoms and learnt a lot more about my body. So, when I did approach my GP it was a quick we can give you anti-depressants, which isn't what I wanted to hear. I know they do help with some of the symptoms, but I was hoping to hear we will test you to see if your menopausal or offer HRT and even some tips (leaflet maybe) on managing wellbeing, symptoms and a little reassurance. After chatting with friends about HRT I knew I wanted to go on the patches rather than anti-depressants and my GP gave them to me. I've been on them for several months now and the only follow up I have had is a request for my BP.

How are you feeling now? Are you managing your symptoms?

I have done a lot of research myself and alongside my HRT I'm taking a few supplements like CBD capsules, magnesium, turmeric, cod liver oil, and evening primrose. My mental health has improved, and the physical side effects aren't as bad. I feel I am managing this the best I can but do worry about the long-term effects of being on HRT.

What kind of support would you like to see being offered locally?

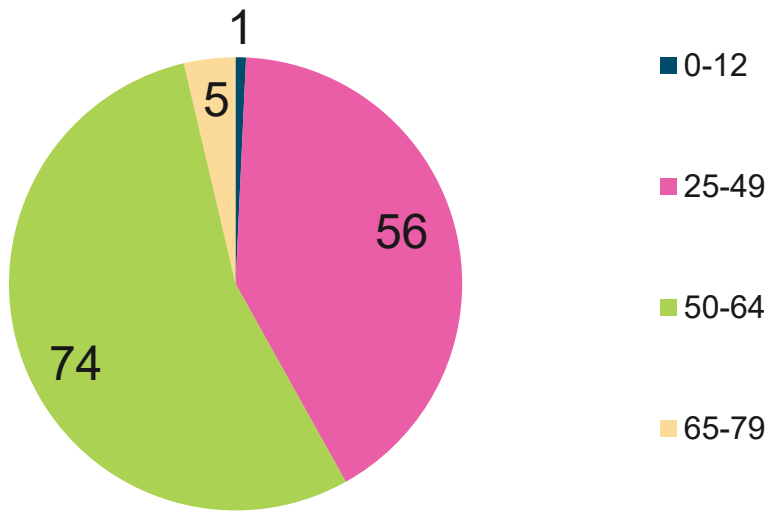
More support groups, a menopause hotline, GPs providing more information such as a leaflet or a link to a trusted website (the internet is full of info that can be contradictory and overwhelming) and more discussed options face to face on alternative therapy/HRT rather than jumping straight to anti-depressants as a fix for all menopause. More regular ongoing education in the workplace.

Is there anything else that you would like to add?

