

TITLE

CHANGING IN PUBLIC: Addressing the invisibility of menopause for working women in South London, using scenographic practice and ethnography-based theatre

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DATE DEPOSITED

22 September 2022

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VERSIONS

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Appendix A: Ethics 1 Approval



St Mary's
University
Twickenham
London

27 November 2017

SMEC_2017-18_025

Hilary Baxter (A&H): 'Designing for ethnodrama: the menopause (a practice based research project)'.

Dear Hilary

University Ethics Sub-Committee

Thank you for re-submitting your ethics application for consideration.

I can confirm that all required amendments have been made and that you therefore have ethical approval to undertake your research.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Conor Gissane'.

Prof Conor Gissane
Chair, Ethics Sub-Committee

Cc Prof Mark Addis; Dr Michelle Paull

Appendix B: Semi-structured interview questions

Questions for Menopause Awareness Group members on setting up the Menopause Support Group in XXXX Council

Spoken permissions for recording purposes

- a- Her name, the date and the venue (not mentioned by name),
- b- Briefly how we came to be in touch about this subject.

HB - The stated reason for the interview: Setting up the Menopause Support Group

1. Tell me about why you set up the menopause support group.
 - a. -how many times has it run?
 - b. -what's the structure?
2. What the response has been from the people who attended?
 - a. - positives?
 - b. - any negatives?
3. What has the response been to your initiative from your management?
 - a. -positives?
 - b. -negatives?
4. Have you heard about any other similar initiatives in the workplace?
 - a. -what about local (not workplace) menopause supporting initiatives?
 - b. -where would you like to see this initiative heading?
 - c. -do you see this as something you plan to carry forward-and for how long?
5. Can you put into words your own experience of the menopause?
 - a. -in the workplace?
 - b. -personally?
6. Which debates around the menopause do you think important/ would like to see staged?-
7. How would you usually describe yourself?
8. How would you like to see yourself portrayed on stage?
9. As we close this interview is there anything further that you'd like to add?

HB- I'd like to make an arrangement to do a follow up session if you'd like to reflect on what we've discussed today and add anything further.

-Make follow up date at least three weeks after.

Appendix C: IPAI Full transcripts

INTERVIEW 1

Transcription A

Recording 1

She says her name- the twenty-seventh of December two thousand and seventeen, we came into contact because I saw that you were doing something on the Crest, when I went to the Crest study day and I saw there was menopause mentioned so I tracked you down.
Ok so...*cut recording*

Recording 2

HB: OK. *recording noises, paper turning, rustling, muffled voice*

HB: (00:10) So, erm just to confirm, that, we have been through the permissions (Sus@n: mm) and that you are happy to continue with the interview,

Sus@n: (00:17) u-huh

HB: And that we have signed um everything off and we have also taken the photograph.

Sus@n: Yep

HB: And I just wanted to, um, get for the er recording,

Sus@n U-hm

HB: you made some comments, while we were taking the photograph about, about the photograph,

Sus@n: Oh yeah

HB: and I'd, I'd just like..

Sus@n: I'm finding it hard to raise a smile at the moment for the last three months, I've been (pause) in the miseries and it's been very difficult cos I thought that I was coming out of them. (00:48) I'm nine years into this so I thought I was coming out of, that, terrible place and it's not the deepest part of the pit, it's like a ledge on the pit,

HB: hmm (papers rustling)

Sus@n: but I think it was to do with my mum having a very bad fall and, just having, I think it destabilised me again and so it meant that, I just, my cognitive processing went out the window again, I, my mood went out the window again, my whole endocrine system got unbalanced again and it's just been really difficult, and now I've managed to come out of it, a lot more, but it's still not, you're just even thinking it's Christmas just taking it out of me, its nonstop work, non-stop family juggling of wrangles and this and that and my sister just told me she's moving to Wales, um, or Monmouthshire, I think it's England, where ever, umm, I just feel like I'm hardly keeping my head above water, I feel like I'm drowning the whole time, and it wouldn't, be so bad, if I worked in a loving, kindly workplace...

...and when I was very ill with the menopause (*in breath*) I had that thing of crying all the time and, not being able to be in, in possession of myself as a normal professional, and I'm somebody who, I kind of, sort of manager roles, I was quite a senior manager, I was taught by, I had a lot of male mentors who were amazing and they would say things like, you know 'ask, forgiveness not permission' and they taught me to be more blasé, than I had been encultured to be as a girl, and as a woman, and so I was quite a confident manager, and I would address a thousand people without batting an eyelid, and still with the singing you know, I still do do big things like that but, I don't find it, easily in myself anymore, but umm,
HB: Mmm

Sus@n: to, yeah, and with, with the politics that goes with being a senior manager I found it really difficult to, bear the thought of doing that, as well as juggling the xxx work side of it,

so what I chose, I chose to come into this different area of xxx work not xxxx work but xxx work in this gentle way,

HB: mmm

Sus@n: ...

...anyway, what happened with the menopause is been like this cognitive processing melt down, not being able to cope with lots of different kinds of tech, not being able to remember anything, being super anxious and super stressed at everything, therefore not even being able to able to achieve a basic level of competence, for a long time as I tried to manage my Thyroxin levels with the GP, who doesn't know that much about it. I got quite a lot of help from that GP though, they really tried to, (in breath pause) support me, in juggling, so we juggle my meds, we don't stick to a a same dose and she also sent me for a great triaging service that we have in Obs & Gyny at the University which is um, a kind of a personalised HRT service and all, I di, didn't really take much from it other than validation, so lovely, this Doctor N and I tried to get him to come and speak at the council. He was lovely, I don't know what the other ones are there's quite a (hesitant) few of them that specialise in the menopause, and that kind of thing, (breath) umm, cos I was scared cos my mother-in-law died of idoepathic cancer from I presume from her HRT, but in my family I don't think that there is that predisposition so now that I'm not as depressed and worried thinking about should I go back and get some little HRT to be getting on with, but (pause) it's still scary, and I watch the Kirsty Wark programme where they said it was all 'overblown', he sat, (loudly) the guy sat down, DR N and he sat down and went through all the risks and he said that everything's up to you, we can do this little thing for that symptom, and this little thing for that symptom, and it was really like, it's a one shot thing, you go there and then they advise your GP and then you go back and then they, anyway I think I've right off the question. Sorry, what was the question?

HB: we're good (quietly)

HB: Erm, uh (coughs) er the, er, you've answered some of the questions before we've got to them, so that doesn't matter, or that's a really good thing, because I think you've be able to put an awful lot together, (cough) *rustle* I'm just going to draw you back, to the menopause support group...*overlapping*

Sus@n: what was it? oh yes, why I started it...

HB: to talk about...why you...well put you back there, when you started it and what you...

Sus@n: So, when I first came, I'm someone that's always taken part in, trade unions and networks, um I see them as enriching, they appeal to my kind of multi-interested, renaissance woman kind of person that I am, I don't like to just do my job, I like to be involved in lots of different things, they are also a way to work strategically and in policy without doing all the boring shite like that goes with those jobs normally

HB: mm

Sus@n: So, I signed up for everything, I fit a lot of the characters, er categories, I'm queer, so I'm in the queer group, um, um, I'm a carer, I've got various disabilities that have been with me a long time, and I personally perceive the menopause as a disability for people who get it like me, not for everybody, some people love it, the head of public health loves it here, she's like it's the best thing that ever happened to me, so there's very, I am aware that you know, people have different experiences, (breath) but I joined it and since I joined a **woman's** network, I have been banging on about, dyou know what, the menopause, you should do something for the menopause, that'd be really good, it's really important, and I was at my lowest, lowest ebb when I came to the CCCC so I'd had one peak of wellbeing

when I got the job, real got my swagger back, it was really great, loved the interview was interviewing them, you know,

HB: mm

Sus@n: But then I, the Thyroxin, I ended up having to have too much of it, and it pushes you in the same dark place as not having enough of it. And by the time I got to the job, I couldn't find my way out of the building, I was really bamboozled really easily, all my thinking processes went, I could understand that my colleague didn't like having that come to work with him, umm was like having the lady fr who was working there before but worse, so *(pause)* um so I kept on and on about it, but I didn't have the personal agency and power and resilience to push it forward but the head of, the then chair Y she was a great woman and she knows me for years outside of here, with her community hat on,

HB: and did that make a difference?

Sus@n: I think it did make a difference, that personal knowledge, that personal relationship, because I could go 'come on Y' we're going to do, what you're gonna do and you know me, I just wouldn't be saying it, it's like a mental health thing, and I'll be using all the things that she knew about me that I'm expert in

HB: mm

Sus@n: to validate bringing it forward, cos it's just like a joke for people, or she didn't treat it as a joke, it was just like mm mm 'not sure people want it mentioned kind of thing', it was that she never said that, but that was the vibe I got, but anyway, she did take it forward, and she put her energy into it and some of the other, younger women on the network found it interesting, again like not a thing, thing they knew about, so they found it interesting, the mental health person on the network on the women's network also has a mental health network, that I'm part of, so I was mentioning it there as well, and she got behind it and saw it as a valid use of her time,

HB: mmm

Sus@n: and so, they um round about March *(pause)* was it this year? Yeah. I think it took that long really to, gather its head of steam to, kind of go through all these protocols, I hate' I hate beaurocracy, at the best of times, I've no tolerance for it at all at the moment, but there, you know you have to get things endorsed, and it's all *(sigh)* like being at really boring trade union meetings, it's got to go to this committee and that sub-committee and

HB: mm

Sus@n: then get ratified by the corporate sponsor and all of this rubbish, anyway, they put all of their effort into that, so by the time that all trickled round it was about February/May/ March umm and so they started doing presentations, so HelEn who does the mental health thing, she prepared half an hour, er we had a chat to prepare it but she basically did all the work, umm and then there's another lady who is really good on stats and research and policy who works in organisational development, she's in the network and it's a good black/white mix as well of women um so it's nice bit of diversity in the menopause subgroup,

HB: mm

Sus@n: where they're interested in things, and there are different issues for black women, there's like an extra fibroid-al kind of issue for black women in particular um *(pause)* so..

HB: and how?

Sus@n: We've had them, so we were doing them every two months, these bitesize training so how they're situated they're located as a lunchtime bitesize training of half an hour and you can just come for the half hour, get the information, but it when it's me, I blather on too

much so it takes longer than that but then there's like space afterwards to talk whereas I might do space in the middle to talk, hmm, and so that's there and we I suggested having a support group as well so I got that to be quarterly, and so that's got fantastic attendance, we're finding the people that come are mainly women who hear about it who maybe want it for themselves some of them are managers, some of them are not, but they're not coming in their management role and a few younger women are coming in their management role, we push it for the managers, we make it a business case,

HB: hmm

Sus@n: for it and we've got all stats and stuff we can give you the, the thing has notes to go with it so it's a powerpoint

HB: mmm ok, yeah

Sus@n: with notes and the idea behind that is, she's been (the mental health lady) has been taken off it by her boss, cos they don't want her to do anything ongoing and, then I've taken it on, and my job's changed and is very difficult now, lots of extra admin now, so I'm training the trainers, any women that are interested, the stuff that we do in the networks we put it as STRETCH objectives or personal development for people so that if they're shy about making presentations, (voice change?) this is good it just has it there, it's enough to deliver the notes, you don't have to have loads of anecdotes like I have, um and so I'm training people, and what I've also said is that it doesn't work very well quarterly, for the group and bi-monthly menopause training why don't we have those bi-monthly and so we'll alternate, so basically, every month we're going to have um, a thing with the menopause, what I try and do, sometimes, we have a speaker, sometimes not, sometimes they forget and let us down but whatever, it's really nice even if we don't have a speaker, women speak about their different knowledge, they share their tips, some of them have got survival strategies and things that they've found, that help them personally, we always recognising how different it is for everybody,

HB: mm

Sus@n: but women are starting to tell their colleagues you know it's the cccc we've got loads of women that are going through it,

HB: mmm

Sus@n: and have been through it, and they sit there with their little fans on the desk, and nobody mentions anything, and so what women are starting to feel is like, we poster all the time, everywhere on the fridges, where people make tea, and what we're starting to find is that women are starting to be able to mention it, you know 'you might find it really interesting' 'oh come with me, the support group's really nice', you know

HB: Do you find that you have a group of women, come regularly or is it a diff, is it very?

Sus@n: Some of the same people come, like some of us on the steering group come to all of them, uh because we're all kind of teaching umm some women come when they can, they repeat come to the support group, but a lot of women are different, every time, and what we've also done, it's really hard to get rooms here, *(HB laughs)* so, not today, cos they keep selling off floors, and with those floors go meeting rooms, *(HB agrees)* so less and less meeting rooms, but, we've experimented with having it in the open space, which is I'll show you it's this earnest cabinet

HB: oh yes yes,

Sus@n: open space, you could take a photo of it, but it was fine actually,

because we kind of took the space and it meant that women could kind of come by..

HB: just sort of listen?

Sus@n: and go at the edge, and then we could bring them in

HB: Yeah

Sus@n: But it wasn't bad, actually and people told horrendous stories and funny stories in that open space, and they we claimed it, its like

HB: yeah, yeah, It's ok

Sus@n: How they expressed themselves, I mean, you've been to one, so you know there's this kind of expansion into relaxation and ownership of it,

HB: mm

Sus@n: it's our right to be here and talk about it, it's quite a strong solidarity and sisterhood which you don't really hear those words in a ccc anymore it's not like working in CCC or somewhere where everyone's right on. It's all terribly twee and buttoned up and appropriate here, and very little solidarity for anything, (in breath pause). We don't even, yeah, there are not a grass roots initiatives, staff diversity networks, they are top down set up to improve things and the fight is always to not do the officer's jobs because they got rid of loads of equality roles, and those diversity roles,

HB: yes, yes

Sus@n: so one of the things we have to do is say we think that job is an officer's job, but then we have initiatives and work programmes and this is our, part of our thing, so we, it is an activist's role, but within the, its couched within an organisational development terms

HB: hmm

Sus@n: it's an interesting and unfamiliar to me, kind of structural space to work in,

HB: mm

Sus@n: but we can claim some power in it, so we can't be just dictated to,

HB: (*muffled*) and how does it?

Sus@n: some autonomy

HB: and how does it feel personally when you sort of suddenly realise you could claim that space, that it was going to be ok that was the space you could get

Sus@n: I think for me, personally and what others have expressed as well, it feels like, um, (*long pause*), just you feel sane, you feel like you're not making it up, that you're not bad or a failure for being all these ways,

HB: mmm

Sus@n: that it's really wrong, you kind of get, I feel empowered like, why the hell isn't this more dealt with? why the hell am I having to be in my ninth year of living like a, miserable maniac? why? I am not this person, you know maybe I am this person which is the depression that's come to me, from slipping back into it, cos I thought it was over, thought I was coming out of it,

HB: yeah

Sus@n: Um, (*pause*) but but, it allows me to stand in a place where I feel some anger, to just pathetic-ness or just wanting to die, or just wanting my life to be over, not suicidal, but just what's the point?

HB: fed up? but erm

Sus@n: There's no point,

HB: mm. mm

Sus@n: and to not be in possession of all of my faculties, the thing, that my girlfriend fell in love with me because I could trot out a stream of political whatnot, not have a sentence and the, forget where what I started off saying, you know that kind of thing, (*pause*) which is mostly what I live with,

HB: mmm (breath)

Sus@n: You know, on the other hand, you know it has really deepened my compassion for people who, live with this (visibly very moved) as a mental health xxxx xxxx I, feel very deeply for people who

HB: mmm

Sus@n: have had that kind of thing, to live with since their early twenties, you know

HB: rustling (opening tissue packet)

Sus@n: it has given me a stiller place to be with it. If you know what I mean, like stillness as opposed to trying to fix problems,

HB: mm

Sus@n: And I want to fix problems, if I can fucking fix this I will, and I keep trying, I've sent something off for some of that Serenity cream, cos I think it might have helped me previously,

HB: mm

Sus@n: *(on out breath)* I don't know. Worry about that as well giving me cancer, worry about that more than I used to,

HB:(mm)

Sus@n: as well, (pause) yeah, just that thought of just wanting everything to stop, I can't cope with anything, can't cope with work, can't cope with bullying people, can't cope with rudeness, didn't even get a christmas card from my colleague, you know there are some pretty sick people working in XXX and XXXX I'm finding, a bit more civilised in xxx.

HB: Cause you said something just there about less tolerance, or

Sus@n: I take everything to heart so much.

HB: No tolerance for certain kinds of things and I wondered if you could sort of say a bit more about that?

Sus@n: what did I say?

HB: You were talking about the no tolerance in terms of

Sus@n: oh bureaucracy, I mean I'm a

HB: yes

Sus@n: My career has been in and out of local government and why I go out of local government is cause it's such a dreadfully bureaucratic slow, you know, I'm an entrepreneurial person when I'm in local government, but if there's too much red tape, I can't be bothered, I just go round it, under it, through it, (breath) I don't pay it my any mind and so at the moment the chair of the women's group is super-procedural and you have to do this, before you do that, de de de der and gets really uppity if you don't go through the right procedures, and I can't be bothered I'm like get out of my (higher tone) fucking way.

HB: mm

Sus@n: That's all I feel and so, so mm a lot of my career went, the market's been right outside has been entrepreneurial, I just get out there and get the grants, I get the money, I do my project, fuck off the lot of them, you know just get out my way, I know what I want to do, you, just let me do it, instead of millions of red tape,

HB: I just wondered if there was any difference between the, the tolerant, how the lack of tolerance you had before and whether that's shifted with you?

Sus@n: The lack of tolerance with the menopause, is that the extreme mood swings, ah, before I knew that I didn't like it and I just like, take the requisite steps to get around it, now I'm enraged by it, it, I'm frustrated beyond belief about it, I am tearful and upset about it depending on how the moods are, I am depressed beyond measure about it, it's different.

Everything's hyperbolic, everything is destructive and terrible and catastrophized, I don't have a stability. I don't have a sanguinity (if that's even a word), but I'm not, sanguine about stuff, I'm just like, (pause?) It's so terrible, it's so terrible, you know if I was on Twitter and knew how to use it properly, I'd probably be one of those trolls just, everything makes me so, makes me crazy, with frustration, whereas before, it would piss me off, but that's different,

HB: yeah

Sus@n: now its tormenting,

HB: yeah

Sus@n: and very, it feels very, like I can't escape from things, because I don't feel I have my faculties properly,

HB: yeah, yeah, I understand. the um (clears throat) I'm just going to move into one or two other questions, but I may well come back to um...

Sus@n: We haven't even spoken about the personal stuff, cos I know that you wanted to talk about

HB: well you

Sus@n: talk about work

HB: well you've put quite a lot about the personal stuff in actually what you've said, you know in terms of, but (muffled)

Sus@n: Relations I've put, but not physical things, cos some of the physical things have been agonising, and dreadful and super-depressing but I know that's not, so much a workplace issue,

HB: do you, I just wondered have you heard of anything recently about the um, other initiatives in the workplace, er, I know that you did some ringing round before you started, about whether anyone else was doing anything,

Sus@n: um, we haven't heard very much really, um, we heard about the Hackney group that we thought was in Hackney council, but it isn't,

HB: that's Hands Inc- muffled

Sus@n: it's a voluntary sector project which does sound really interesting, um, but we haven't heard a great deal, but there was the government in er report in July, that came out, which gives some workplace examples mainly from the s' um private sector, or water

HB: mmm

Sus@n: people like that, so that's definitely, worth having a look at, and the mental health person is part of some good employer networks so she's been sharing around a little bit about this, cos one of our strategies is to spread our fame far and wide, so that when our managers meet people they are praising them, for what they do and they have to get on board cos, they'll be like 'huh, ok, better find out about that,' (*laughter*) that's our evil strategy, (noise), which I've learned from this school of entrepreneurs is that pincer movement, you go every which way around stuff,

HB: yeah, yeah, the um, aaand it the, I think that you may have covered the um, initiative heading in terms of your plans for it to try and get it, I wondered if there was anything specifically that you had in mind, for where you thought this might go?