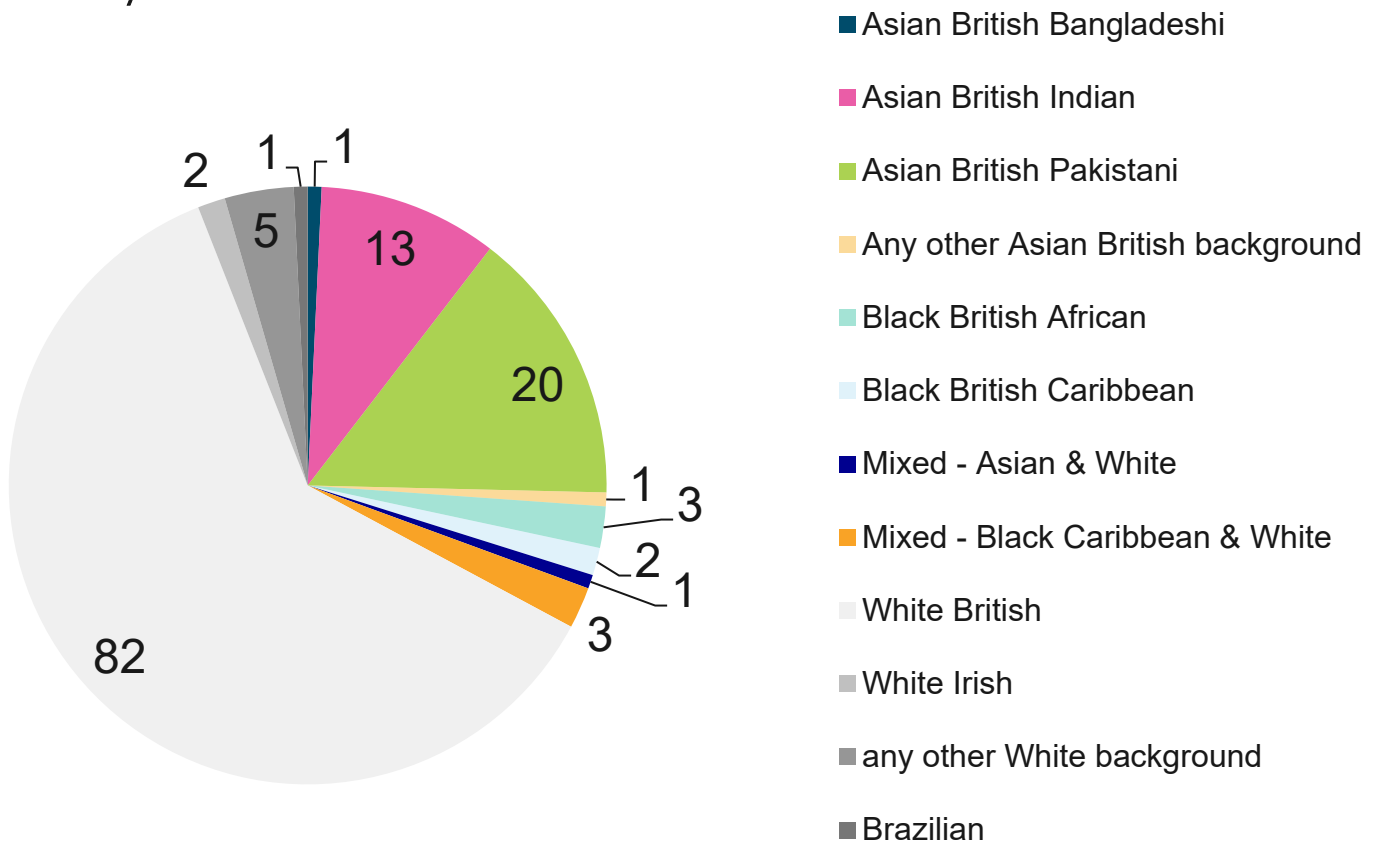
I encounter a lot of women in their 40s and 50s through my work some vulnerable too. Most of which have been on anti-depressants for years with no alternative therapy offered, no blood tests, no HRT. Some women struggle to articulate themselves to professionals and will settle with whatever the GP offers – hence being on anti-depressants for long periods of time and not challenging for a better choice of therapy that could be better suited to them as individuals. I've had conversations with lots of women who all have different experiences with their GPs depending on sex, age, time limits, knowledge & empathy. A discussion with a menopausal woman shouldn't be just a 10 min appointment – there should be more in-depth conversations for women to learn and make their own decisions on therapy choices, which I know may not be an option for GPs but surely some alternative like a actual menopause service that offers all this support and advice.

Demographic Information

Age



Ethnicity



For respondents who answered the question about gender, all identified as female (135). For respondents who answered the question about sexual orientation (126), the majority were heterosexual, one gay woman (lesbian) and one pansexual

132 respondents were from the BL1-BL9 postcode areas.

Discussion/conclusions

The findings of this research show that people have found the menopause and perimenopause has impacted on various aspects of their lives. Be it through lack of knowledge and education, stigma, culture and lack of support from health professionals. Symptoms of perimenopause and menopause are wide-ranging and as this report shows, they do have a dramatic impact on lives, affecting both physical and mental health.

Traditionally, menopause has been a taboo topic. It was associated with middle aged and older women who were deemed belligerent, out-of-control, plagued by hot flushes and mood swings. Often the butt of jokes and considered irrelevant. Celebrities have been useful in getting menopause talked about and helping to normalise and get rid of the stigma associated with it. Many respondents to this report have said they have found some of the books written by celebrities to be really useful. Many workplaces have also adopted workplace policies to ensure their workforce is properly supported at work. There is a rise in menopause cafes being setting up in workplaces to help provide a space for women to share their experiences and seek support, men are also encouraged to attend.