Sus@n: Um, we're hoping to take it to culture board, you know culture board is about organisational culture and it has all the leaders on it, (breath) so we're hoping that, it will be taken on as a kind of half hour presentation slot, to give proper consideration to it, and to highlight for them, some of the poor management things that can happen,

HB: mmm

Sus@n: so, there might be difficulties between colleagues, quite often those end up as grievances, or disciplinaries or competence proceedings, capability issues, disability issues but people being disabled out of you know even in my own umm friendship group, I have a group of older friends and there are situations there where somebody lost their job, they did act out badly,

HB: mmm

Sus@n: but there was no compassionate response to it, they were s' they were dismissed, um and you know, a lot of the ways that the trade unions approach issues around grievance and disciplinary capabilities about retaining the workforce,

HB: mmm

Sus@n: and also being compassionate and making reasonable adjustments and stuff, and given the length of time that I've been suffering with this, the reasonable adjustments may well be helping them to think about a job change, permanently as opposed to a short term thing. But all those things could be managed, and it's a real waste of staff time, it can be very acrimonious when people feel unfairly treated.

HB:

Sus@n: so there are probably costs which we haven't worked out, if you have all of the staff time involved in a grievance or disciplinary procedure, or capability hearing, and then there's a tribunal and all that stuff. That's all a lot of money and time and it's a terrible experience for everybody not just the person but for the managers, it's a pretty horrible experience as well.

HB: mm

Sus@n: so, that would be some of the things we want to highlight, let's, let's get all of the managers trained in the menopause,

HB: mm

Sus@n: because, these things are the consequence if you don't. So we would like to see all of the managers trained and we would like it to be mandatory training, if possible, umm we would like to see on the leadership training, we have different types of middle leadership training, as well as the networks have their own leadership trainings

HB: yeah yeah, yeah

Sus@n: alongside, or parallel, although a bit different, so we would like to really see it taken up there,

HB: yeah

Sus@n: and then we also have an external facing faction umm, we'd like to look at GPs because what we're hearing time and time again, in the support group, is that women are saying 'my GP won't help me at all with this, until I haven't bled for a year', and that's so wrong, that's so wrong,

HB: mm

Sus@n: and so we think that it can be reached by commissioning,

HB: mm

Sus@n: and so, we're trying to make those relationships, to find who are the influencers, what do we need to do? To get that to be not something that I hear at every single support group, every single, almost every support group, the women are saying, 'I thought I was losing my mind' so it's not the hot flushes they're complaining about, it's the mind, either the mood or the processing.

HB: mmm

Sus@n: One or the other, um but that (breath) just makes me want to stab people, and that's what I mean about extreme response I just, I feel so enraged, I'm beside myself, at least I have choice in my GP's surgery and at least I had a GP that knew that she didn't know enough about it and get, put me to the right GP in the surgery, (pause) and I thought that that wasn't a great experience, cos it took me four years, to get tested cos they just kept going no no not doing the right tests, till I googled what I was supposed to find and pause, but these also women they are like maybe, single GP practices, or maybe just ordinary group practices,

HB: mm

Sus@n: it's outrageous, (whispers) it's outrageous,

HB: mm

Sus@n: honestly, (very quiet) just speechless about it (breath)

HB: so where would you? umm, (pause) What would you say? About your own menopause? In terms of, you've touched on quite a lot, in terms of,

Sus@n: It's the worst thing that's ever happened to me, it's worse than my father dying, and his dying was terrible, he took four years to die, mother went psycho after it, suicidal, extreme psychosis, sleep deprived psychosis, it's worse than that, it's so protracted, it's ruined my life (pause), I feel very disabled by it, (pause) yeah, and the fact that my body is not sexually responsive in the same way kills me, I thought I had cancer because of the sharp pains, I've got that side of it resolved by topical oestrogen,

HB: mmm

Sus@n: but still, you know probably that's not something you probably want in your workplace play, but I, I had a fabulous sex life, I was very very attuned to myself, you know you come into your sex life I later, a lot of women we take time to come into (hard laugh) had a few good years and then fuck this. But what's happened? but, (sadly) you know, it, for it to have been so glorious slowly coming into that and then, to all have been taken away, and the body not to, it's the libido, but also the body isn't linked up, it's got a bit better, which gave me hope,

HB: mm

Sus@n: but it hasn't got (pause) much better

HB: mm

Sus@n: (slowly) still sub-optimal definitely,

HB: mm

Sus@n: (pause) I hate that, I just hate it, (pause), so I don't know if that can be dealt with but I'm feeling more like going back to the GP um Dr N to try and get help with that,

HB: cause you also talk about validation, and the validation through the doctor, and the fact that...

Sus@n: so lovely, he just took my hands and 'darling, tell me everything', stroking my hand, it sounds creepy but it was lovely, there's nothing creepy about him, he was really lovely and he took time and he took all the information, and I was like really agitated cos I'm always agitated seeing a professional expecting to get nothing, and he calmed me down, he was de-escalatory,

HB: mmm

Sus@n: yeah, (pause), was really beautiful and forty minutes I had with him, no sense of rush,

HB: mmm

Sus@n: and he was like 'any time you want to come back, you just ask your GP you just get to go back to them', and so you're not under them like you are with a bad hip, you're under a consultant, it's a one thing you go, you get advice, they tell your GP in a letter, and then if you need to come back and use it again then you can.

HB: and what, and you also talked about coping strategies, and I just wondered what you would sort of, what you found that worked the best?

Sus@n: in work?

HB: in, in, in your menopause generally? More, more about you really, than the workplace at this point. (muffled) work...

Sus@n: I think it helped, me to take action and to feel I was reaching out to people but what helps me was just keeping on trying to get the drugs right, the thyroid level, some other, sometimes different natural things help but because it's a changing situation, it's really difficult to find stability in any of that, I also paid a lot of money for Tomatis¹ therapy, which is to do with the cognitive processing and that has made a difference, umm, but it is also at the same time quite discombobulating while it's going on, and so the most recent time was when I probably shouldn't have done it. Cos it's like every six weeks or so you have to listen and have the brain treatment, umm, and I found it very agitating and de-stabilising that time, so I maybe should have waited till I was calmer (breath) umm but that that has helped me to get on top of things at work, and what I have fleetingly I have fleeting senses of my job's really easy, I just have to do this this and this, have a deep overview, have a hope fullness have a good sense developmentally of where I will take this, this bit of my job, that bit of my job, stuff that is normal, in the workplace,

HB: mmm

Sus@n: I don't have that most of the time, I'm just drowning in data entry, it's not a job that I would have chosen, that's the bit that they put another person's job on top of mine, so I do two person's jobs, breath umm pause have kept going on, having a decent boss and having another decent boss, like they were only short term both of them, but that's been the most stabilising thing for me because the boy's more same with that as well,

HB: mmm

Sus@n: working in a hostile environment is not helpful

HB: and, and what about outside of the workplace,

Sus@n: and outside the workplace, doing less, cancelling everything, just, my life is much smaller than it was, you know, for many years I couldn't travel, I couldn't go to Kings Cross on the train to see somebody, just sort of everything was too much so I remembered Oprah Winfrey, I remember her restoring your spirit, section, it's really beautiful and I just remember all those women talking about being quiet, doing meditation and get my tepee in the garden,

HB: mm

Sus@n: those Americans, but, it was you know it's nice so (pause) doing things that make me happy going for horse rides, going trampolining is very good for the brain, doing sort of exercise that's uplifting, clubbersize, zumba, that, I do that for my mind, I think I get a little

¹ The Tomatis® Method is a natural approach to neurosensory stimulation. Its listening programs change the music and voice in real time in order to capture the brain's attention and to develop motor, emotional and cognitive skills. Developed by the French Doctor and Researcher, Alfred Tomatis, the Tomatis® Method relies on an advanced technology and the excellence of its trained professionals on how to use it.

bit fitter but not that much fitter, maybe a bit of upper body strength, trampolining, quite good definition there (pinching arm) (breath) um, but I'm doing it for my mind, all of its for my mind,

HB: mmm

Sus@n: obviously, I don't want to be disabled like my mum, so I do need to use my body, in that way,

HB: Is that a worry for you?

Sus@n: Yeah, yeah I don't want to be like that, so we're a kind of family of the mind rather than the body, never did anything sporty together and then, kind of values sport, yeah, I've got to, I've had to learn, to learn that. I try to eat, I try to lose some weight, when you lose weight it does release oestrogen into the body, so it is like a natural HRT, so it is quite helpful thing to do,

HB: mmm

Sus@n: to do, I did lose a bit of weight, but it's getting the serotonin levels right

HB: mmm

Sus@n: which makes you crave carbs, and

HB: yes, yes

Sus@n: I found it really difficult to, the worst my menopause has been, the harder it has been to lose weight,

HB: yeah

Sus@n: (in breath) I'm going to try again, you know in the new year, see how I feel then start things over,

HB: yeah

Sus@n: not drinking so much is er is helpful,

HB: mm

Sus@n: or just drink gin and tonic and not wine, seems to make a difference, (pause) I just say no to everything and just limiting myself and (long pause) yeah, (quietly) being not who I am, seems to help, you know, I can't do what I did,

HB: mmm

Sus@n: so, I try talking to my friends but a lot of my friends are not having the same experience, or some of them are coming to it later, to some them it experiencing it now,

HB: yeah

Sus@n: so I think they get it now, they weren't very supportive before,

HB: yeah

Sus@n: or everyone's got the dead parents or the dying parents or the crippled parents or whatever, we've all got that going on, so that's really difficult to, to

HB: do you know anyone whose had a worse menopause than yourself?

Sus@n: (Pause) umm, well I think my friend that was hounded out of her teaching job, I think that experience of being hounded out of her thirty years teaching job was horrendous for her

HB: yeah

Sus@n: umm, but I don't know particularly anyone that's super worse than me, I think that I've got a had a bad one, yeah, my mum was crazy with it, even on HRT, she and my sister was like knives at each other's throats and stuff. (long pause) Mum was crazy anyway to tell what was the menopause, it was

HB: yeah, yeah, (*in breath*) I wanted to move us on in terms of um, because I'm thinking about staging, I mean we could talk a long, long time and maybe we will another time, because you know, you're a wonderful person to interview in that way you've

Sus@n: oh thank you, thank you

HB: just really opened up, um, I just before we um, draw to a close, there are, I just wanted to do the final questions, which was, 'if I said to you what would be the most important debates to stage around the menopause', what, what do you think the most important thing in terms of expressing to other people about the menopause?