There is a need for health professionals and particularly those working in GP practices to be more aware and have sufficient training on how to support women and the menopause. Aside from websites and support from friends and families, GPs are the first point of contact someone will have if they are seeking medical support for their symptoms. However, medicalisation can often mean being given a prescription for Hormone Replacement Therapy (HRT), or anti-depressants. Whilst HRT is welcomed by many women, it may not be suitable for all women, or what some women are looking for, so further advice and support should be offered. Women find support from others going

through the same thing, and the use of menopause cafes in different settings, is becoming more common.

This report has also highlighted that some women from ethnic minority backgrounds know nothing or very little about menopause. The subject is not freely discussed and can be viewed as something to be ashamed of and embarrassed about. Menopause can be viewed as a loss of fertility and femininity. There may also be language barriers between women and health professionals. The lack of educational materials such as leaflets, posters etc., that do not depict women from ethnic backgrounds may mean women cannot identify with the subject.

In conclusion, peri/menopause can have a serious impact on quality of life for women. Women need good support from well informed and trained health professionals. They also need support in their own communities and workplaces. Information needs to be accessible to all women including different languages. Education is also important to ensure women and men know about the subject earlier in life.

Recommendations

1. More training and awareness regarding peri/menopause symptoms and treatment is needed for primary care givers – GPs, and other health professionals, including tailored mental health support. Culturally some women experience menopause differently – symptoms may present earlier in life, so this needs to be taken into account.
2. Women should receive better explanation/straightforward information, about the benefits and risks of Hormone Replacement Therapy (HRT). The incredibly lengthy patient experience leaflets can be very scary. The leaflets talk all about the risks, which is all very negative. Whilst this information is necessary, it should also be helpful and talk about the positives of the treatment.
3. Health professionals and pharmacists should be able to advise or signpost patients to information about prescription charges and the benefits of Prepayment Prescription Certificate (PPC) if patients are on more than one/regular medications.

4. Women should be given followed up appointments after commencing HRT (after the first three months).
5. Women should receive sound information about private hormone tests and the reliability of these.
6. Consider setting up a dedicated webpage on all GP websites for specific information about peri/menopause and sources of support. Also include better information about HRT and alternative treatments.
7. Work with women (and men) and, in particular, people from ethnically diverse backgrounds to raise awareness of peri/menopause and sources of support.
8. Produce local information leaflets (digital and printed), in different languages, and, in particular aimed at those from ethnically diverse backgrounds.
9. Consider including menopause information in primary care annual health checks/carer health checks
10. Encourage more menopause cafes to set up around town and within communities
11. Include information about peri/menopause in educational settings or as part of the national curriculum.

Outcomes from our engagement activities

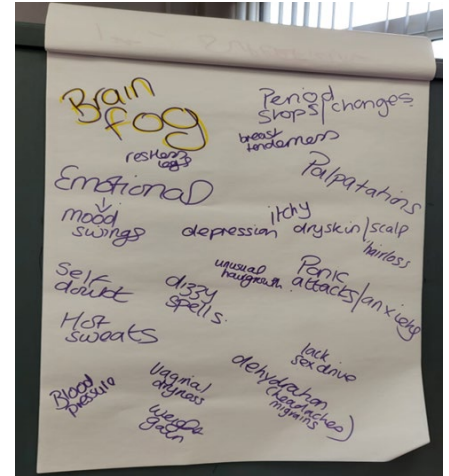
Women of Willow Hey – We arranged for a GP, Dr Medeeha Anwar to attend a session requested by a women’s group in Farnworth; Women of Willow Hey. Dr Anwar is a newly qualified locum GP with an interest in women’s health. She came out to deliver a myth buster session on the menopause. The session was very informative and generated lots of discussion and interest.

Prophetic Path⁷ – we were invited to attend a breakfast talk show on the menopause, at the old Medina Mosque on St Georges Road. This event was supported by two GPs, Dr Latif and Dr Ahmed who delivered an in-depth presentation not just on symptoms of menopause, but also on HRT / risk

⁷ An international organisation conveying the sacred message of Islam

factors / dietary advice / wellbeing advice. The session was very well received with 40 women in attendance.