Sus@n: I think it's understanding what it does to some women's minds, and how fragile that makes one

HB: mmm

Sus@n: feel and that it doesn't necessarily come out as fragility, it might come out so what people might see in the workplace, see if I'm feeling very overwhelmed, it's a bit like if you have a kid with ADD or like autistic spectrum, it's that kind of utter frustration, and though it might be like, (noise) banging around or huffing, or like next time the computer goes wrong or the photocopier doesn't work, (breath) or have horrible loads of spreadsheets to do and it isn't working cos its clunky, they always buy the cut down versions of stuff doesn't work half the time,

HB: (cough)

Sus@n: so then I can't cope with it very well, either, and I'd be tearful or super-frustrated or (breath) or really agitated, as if somebody's trying to tell you something, and then its so hard to to retain any of that, that remembering, people would be yaddering on, verbally, you wouldn't do that to somebody with dyslexia,

HB: no, no

Sus@n: or autistic spectrum, you'd know you were going to drive them into a frenzy, understanding that and understanding what it is to work in (breath) we're nice and empty today, but when that place is full of people,

HB: yeah yeah,

Sus@n: it's humming. It's buzzing, it's just so, so awful, (breath) and the its almost its almost as if if I were to staging it, in my mind it's like when I saw that thing about the dog, *Curious Incident of the Dog* and they had all the lights and swirling, that's how it is it's like an assault on the senses, stuff swirling around, stuff coming at you in different ways, like a war zone, like bombs and stuff, (pause breath) I feel like that edge of adrenalin a lot of the time,

HB: mmm

Sus@n: and that's really horrible and sometimes I like take myself somewhere really quiet to work, but there's a lot of stuff you have to do with other people as well, so it's very difficult, when (pause) the bullying boss menaced me and shouted at me and she it was outrageous you shouldn't behave like that anyway as a boss, but everything that she and he did to me made me worse,

HB: mmm

Sus@n: felt really assaulted, and I think, that people can easily scapegoat people in the workplace, or go, oh she's miserable or she's a nasty person, you know whatever, and (pause) just having that kindness to each other,

HB: mmm

Sus@n: so I try to do things that are about being kind to people, being supportive to other colleagues, when various people are including the one that was bullying me, (breath) just (pause) yeah (*in breath*) I won't be driven from this job, that's my thing, it's like I can walk to

this job and s' it will suit me and I will be able to move when I'm more well, I'll be able to face doing a more difficult job, it's just that we've had a bad OFSTED we've had a bad OFSTED cause all the XXXX teams are badly managed by bad people, a lot of the time, and so I'm not going to put myself in for that, situation, I keep looking out for what might be a nice job to move, and I haven't not found it yet, but I'm sure I will,

HB: yeah

Sus@n: or I could go back to XXX and at the moment, I want to like I'm spending these days here, (Pause) I deliberately choose to come in when it's quiet, sometimes, we have flexi-working and flexi working has really helped us, as a workplace, we can work from home if we want, depends on your manager, but you can work from home if you want

HB: yeah

Sus@n: or you can work at ten o'clock at night here in the building, there's twenty-four hour building,

HB: mmm

Sus@n: you can come in at five in the morning, if you can't sleep you can come in, and you can do work from home, for it can be done

HB: yeah

Sus@n: (in breath) those kinds of things you know, or if you've had a sleepless night, you know then you can work at, sometimes I have got up and worked, you know I can't, wake at 2.30

HB: mmm

Sus@n: whatever, I'll just come in, and do that work then, um and its really helpful to because then you, you know sometimes you're awake, cos you're worried about things, but other times you're awake, cos you're wakeful, it's the body doing stuff. Or if you need to sleep in the day cos you've been up worrying about something, and then you can work at night, and it's really great,

HB: mm

Sus@n: and that is a good thing, that they've done, they didn't do it for, the menopause, but

HB: but it's helped anyway (overlapping)

Sus@n: single best thing that they've done to help people self-manage, (pause)

HB: and, I'm gonna, this, this may be something of a multi layered question, but maybe it will be straightforward because, I um, am interested in how you see yourself, I'm wondering and it's one of those questions really where you say 'and who would play yourself on the stage?'

Sus@n: yeah, it'd be like one of those, one of those horrible creatures that

HB: laughing

Sus@n: with the ears, and the fur,

HB: oh, you mean, the

Sus@n: cackle sound and hand gesture

HB: laughing

Sus@n: what are they called? I can't remember, what they're

HB: the trolls?

Sus@n: they're called, not a troll but

HB: like a shrek?

Sus@n: the ones in before, they were like a furby thing, pointy and pointy little teeth, I think feel when I'm not well,

HB: ogre?

Sus@n: going round like a little, they're sort of, troll-like, I don't know, they were in some Spielberg film or something, but they're like these nasty little

HB: oh, like gremlins,

Sus@n: trolls, like a gremlin-kind of thing, but furry

HB: yeah

Sus@n: oh, I don't know what they're called, they had a name, but (long pause) like like one of those but, like and I just need to be like soothed, and petted or something,

HB: mmm

Sus@n: we don't even have a, we used to have a room with a bed that you could, lie in, we don't even have that now, I just need to be de-escalated,

HB: mm

Sus@n: and made to feel calm,

HB: mmm

Sus@n: but everything's high escalatory, high expressed emotion here,

HB: uh huh

Sus@n: and

HB: and how would you have?

Sus@n: so that's who would play me, scowling and miserable,

HB: and who would play you before? Who would you have been? When you were all, you know,

Sus@n: maybe Susan Sarandon, or somebody you know, (pause) like an older woman but, with a bit of balls, kind of thing, doesn't care that much, about things, bit irreverent,

HB: yeah

Sus@n: but you know proper,

HB: yeah

Sus@n: wasn't wild, never got sacked for anything, but I was a bit,

HB: bit sassy?

Sus@n: for fucks sake, kind of thing, but it wouldn't be now, it would be for FUCK'S SAKE Before it would be, like, different feel to it, pause, so yeah, in

HB: Umm I just wondered if there was anything, um we have run over time slightly, but I just wondered if there was anything that you wanted to touch upon that we hadn't talked about,

Sus@n: pause, no not really, I would just like people to think more about the mental disaggregation, the mood, the deep grief, and distress, that kind of makes everything really hard, to find solid ground again, and the length of time it goes on for some people and I know it's only some people, (pause) and that the disability side of it, I know that's a real hot potato, but I would say nine years is well in excess of two years, which is the normal disability thing that they talk about, umm so yeah, and don't just make it humourous, cos, most of the stuff that's out there artistically is humourous,

HB: mmm (quietly)

Sus@n: and I can understand, we do have a laugh in the support group as well,

HB: mmm

Sus@n: but it's not all funny ha ha, it's just not, it trivialises it to some degree, it's a tragedy, (pause) with funny moments, there's not all that many funny moments, some in the sense of solidarity, and the relief of being able to share, some of the tragedy with somebody else,

HB: mmm

Sus@n: (pause) it's not that funny, a lot of the stuff that goes on, (*long pause*) yeah.

HB: Thank you very much.

That, that's um the end of the interview, but I'm going to leave the um tape recorder running, in case there was anything you wanted to ask me at this point,

Sus@n: uh huh

HB: I mean we've talked on and off a bit, and um.... (pause)

Sus@n: not really, I think non-verbal expression is quite important, I love dance and I think movement can

HB: mmm

Sus@n: express, so much, so it would be nice if there was some movement related stuff really in it as opposed to just dialogue, I've seen some really bad plays recently,

HB: laughs,

Sus@n: laughs

HB: what have you seen?

Sus@n: Including a Jean Genet, which I really, one about prostitutes and stuff

HB: oh, *The Maids*?

Sus@n: I can't even remember it was so bad I left halfway through,

HB: oh ok.

Sus@n: (pause) yeah,

HB:

Sus@n: where its set in a brothel, yeah,

HB: I think it's the Maids,

Sus@n: *The Balcony*?

HB: The Balcony

Sus@n: yeah, the Balcony, that's it,

HB: it is a bit weird that one

Sus@n: why do you put so much into staging that? Why? but they did it, you know they, really put effort into it

HB: yeah

Sus@n: an all women production

HB: oh was that here? In croydon

Sus@n: in London, Clapham bread and roses

HB: ah ok

Sus@n: yeah,

HB: I haven't come across that, I've done the balcony with students, numbers of times so I'm sort of familiar with it

Sus@n: why WHY?

HB: because directors chose it and I think that for young people or you know for 18, 19, 20 year olds it covers some ground that I think perhaps they haven't thought about, and I think that's what people try and do, when they work with students, you know, to bring them into a set of ideas, but it

Sus@n: I just wanted to shoot myself,

HB: chuckling

Sus@n: oh

HB: muffled,

Sus@n: I'm slightly philistine, can't bear stuff that doesn't say anything useful, or interesting, well, to me it didn't say anything, maybe if I stayed till the end I would have got

something out of it, you know, and I went to see that *Crow-* That thing at the National Theatre, oh

HB: what was that?

Sus@n: oh my god, the common? Was it called the common? They had a lady with the crow and a big hat and it was all about people the odds, dreadful,

HB: muffled, rustling

Sus@n: so yeah, I hope to understand what you produce, prrrr

Laughs,

HB: I would consider it a mark of failure, if you didn't

Sus@n: loud laugh

HB: I um, bler, blh, I ha ur have no idea what I'm going to produce at the moment, we start from

Sus@n: tha's exciting isn't it?

HB: the blank slate

Sus@n: yeah

HB: and so, your interview was the first which I've done

Sus@n: ohh ah

HB: really begins to draw in, and it's putting it in, educational terms it's like a grounded theory approach, really where you start, you know you're sort of kind of clear the decks and I know fair amounts about bits and pieces of the menopause that I've picked up along the way, kind of thoughts and read loads of different stuff, in all sorts of ways, umm, but you clear all of that out of the way, and then you begin to see what, what people are asking for what they're saying and not just what they're saying but what they mean by, what they're saying

Sus@n: yeah, it's so difficult,

HB: why I want to come back in a couple of weeks time we'll just go and make that time, if that's ok

Sus@n: yeah yeah

HB: so we can go through you can check through that you're happy with, you know, what's been transcribed, see what you think it's important, I, I will say obviously, you know, I can't predict what it's going to be, but I do know, that that having spoken to you, and met YOU, this is absolutely now embedded in the first stage of whatever it is that happens, from it, so, Sus@n: Sure, sure, I know that you might not use anything from my say, but it informs your wider thinking (pause)

HB: hugely, I think that your initiative here is fantastic, I really do, and I think more power to your elbow, I'm extremely grateful I came across you for .. you know,

Sus@n: yeah,

HB: you know that was really great,

Sus@n: yeah, and I was in a better place even then,

HB: yeah,

Sus@n: you know from where I am now, umm what was I going to say? I can't remember if I mentioned the Red Moon Passage, to you,

HB: mentioned in passing I think,

Sus@n: oh yeah, cos that's a good book,

HB: mmm

Sus@n: you know, cos its quite, protracted tales women have given,

HB: but you

Sus@n: a bit like this, like an interview,

HB: yes,

Sus@n: so yes,

HB: but you, I think that from what other people's stuff that I've read in terms of what they've pulled out, I think you have a very particular understanding in terms of your body and the interaction of the chemical makeup of your body, and the kind

Sus@n: (sigh)

HB: of, the way it all fits together,

Sus@n: (sadly) I wish I had a better understanding of it, it's so frustrating,

HB: you have a better than most, is all I can say, in terms of what I've read and elsewhere

Sus@n: (quietly) I can't get it to work right, so what I'm having to, what I've got coming, I've got (pause) a lady who runs the purest carabinoid service, she's coming as a speaker, to the next day, mmm

HB: ok

Sus@n: and then I've got, one across the road who does natural health,

HB:mm

Sus@n: who's going to come and speak about the natural health things (sigh) but all of its so much more, it could be this it could be that, and when it changes, then it's not going to be that anymore, like I've got my thyroxin level, so I stopped having the hot flushes, but it hasn't helped mood as much as it sometimes does,

HB: mm

Sus@n: so it's not quite right, it's really nice not to have the hot flushes, but it's like, shall I take a bit more now? Shall I take a bit less?

HB: (mmm)

Sus@n: laughs, and or is it just because, I'm still exhausted from my mother's fall, and that's just knocked my system out and my system, will right itself, as long as I keep taking these adaptogens?, everything's so exhausting, so changeable and so puzzling,

HB: yeah, a friend of my mother's, nar, the mother of my friend said it was like wading through treacle, and I thought actually that's just how I feel

Sus@n: yeah, like, ughh, everything's just really effortful, ugh,

HB: just didn't used to be that difficult,

Sus@n: everything's difficult, just the thought of just going up the road, everything,

HB: mm

Sus@n: it's ridiculous, you feel ridiculous, you know when you think of what you've done in the past, (pause)

HB: yeah, can I now take a photograph of your workplace

Sus@n: yeah

HB: if that's alright...I would be very happy to do that

Muffled voices, crackling etc.

Sus@n: we can go upstairs and I wasn't quite sure...

End 53:08 mins

INTERVIEW 2

Transcription B:

Recording one

Hel£n: Muffled

Me: OK, would um, XXX would you like to say your name, the date and the venue, and how we came to be in touch about this?

Hel£n: Ok, my name is XXXX XXXX, I'm an advanced public Health Practitioner, mental health, first aid trainer, and chair of the staff mental health and wellbeing group, the essence of my role is to look after staff well-being, er, it's the 10th of January 2018, er it's eight forty-five and we are in Bxxxx Wxxxx House. In xxx.

Clicking sounds.

Me: Muffled.

(End of first recording)

Clicking sounds

Recording 2

Me: ok, So, would you like to just sketch in how we can to be in touch about this?

Hel£n: Er, yes, certainly via my er colleague Sus@n who I believe has worked with you previously

Me: Yes that's right

Hel£n: er when you were delivering a men an interactive menopause workshop,

Me: that's right- (clears throat) OK. So, (cough) tell me about how the menopause group came to be set up.

Hel£n: OK. We have an er, a number of staff networks here, within the organisation,

Me: yup

Hel£n: including a Women's group, um, er and the staff mental health and wellbeing network group of which I am chair. Umm those network groups have been running for a few years now, and they've gone from strength to strength. um But we've realised that there are lots of cross-overs, between the various groups,

Me: uh huh

Hel£n: Um, and I have discussed it with a number of colleagues over the years, but er, it was really when a colleague came to me in my capacity as a mental health first aider, um to discuss some of the things that she was experiencing and we talked to her and explored um, and subsequently she went to her GP and er, those issues were actually down to the menopause, um,

Me: and when was this?

Hel£n: this would have been about er a year ago,

1: 30 - Opr@h has joined- "back in 2016"

Hel£n: tail end ?

Opr@h: yeah 2016

Pause

Me: OK and she went to her, she, you recommended to a doctor,

Hel£n: yes

Me: and then what happened?

Hel£n: um I believe that she had some blood tests

Me: OK

Hel£n: and was given some xxxx management advice,

HelEn: um and actually just understanding what those feelings of anxiety and panic were around

Me: uh huh

HelEn: helped her to manage them and I believe she might have er contacted our employer assistance programme er, for some supports,

Me: ok, ok and then how did that contribute to setting up the, the support group,

HelEn: Er, what we realised was, that so few women themselves understood the symptoms of the menopause, um, almost every woman will say er 'hot flushes'

Me: (in breath)

HelEn: but um, as we all know, that there is a lot more to it than that, um, and it was really quite fascinating to open up that discussion, and I think one of the key things was that it was very much about "I thought it was just me" "I thought I was going mad" "I had all these tests for this and that" and actually it was found that these women were pretty much peri-menopausal.

Me: ok

HelEn: um and and really not expecting the things that were happening to them, both physically and mentally

Me: uh hum

HelEn: Um and so, we set up um some bite-size training er, to which we've had a very good response, um, I've actually wrote, the presentation- what we've done now is to devolve that to interested parties and they are then delivering it um throughout the organisation,

Me: ok

HelEn: and those sessions were really well attended and alternate months, er Sus@n actually has a support group meeting, so the bite-size presentations are open for both men and women, and we have had some men attending, um and the support sessions are only available to women,

Me: oh ok, I understand and um, (cough) you say that there's been a num, they've been successful, how many roughly would you say attend? At any one meeting?

HelEn: Er, I think that we've had about fifteen to twenty, it's usually standing room only,
Yeah

HelEn: we do struggle obviously with the rooms

Me: yes

HelEn: um, and so we are limited because of the capacity that we have here, um, but certainly the interest, because of the demographic of our staff are, its um, I believe, we're sixty-five per cent,

Women yeah

HelEn: women

Me: wow

HelEn: and a huge number of women are in the specified age range, but we also recognise that menopause can come early

Me: sure

from surgical intervention

Me: yes, yes,

HelEn: or genetic factors and sometimes it just happens, so er um, its, its quite a broad section of our workforce that is potentially likely to be affected,

Me: um

Hel n: and I think as well, there's been a huge under-estimation of the symptoms of the peri-menopause, um, which can go on for years

Me: yes, yes

Hel n: um, and, and can have a huge effect on the lives of working women.

Me: yeah, absolutely and er, what has been the reaction from the men who've attended?

How many men would you say have voluntarily pitched up?

Hel n: Er, I think we've only had about three,

O-yeah not many

Hel n: not many umm, but they um generally tend to be people who are quite eh, er pragmatic and open about, about issues, like that

Me: (cough)

Hel n: um, a couple of times when we first started, it got mentioned in meetings where there were both men and women present, and there was a little bit of a (pause) frisson,

Me: yeah

Hel n: shall we say, passed through the room,

Me: chuckles,

Hel n: like tumbleweed

yeah

Me: laughs,

Hel n: but I think now that, you know, people have got used to seeing posters up,

O- yeah it's a bit

Hel n: It's more out there and its like anything, I mean once, we worked very, very hard to observe, the last five or six years, is to remove stigma around mental ill health, and certainly I found that the best way to treat it is to just be as open and robust as possible,

Me: yes,

Hel n: um, and to sort of be factual and informative

Me: yes

yes

Hel n: yes,

Me: yeah absolutely and have there been any, any, criticisms? Have there been any negative responses?

Hel n: Umm, the most interesting one, the only negative response that we had have been from some women

yeah

Hel n: who've expressed um the view that 'why are you making such a fuss? you just have to get on with it. It's part of life.'

Me: a-ha

Hel n: Um. But that is actually been the only negative, we've had

yeah

Hel n: We've had masses and masses of positive um

Me: mm

Hel n: ay, that, so the most positive things have been around um, women not knowing the symptoms, um not understanding

Me: mm

Hel n: what's happening to them, so that's both physically and mentally,

Me: um yes, yes,

Hel n: um, and I think one of the really key things that's come out of it for me, (breath) has been the, the gap in the number of years between say my mother's menopause

Me: yes

Hel n: and my own

Me: yes

Hel n: Society is is a different world

Me: yes

Hel n: and now my mother would be, never admit to having periods let **alo-one**

Me: chuckles

Hel n: a menopause

Me: laughing

Hel n: and so you've got nothing handed down from generation to generation and also our mothers were less likely to be in or at work, or in senior posts

Me: yes, yes

Hel n: and the effect on women in senior posts er is that they can feel very undermined

Me: yes

Hel n: um, in fact I was just talking to a colleague in a caf  this morning, and she, she, she expressed that view,

Me: yes

Hel n: er, she was very interested in the work that we've been doing, she's a very busy lady, she doesn't always get time to come to these things, um, so er, in actual fact, the group was set up as a joint venture between the er women's network,

Me: yes

Hel n: and the health and wellbeing network um, and I think our presentation really focusses on, on the the business case.

Me: yes, does that work the best?