Wonder women⁸ – This is a new group that we connected with; the group is supported by Bolton at Home. The group were interested to find out more information about peri/menopausal symptoms and share experiences and responses from GPs. Due to time restraints, no health care professional was available to attend the group session, however the group support officer devised games and other activities were planned and devised to help gain an understanding and break the ice around menopause conversations. An information video was also shown. The group took part in lots of interactive activities and shared powerful experiences: GP's lack of support / not enough information and the impact on mental health, more information, more support and awareness – which have been common themes within the research.



Further Work/Impact

Bolton College – As a result of the engagement work we have done, Bolton College are exploring the possibility of developing a wellbeing course around menopause. We will be discussing this with them throughout 2024. Bolton College have also set up a Menopause café in which we have attended and supported an information session.

Bolton University – We have been asked to attend a consultation into the upcoming new MSc Public Health Degree by the University of Bolton which is due to start in September 2024. The university is gathering insights from former/current students and organisations, so we will be able to share our work and insights on menopause. Bolton University have asked for our help in the possibility of setting up some menopause support that students and staff can access in the University. We have advised them to work in partnership with the Bolton College menopause café.

⁸ <https://www.boltonathome.org.uk/volunteering-training-employment/wonder-woman-2982/>

In the Community We have connected Individuals, groups, organisations and partners to support and training around the menopause, we have encouraged people to talk and share experiences to break down taboo and barriers.

Thanks and acknowledgements

Changing Life Directions

Bolton at Home

Wonder Women Group

Women of Willow Hey group

Bolton College

Bolton University

Bolton Social Prescribers

BAND

Zakirya Mosque

Medina Mosque

Dr Khalika Sonara, Dr Aishah Latif, Dr Medeeha Anwar and Dr Zunaira Ahmed

Case Study participants

Survey respondents.

Appendices

List of groups engaged with:

Changing life directions

Bolton Council of Mosques (BCOM)

Caribbean and African Health Network (CAHN)
Bolton Black History Group
Wonder Women
University of Bolton
Bolton College students and menopause café
Bolton Community College -English for Speakers of Other Languages (ESOL)
Women of Willow Hey
Sunning hill school parents evening
Bolton Deaf Society
Precious Gems
University of Bolton students and staff
Women Together
Old Medina Mosque
Zakaria Mosque
Fleet house
Answer Cancer
Let's Keep Bolton Moving
Halliwell Community Alliance
Bolton Black Community Health Forum
Talk Changes
Bolton Social Prescribers
Bolton GP Federation
Bolton at Home
Bolton Hospice
The Well Foodbank Hub

Responses from Commissioners and Providers

We really welcome the comprehensive piece of engagement, and useful recommendations. We will work with our newly established women's health network to ensure we take forward a comprehensive action plan to address these. This will include launching our new women's health hub and expanding this to deliver group consultations on menopause, a comprehensive communications plan for both primary care clinicians, the wider workforce, and the people of Bolton, and a new training package around menopause.

Many thanks

Liz Wigley

Senior Commissioning Manger – Maternity and Childrens Services

Greater Manchester Integrated Partnership

It was great to meet you at the Women's Health network meeting last week. I was really interested to read the Healthwatch report about menopause knowledge and services in Bolton and to listen to your summary in the meeting.

I mentioned that I'll be starting a CBT group for managing menopausal symptoms imminently in our service, so I just wanted to give you a bit more info about it (attached) as I'm guessing you'll probably come across people who might want to refer themselves into it.

Kind regards

Dr Caroline Boyd

Clinical Psychologist

Bolton Talking Therapies Service

What do you know about Perimenopause or Menopause?

Perimenopause is when you have symptoms before your periods have stopped. The menopause which is sometimes referred to as 'change of life' or 'midlife crisis', is when a woman stops having periods which usually happens when a woman is 45-55 years old. [Menopause - NHS \(www.nhs.uk\)](http://www.nhs.uk)

For some people, information, and support about what to expect during menopause and perimenopause can be difficult to obtain or understand. We would like to hear your views on this and what could make things better for you.