Hel n: yes, Yes,

Me: really,

It really does you know

Hel n: yeah

Me: wow

Hel n: the business there is a solid business case,

Me: can you just touch that in for me, in terms of what, when you say business case what do you mean?

Hel n: so, we've spoken about the demographic of our staff and sixty-five per cent women and I can't remember what percentage

43 per cent

Hel n: forty-three per cent

between forty and sixty-five

Hel n: potentially affected

Of the whole workforce,

Me: wo-ow

Nearly half

Me: That is nearly half isn't it.

Hel n: yeah, and the, the programme er was it

Yeah the *Tonight* programme

Hel n: said that was it one in four

yeah

Hel n: One in four women who are experiencing difficult symptoms have thought about leaving their jobs

Me: Really?

yeah

Hel n: and that's the business case

Me: oh yes, and that's, I see

So if we take one in every four even in our workforce, that's about three hundred people

Hel n: Yeah

Me: wow and that's a lot of people to replace when you consider the experience and the

Hel n:

and its not even the people thinking about leaving, its productivity,

Me: yes

Other areas,

Hel n: yes

Recruitment, capability, all sorts of things that go along with it,

Hel n: yes

Me: Well that's a, that's a really good business case, that I've

Laughter,

Me: So moving on then to the, the response (clears throat) to having made a business case, is it are there, is that how, how the management sort of took it up? Or was it?

Hel n: I think it was very much driven by the networks um, the networks are fortunate in that we have quite a lot of autonomy

Me: mmm

Hel n: so,

Me: coughs

Hel n: in other words, (pause) the work that is initiated and carried out by the networks, is not line managed

Me: Ok

Hel n: um and we do have protected time

Me: mm

Hel n: to fulfil er, either network roles such as chair or secretary, um but also for members to attend meetings and events,

We've got a senior sponsor

Hel n: We have who is actually Director of Public Health, Heath

Hel n: who's female

Me: I see

Hel n: Umm, so and she was very supportive of the work

Me: mm

Hel n: and umm so it's been kind of er, driven by the staff but its accepted and our chief executive is female,

Me: ok

Hel n: er she's, likely to fall into that demographic,

Me: ok,

Hel n: um, and so I think, you know, what the council's view would be er, er would be that they, (in breath) are very keen to promote their reputation and we are, we have multi award winning erm,

ploock sound

Hel n: health initiatives

Me: yes, yes

Hel n: so, it it's something that other councils have been in touch with us about,

Me: ok

Hel n: so it does actually raise the profile of the

Me: yes

Hel n: organisation,

muffled

Me: that's good,

Hel n: the organisation,

Looking

Hel n: yuh, um and the civil councils are meeting up with me to share

Me: mm hm

Hel n: the work we're doing um, but it's just really good to be in the forefront of bringing about change,

Me: absolutely, and make such a positive change, I suggest, to, to do working women, which I think is fantastic, and that's why I asked to interview you. (breath) So, um, I'm just going to move into the next question which is about other initiatives, are you aware of anyone running anything else something similar in their workplace? (coughs)

Hel n: OK well I have had a lot of involvement with um, Public Health England and the Greater London Authority,

Me: OK

Hel n: er, who have the London Healthy Workplace Charter initiative, so xxxx Council has that charter achievement level um, I have been a verifier for the Charter for about um, four years now

Me: muffled ok

Hel n: member of the steering group and then their mental health leader, I am also the borough workplace leader for other organisations that want to apply

Me: OK, yes yes

Hel n: Um, (pause) and so obviously I have had access to contacts in all London councils

Me: OK

Hel n: and we have contacted them to ask what they're doing, a couple came back and said that 'we've done a fact sheet'

Yeah

Hel n: Umm

Me: and how do you think about the fact, I I'm quite interested in the fact sheet, muffles

Hel n: well

Me: what do you think about the 'fact sheet' approach?

Hel n: I think the fact sheet approach is really something that is, there, is no more informative

yeah

Hel n: than sur, Googling it, yeah

Exactly, yeah you might as well just google it

HelEn: you might as well just Google it, I think the real value of the work that we are doing, is the contact, the human contact, and sharing of experiences, um and feelings, and acknowledgement of feelings and um its brought up a few other things around um body image, the fact that there are lot of post-menopausal women er, who actually have started to develop eating disorders,

mm

Me: oh really,

HelEn: umm due to the changes in their bodies, um and also you have a lot of role models out there, you know

Me: yes,

HelEn: the older sort, Meryl Streep and Helen Mirren

Me: yes

HelEn: and (breath) who's that woman keeps flaunting herself,

Me: exclaim

HelEn: Liz Hurley

Me: yes, sorry (laughs)

HelEn: Um, yeah and they may actually have young daughters who are in their prime

Me: mm

HelEn: you know, we all know what teenage girls can be like about their mo-others so at the point where they're very vulnerable um they may be, you know experiencing all these really

Me: yes

HelEn: conflicting emotions,

I mean it brings up ageism, stereotyping

Me: yes, it does,

Which is the other thing

HelEn: You won't find any of that on the internet,

Me: yeah, yeah

HelEn: so,

Can't find that on a fact sheet,

HelEn: no,

Me: but there was nobody else who was actually running an in-work initiative like yourselves,

HelEn: No, we also do have and Oprah has written a guidance for managers,

Me: ok

HelEn: (pause) so we kind of, sort of put out our ideas into a pot,

Yeah, we have got written resources as well as

Me: OK

And the intranet page,

HelEn: Yeah we've got an intranet page

Me: oh, that's good, yes, all of that's good, this sounds really good, I think,

So stuff is there,

HelEn: yes,

Me: yes, (in breath) And (coughs) just wondered if you could put into a few words your own experience of the menopause, it, what um, um what would you say about, you know the menopause and the workplace,

HelEn: Umm. Well, I, I, hum. I was a bit affronted cos I always thought it was a sort of mind over matter, and it wasn't going to happen to meee.

Me: (sympathetic gasp)

Laughs,

HelEn: and er, I was only forty-six and it was Christmas day and I had to keep going outside, and I thought 'what the hell is wrong with me?' Cos I'm naturally a very cold person but

Me: OK so, this was because you were hot?

HelEn: I was having hot flushes, my first hot flushes and um and I I, carried on like that for four years um, really you, thinking all the rumours about HRT, the minute you stop taking it, you age overnight and er, that wasn't going to happen to me. Um. I was going through quite a difficult time in my life, I was actually working as a lecturer for Cxxx Adult Education and Training at the time, and I do lots of training and presentations and things, and I was finding it, you know if I was struck down by hot flush when I was doing that, I just couldn't (pause) carry on, speaking

Me: mmm mm

HelEn: um, (in breath) so that, that was quite difficult and also, I was having some very, very sleepness nights,

Me; Yeah

HelEn: and then every time one of the hot flushes went off, the periods came back and I was in absolute agony, I mean I've always had problems but they were far, far worse,

Me: so you didn't take HRT

HelEn: not for four years,

Me: oh ok,

HelEn: Umm and during that time I, such a difficult time cos I lost my partner to cancer, and so I was going to through really the worst bit

Me: mm

HelEn: at that point, just went and and then, about a couple of years later I met my current husband, and about to get married again and er, suddenly started to notice symptoms that I had n't (pause) er noticed before, because I wasn't

Me: yes

HelEn: not partaking in certain activities,

Me: yes

HelEn: and as I, thought oh pff, I'm going to go to the doctors and I got HRT, and within a week I've my life back. And so much so that I was on it for ten years, and I was very reluctant to, to come off it. But actually menopause for me lasted about fourteen years,

Me: really

HelEn: yeah

Me: wow

reaction

Me: and what was the coming off the HRT like?

HelEn: Umm, I was very worried about it and I did tail it off, and I, I did get a few hot flushes but they weren't as bad as previously and gradually they've tailed off.

Me: hmm

HelEn: But I was very concerned about it

Me: of course,

HelEn: there's no way I wanted to go through

Me: no no

HelEn: again

Me: no and, and, so you feel yourself again now?

HelEn: YES, well what's left of me after, (laughing) after my stroke,
laughing

HelEn: but yes, yes, I do,

Me: OK. So which debates around the menopause do you think are important, what would you like to see really, you know sort of, dealt with, I mean, I think I have said staged, but I really mean sort of expressed or you know brought to the fore?

HelEn: I think

I think that it exists is probably the best, cos the fact is I don't think that a lot of people even know that it exists, what it is

Me: this is true

HelEn: yeh, but also when we can, we did some, we had something back from the curriculum on social care

yeah

HelEn: If they'd mention it at all, it was like a paragraph

Yeah like a tiny little

Me: oh yes, yes,

HelEn: and if you're teaching young people about periods and
sex

HelEn: contraception and the rest

Me: yes

HelEn: HIV

Me: why are we not teaching them about the

Exactly

Me: about the

HelEn: menopause

yeah

HelEn: Um, so I think as well, or as, its that recognition er of the changes in society that will happen between a mother and her daughter

Me: yes,

HelEn: and actually having some of that passed down

Me: yes as a

HelEn: and I don't know whether in other cultures that is either passed down as some kind of wisdom, whether its never mentioned

yes

Me: I, I think um, you're wise to consider both options cos I think that its never mentioned

At school

Me: quite prevalent, for, for the older generation, as far as I am aware

Particularly for people living longer and healthier lives and

Me: exactly

And all of that its just that, its going to happen to everybody and most people don't know it exists or what it is

HelEn: Or they think you can will it away,

Me: (laughs) Like you said mind over matter,

HelEn: Absolutely I couldn't believe

Me: and I think that a lot of us think that

mm

Me: Um, so these are kind of really focussing on you as a person, how would you usually describe yourself, I could paraphrase this in terms of 'If you were going to be played on stage

Hel£n: ahh

Me: who would you choose? Which performer, which personality in public life

Hel£n: ohh

Me: that we might all know, would

Hel£n: gosh

Me: would portray yourself?

Hel£n: I don't know, I, I, I suppose I would go for someone like, like Meryl Streep or you know, Helen Mirren, I know

Me: OK

Hel£n: I see myself as a very resilient and resourceful person who's (breath) coped with an enormous amount in my life,

Me: yes

Hel£n: um, and that's why I love my job so much, why I'm so enthusiastic about what I do

Me: yes

Hel£n: So I think somebody perhaps who um encompasses those (in breath) values perhaps,

Me: Lovely, so I'm just draw this interview to a close is there anything further that you wanted to say that I haven't managed to get my question round

Hel£n: I'm sure that er, Opr@h will fill in any blanks

yeah

Hel£n: that I may have left, so no but I, thank you for your interest in our work, and we really hope that its going to make a difference. XXXX council has a good employer scheme, and there are about thirty local organisations that have um signed up to that, we also have a er the, the XXX university hospital is a massive employer

Me: uh hm

Hel£n: we have XXX college, we have HMRC and the Department of Work and Pensions also use this building, so we hope to spread that work out to

Yes, yes

Hel£n: Everything that we do inside is wanted to go outward facing and that is our chief executive's um, kind of take on

mission

Hel£n: So that's what we want to do, umm, and we will be inviting a number of those employers to our staff network conference,

Me: yes, yes

Hel£n: and obviously we'll be doing something on the menopause

Yeah

Hel£n: So we really hope to spread that, so that's

Do it more externally

Me: excellent, Thank you so much for your time,

Hel£n: Thank you

Me: its been really lovely

Papers crackle.

General talk.

INTERVIEW 3

Transcription C

Recording 1

Muffled sounds, click

Me: muffled could you state clearly your name the date and the venue, and briefly how we came to be in touch about this subject,

Opr@h: right, my name is XXXX I'm the HR Policy and Equality manager here at XXXX, um this is Bxxx Wxxxx House in XXXX um, we came to be in touch um through, via Sus@n who came to do an interactive, um HB came to do an interactive on the menopause and Sus@n put us in contact

Me: lovely thank you for that

Recording 2

second recording starts

Me: (clicks) Right right very good.

So. Please tell me how the menopause support group came to be set up.

Opr@h: Um it really came together about the about November, um 2016, um November, December 2016, um it has always been a project that had been bubbling under, and we'd had discussions obviously when the mental health (in breath) um support group as well as with the women's group, but finally we decided in November 2016 to set it up as a sub group,

Me: OK

Opr@h: of the women's group, with feedback obviously from the mental health (breath) group, (breath) so that was when it really sort of came together and we actually got people round a table to to talk about

Me: yes

Opr@h: something in more detail,

Me: and and what is your role in the, in the group,

Opr@h: um, I'm. In the women's group, I was quietly involved with the, I was a lot involve, I was the secretary for a long time, (laughs) before I surrendered that and my job, I cover, I look, I cover all of the network groups, but obviously I have a big interest obviously in women's and BAME for obvious reasons cos I am a woman BME (laughs) but women's particularly because we didn't really have much of a women's group before,

Me: OK

Opr@h: in this council, um so um a lot of this came out of, cos I had some issues myself with the menopause that I was unhappy with,

Me: ok

Opr@h: and I was unhappy with kind of knowledge and information, so that was one of my reasons, what I had a keen interest in

Me: ok (overlapping)

Opr@h: the menopause group as well, (in breath)

Me: OK. Thank you for that, and just to er to talk a little bit about the group,

Opr@h: mm

Me: how is it set up? How does it work? And how many people come?

Opr@h: Well we have at the moment a menopause steering group, which has about 15 members, on the steering group, and it meets every two months, and that steering group more or less co-ordinates the menopause activity in the council, and as part of that we have a bitesize which HelEn has described, and we have an a support group as well

Me: ok

Opr@h: and we also have some intranet pages, some guidance,

Me: yes

Opr@h: some facts, so basically the menopause support group, um the fifteen members are on that, which is the subgroup of the women's group co-ordinates the activity around the menopause,

Me: I see

Opr@h: that's how it works,

Me: I see, and is, is it a lot of work? I mean is it extra to your normal work?

Opr@h: It is additional work, um but work, if you, g, are a member of a theory of a group any way and it's a little bit additional work, (in breath) I can feed it into more or less into my day job as well but obviously I know some people it is additional to what what their actual duties actually are,

Me: I understand, and how would you describe the um, the response of people who come, what, what are their, what do they feel about it?

Opr@h: (breath) I think the key thing is relief (laughing) it's relief, it's a lot of humour, and it's a lot of relief because I think the trouble, as HelEn said with the menopause, people really feel that 'I'm the only person in the world that's ever going through this' and with the support steering group, what we all realise is we're not the only people in the world that are going through this and our symptoms are, do cross over we're very similar, and it's great for sharing knowledge, you know,

Me:

Opr@h: and advice, cos a lot of us, we know bits and pieces

Me: mm

Opr@h: but we don't know everything, so just having those sort of discussions, are so important, I think for all of us, when we meet so,

Me: yes, yes and do you er, um have there been any negatives that, from your, you know that you are aware of? That have been said to you?

Opr@h: Certainly when I was doing the guidance there was a little bit, even from, the area I work in, I work in HR obviously,

Me: Oh ok

Opr@h: and I did hear some comments from people saying "why, why are we doing guidance on menopause?"

Me: and these are from men or or women?

Opr@h: this is from women, ironically, I never, never heard a negative problem thing from, from a man, only ever heard it from women, (breath) sometimes senior women particularly I think sometimes they, sometimes can feel a bit threatened by putting stuff out about the menopause, I think it, I can understand why, it is almost defining somebody by gender, and I think that if you are a senior woman and you've probably gone for years to get to the position you are in,

Me: yes

Opr@h: you don't want to be defined by your gender and you don't want to be "poor poor woman" she's got the issues no go let's treat her differently,

Me: yes,

Opr@h: so I can fully understand how people feel a bit threatened by it really,

Me: did they say that? or is that your assumption?

Opr@h: that was my assumption, because of this particular person's said 'Oo but it's personal, you just go through with it, get, you know just get on with it, and s' and this was a senior woman who said this to me,

Me: yes,

Opr@h: I was so I was like well don't you think other people have a lot of issues, we're we don't understand what's happening to them and she

Me: yes

Opr@h: she was very adamant that it was a personal issue you just go ahead and deal with it, it's just something you have to deal with,

Me: uh-huh, ok

Opr@h: so

Me: ok and you said that the men have never said anything?

Opr@h: um, I've never heard a negative comment from a man, yet

Me: have any of them made positive comments?

Opr@h: So, most of them have, I mean people, the men that I have spoken to have said it's good to see, you know, I didn't, most of what they say is "I didn't know" "I didn't know that (breath) there was so much in it really" that

Me: (muffled)

Opr@h: it had all these things in it well, women say that as well too, so,

Me: do you think that they're talking about, um knowledge which is only been useful in the workplace or are they interested for their own

Opr@h: I think for everybody, yeah, it's interesting if my boss is a man (obviously) (laughs) my boss has said that cos you know he's got a woman, who, a wife, who's the same similar sort of age and I think it enlightened him as well, he didn't really understand some of the issues that can affect women at that age, so I think it's just, knowledge, you know, that they, so that they understand that effects them personally

Me: yes

Opr@h: as well as in the workplace,

Me: yes,

Opr@h: so I definitely think that my colleagues working in HR its also enlightened us a little bit more as well, because, in HR we deal with a lot of the employment relations issues, capability, disciplinary, sickness, (in breath) well sometimes I don't think we thought of the menopause as contributing to any of those, and I think we're beginning to realise now that it can contribute to these

Me: ok

Opr@h: areas, so, so it's opened our eyes a little bit as well.

Me: yes and do you think that there's any advances that can be made there in terms of?

Opr@h: it is, the ch, it is difficulty because it's like how mental health was s, a couple of years ago and that nobody ever talked about it,

Me: mm

Opr@h: and sometimes (laughs)

yes

Opr@h: yeah, yeah exactly, sometimes people will go off sick and say I've got tummy ache, I've got colds and you know that there's more to it than just a tummy ache or a cold, but its sometimes people feel uncomfortable to talk about what the real issues is

Me: mm

Opr@h: is, and sometimes with women's gynaecological issues and sometimes not always, but sometimes it's connected women feel very intimidated talking about that with a male manager so I think that having that awareness out there, and having managers being aware that it might be something more than just having a cough or a cold

Me: yes

Opr@h: that there's more going on,

Me: yes

Opr@h: can make them a more, a little bit more what's the word empathetic

Me: yes

Opr@h: and a bit more open, and having the guidance specifically and

Me: yes

Opr@h: about talking about factual issues, you don't have to go into the gory details or anything like that,

Me: yes

Opr@h: but things that can help people, as in maybe I can just need to work from home a bit more, or come in a bit later in the mornings,

Me: mm

Opr@h: or change my temperature

Me: mm

Opr@h: and work in a different part of the building, where you don't have to be too specific about why this

Me: yes

Opr@h: is happening (laughs),

Me: yes

Opr@h: just makes it a bit easier,

Me: so you mentioned before about the guidance, and I'm just going to er um ask you a little bit about

Opr@h: yeah

Me: where you, when you put the guidance together where did you draw your information from?

Opr@h: From quite a few sources, I mean there was a TUC have done some guidance,

Me: yes

Opr@h: and the Royal College of Physicians I think have

Me: ok

Opr@h: also done some guidance as well, so it was really from those two areas cos they've done really quite detailed guidance,

Me: yes

Opr@h: on it so, its sort really of pulling, and a weird pulling it from those two sources, making it a bit informational, factual but as well prac, but practical more than anything,

Me: yes,

Opr@h: so people could really use it, (breath)

Me: yes

Opr@h: and not feel that we're sort of bombarding people with information, cos there's lots of medical information I'm sure on the menopause,

Me: yes

Opr@h: and we didn't want to make it too medical. We just wanted to make it more relevant to people,

Me: (in breath), and is your experience that people er that, um, generally people are happier with the written guidance or with er the, sort of bitesized?