1. Which of the following best describes you? (tick which one applies):

Not in perimenopause/menopause	
Perimenopausal - still having periods with some perimenopausal symptoms	
Postmenopausal - not had a period for one year or more	
I am not sure if I am perimenopausal/menopausal	

2. At what age did you experience perimenopause/menopause symptoms?

Under 20	
21-30	
31-40	
41-50	
51-60	
60+	

3. Have you had, or are you having, any of the following symptoms since becoming perimenopausal or menopausal – (tick all that apply):

Hot Flashes	
Irregular periods	
Night sweats	
Depression	
Anxiety	
Heavy periods	
Painful periods	
Vaginal dryness	
Low mood	
Difficulty in concentrating	
Brain fog – (confusion and trouble thinking straight)	
Reduced confidence	
Irritability	
Joint pain	
Headaches/migraines	
Reduced libido	
Problems sleeping	
Weight gain	
Bloating	
Fatigue	
Hair loss	
Body odour	
Facial hair growth	
Urinary symptoms (problems when peeing)	
Constipation (problems opening bowels)	
Tummy cramps	
Palpitations (your heart beat becoming more noticeable)	
Other(s) – please state:	

4. Have perimenopause/menopause symptoms impacted on your life in any of these ways? Tick all that apply

Family Life	
Job/work	
Social Life	
Mental health	
Physical health	
Relationships	
Other(s), please state	

5. When did you start to look for information about perimenopause or menopause?

As my symptoms started	
A long time after my symptoms started	
Before I had symptoms	
I have not looked for any information yet	

6. If you have looked for information on the perimenopause/menopause, please tell us where you have looked, (tick all that apply):

Friends/family/peers	
Websites – e.g. NHS website	
Specific websites e.g. Menopause Society	
Social Media: Tik Tok, Twitter, Facebook, Instagram	
YouTube	
Health professionals – e.g. GP	
Books/magazines	
TV/radio	
Documentaries	
Other(s), please state:	

7. Have you been able to find the information you needed to understand the perimenopause/menopause and the symptoms you may experience?

Yes, I feel well informed	
I feel somewhat informed	
I feel I need more information	
I do not feel I have found any suitable information	

8. Where or what has been the best source of information and support for you regarding the perimenopause/menopause?

9. Why did you find this information useful?

10. What do you think could improve awareness and information about perimenopause/menopause?

11. Do you think there are any barriers to accessing support and information about perimenopause/menopause?

12. Is there anything else you would like to tell us about your experience of perimenopause/menopause?

13. If you have tried to speak to a healthcare professional about the menopause, do you feel they had sufficient knowledge to support you?

Equality and Diversity Monitoring

We seek to involve all our community in the work we do. We monitor this so we can identify significant trends and differences between groups to help us be more inclusive and to remove any unfair barriers. To ensure equal opportunities, please help us by answering the following questions. All responses in this survey are anonymous. Thank you for your help in this.

14.	Please tell us your age:	
	0-12 years	
	13-15 years	
	16-17 years	
	18-24 years	
	25-49 years	
	50 to 64 years	
	65 to 79 years	
	80+ years	

15.	What is your ethnic background?	
	Arab	
	Asian/Asian British: Bangladeshi	
	Asian/Asian British: Chinese	
	Asian/Asian British: Indian	
	Asian/Asian British: Pakistani	
	Any other Asian/Asian British background	
	Black/Black British: African	
	Black/Black British: Caribbean	
	Any other Black/Black British background	
	Mixed/Multiple ethnic groups: Asian and White	
	Mixed/Multiple ethnic groups: Black African and White	
	Mixed/Multiple ethnic groups: Black Caribbean and White	
	Any other Mixed/Multiple ethnic group	
	White: British, English, Northern Irish, Scottish, Welsh	
	White: Irish	
	White: Gypsy, Traveller or Irish Traveller	
	White: Roma	
	Any other White background	
	Any other ethnic group (please specify:	

16.	Please tell us which gender you identify with?	
	Woman	
	Man	
	Non-binary	
	Intersex	
	Prefer not to say	
	Prefer to self-describe:	

17.	Please tell us which sexual orientation you identify with:	
	Straight/heterosexual	
	Gay Man	
	Gay woman (lesbian)	
	Bi-sexual	
	Asexual	
	Pansexual	
	Prefer not to say	
	Prefer to self-describe:	

17. What is your Postcode (first 3 characters)?

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Many thanks for sharing your feedback with us.

Privacy Statement:

For this survey, we do not ask for or store any personally identifiable information. For more information, please see our privacy statement: [Privacy | Healthwatch Bolton](#)



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