Opr@h: its interesting I think people like the bitesize cos of the human interaction, as we said its very important to have that interaction

Me: mm

Opr@h: the guidance is a very good backup though,

Me: ok

Opr@h: cos that's you know you can't remember everything when you come out of a two hour session

Me: no no laughing

Opr@h: so at least the guidance will remind you what, what we've talked about really, Laughing

H- muffled- its validation

Opr@h: its validation really, yeah exactly

Muffled supported

Opr@h: It's supportive, its something else you can reach for that you know, if you haven't been to the bitesize, its a good way to you know, sort of remember and think "oh I forgot about that bit" and that bit particularly in the guidance we list the main symptoms, and what impact that can have on somebody's role, day to day,

Me: yes,

Opr@h: so that can be, quite helpful,

Me: yes

Opr@h: and when you, you know, it's a reminder about your it's not only about hot flushes, which everybody always thinks it is, so,

Me: yes,

Opr@h: (in breath) so

Me: its umm, it's sort of the breadth of the

Opr@h: yeah

Me: the experience

Opr@h: so much

Me: yes, that I er completely agree. So, in um, this is about the management really,

Opr@h: yeah

Me: the um, I know that we've covered the networks and how they work, I just wondered if there was, you know, if the feeling from your particular line management is is, positive or,

Opr@h: it is

Me: or neutral

Opr@h: yeah, yeah

Me: or negative?

Opr@h: (energetically) well my own line manager is very supportive and he always has been really, I mean we've just had a new director of HR so she's still fairly new to the role, so I don't think she's come across, really gone into the menopause in great detail with her yet,

Been croydonised?

Opr@h: exactly, but I'm sure, I've no reason to see why she wouldn't be supportive and obviously part of HR is, you know, we're trying to promote a better culture, a better environment for people

Me: yes,

Opr@h: look at health and wellbeing, so, so that's really what we're trying to do really so, I can't, I haven't really had many negative

Me: great

Opr@h: anything from my colleagues,

Me: that's very good, um, and, we have already spoken about other um initiatives, in the workshop and HelEn went into that in terms of the , have you heard of anything that, on the HR networks more than, perhaps the, the

Opr@h: its really interesting in that no I haven't, you know, I really do think we're pretty much pioneers in this, I mean, I have heard, you know like in the private companies-Severn Water this was in their

Me: oh yes

Opr@h: Severn Water, their HR did put together some menopause

Me: ok

Opr@h: guidance as well, and they, I think they they they put quite a lot forward, but apart from what HelEn has done with the healthy workplace I haven't really heard from any other area about, the menopause, you know, definitely not from any London councils so, (breath) so I think we're pretty forward thinking compared to a lot of others,

Me: yes

Opr@h: which is quite fascinating (laughing) so,

Me: it's also quite extraordinary

Opr@h: it is isn't it, considering when you think of the majority of women in these industries, you know, two thirds women to one third men and

Me: yes

Opr@h: and it's you all sort of think why has no-one done this before?

Me: yes

Opr@h: it's like a real no-brainer, why come it's taken so long?

Me: so why do you think it's taken so long?

Opr@h: I think it's really interesting, I don't know whether it's about, (breath) I think last year was a real sea change for women particularly, cos there's so many things that happened with the sexual harassment and women and stuff like that as well, but I also think that a lot of older women are getting to that stage where they are going through the menopause particularly celebrity women

Me: mm

Opr@h: and they're beginning to think to themselves nothing, nobody ever talks about this, I mean, I was struck by Lorraine Kelly you know, when she did a whole big thing called the "M" word on her programme,

mm

Opr@h: and that I thought that was fascinating, because I thought she's the first major woman I can see actually talking about the symptoms,

Me: yeah

Opr@h: and talking about, you know "I'm having a patch" and "I'm having these really bad flushes" and this happened to me and that happened to me and

Me: yes

Opr@h: and "I was feeling really down"

Me: ok

Opr@h: and I thought I haven't heard any woman, any b major woman talking about these symptoms, so I think is probably just almost like a perfect storm, I think because its now, in the public consciousness and then there was a "Tonight" programme last year that

Me: yes

Opr@h: came out as well,

Me: with Kirsty Wark

Opr@h: and there was a Kirsty Wark programme, so I think, the combination of things coming through, I think people are beginning to understand, it is something,

Me: yes

Opr@h: really, so

Me: yes,

Opr@h: so I think that's probably what the sea change, which is why I think we, we sort of hit the zeitgeist you know at the time that we did all what we did. So, yes so I'm just surprised that as I said it's taken this long to get to this stage,

Me: yes

Opr@h: which is really sad, (laughing)

Me: and where would you like to see this heading, where do you

Opr@h: I would like it, to definitely for managers to, have awareness in management training, because I think, one of the issues I feel with menopause at the moment is, (breath) we're too thirds women, a lot of women are managed by male managers, its not really in management training, managers can seek this guidance out, they can definitely find out about it, but it's not obligatory, for them to know about this, it's a bit like mental health, they don't have to know, about these issues, what I would like is if they had to or at least were told these issues when they went through training, their training programme, so

Me: so you see that as a council venture?

Opr@h: I would like to see that eventually, yeah eventually it should be something that, that its not just something that you seek out when you want to but, its actually part of your training programme

muffled

Opr@h: yeah,

Make a big difference,

Opr@h: yeah,

muffled

Me: no

I can send it to you,

Me: mm, that would be lovely,

Opr@h: yeah,

Its got a

Opr@h: that's the mental health report,

Its got something

Opr@h: cough

Muffled we are making a proposal but we adopt the

Opr@h: yuh,

Muffled including everyone in our will be objectives

Opr@h: yeah

Which they need to get evidence,
Opr@h: yuh, that's what we do need. yeah
Me: so it's the evidence,
Opr@h: it's the evidence,
Its another way they, they can fulfil
Opr@h: yeah, because, I think that they 're beginning to realise that wellbeing it's just so crucial to management and in productivity in the workplace, that if you don't have that element there,
Me: yes,
Opr@h: you're not gonna get the best out of your employees and this is all part of it really, so
Me: absolutely. umm So, and I'm moving now er
Opr@h: mm
Me: er into your own experience,
Opr@h: yeah
Me: of the menopause. Can you um, put into words how it
Opr@h: Wow (laughs) it was really interesting
Me: muffled in the workplace (laughs)
Opr@h: when I was, this is back in 2016 and this was about bank holiday, I remember it vividly, and I was in the hairdressers and I just felt so over whelmed, my heart started beating, I started sweating, palpitations, I thought I was going to faint, I felt awful and I thought I've never felt like this before, I don't know what it is, I just felt this, this intense fear er almost took hold of me, and I just thought, I want to run out the shop, I don't want, my friend just looked at me like "what's happening" (laughs) and I was just like "I don't know, I don't know, I just feel really really nauseous like I'm going to fall", you know so because I felt so bad I called the doctor and went and home straightaway and called the doctor and said I feel really really strange, you know, like, and she was like come and see me, come and make an appointment, (gasp) and she said well I don't know what it is but come and make an appointment, give you all the tests you know blood tests, heart tests, whatever it is. But she gave me all the tests and then she basically said it sounds like you had some sort of anxiety, some sort of panic attack,
rustles
Opr@h: and I thought I can't believe that, (laughs) I don't know what that is. Cos, I've never had anxiety or panic in my life so I was quite shocked you know,
Me: mm
Opr@h: but she said it could be because you're peri peri-menopausal and I had no idea what that was, I'd never heard the term. All I knew about menopause was, it happens to you in your fifties and you have hot flushes. That's all I knew.
Fifty-five
Opr@h: exactly, so, exactly, that's all I knew. And because I didn't have the hot flushes I never associated any of that
Me: wow
Opr@h: with anything else, but the minute she said that, I thought, well ok what about those other strange symptoms? I couldn't really sleep, I was getting really hot in bed at night,
Me: mmm

Opr@h: what was going on with that? I was having dizzy symptoms, so all of these other things that were happening to me the last couple of years, made me understand, this is what this is about, and I just thought this is outrageous, I'm an educated woman

Me: yeah, yeah, yeah

Opr@h: I'm not a s, I'm not a dummy, but I literally had to Google to find out what was going on,

Me: yeah

Opr@h: with all these symptoms.

Me: yes

Opr@h: cos nobody knew, so, I thought this is so sad, that I'm this person I don't know anything. If I don't know anything, there are thousands out there who don't know anything either (laughing)

yeah

Opr@h: or millions even, and so, so it made me really realise and that's when I spoke to HelEn and we talked a bit more about it, because, it's just ridiculous that we get to this age, and we haven't got a clue what is really going on about what it is, so, cos as I said all I knew was hot flushes and it happened in your fifties, and I thought well I'm not fifty yet, so I'm fine. (laughs)

Me: and did you find,

Opr@h: still laughing

Me: and did you find that there were affects in the workplace for you?

Opr@h: Oh certainly there was there, it was very profound that year, and that was my fifty, so I remember it vividly, I found it really difficult sitting in meetings, I remember talking about this with my manager at the time, I was getting you know, quite a lot of quite bad anxiety,

Me: mm

Opr@h: for very strange reasons, I just found it hard to sit in a long meeting, so I would say to my manager, do you mind if I leave early? Or do you mind if I don't go to that meeting cos it's a really long one? and I was really reorganising what I was doing, I was working a lot more from home, I was just trying everything to try and keep my panic levels down, I was doing CBT as well to try and sort of

Me: ok yes

Opr@h: so everything to manage it, because I just felt this fear, this anxiety and I didn't know what was causing this fear and anxiety, you know, it wasn't like I was having any issues, or money or anything like that, but, just, just unexplained you know, so,

Me: mm

Opr@h: and then obviously all the other symptoms, the dizziness and the other bits and pieces,

Me: and were, was your line manager understanding when you,

Opr@h: He was great, I couldn't fault him at all, he was really really easy about it and very you know, just like said

muffled

do what you have to do, if you need to go away for your treatment or whatever, do what you have to do, if you don't want to come in today, that's fine just let me know and what you're doing and you know he was really easy, and I think that's what made it so much better for me,

Me: yes

Opr@h: I wish every manager was like that, but I doubt that they are,

Me: and how,

H: muffled 'I was going to say that the timing of the agile working

Opr@h: Yes, it was perfect, it was perfect. Yeah, yes the add on was perfect, cos I was saying I don't know whether I could have kept my job without the agile working that we had set up,

Me: and what is agile working?

Opr@h: Agile working means you don't have to always be in this building, that you can work from anywhere, any location, you can work from home or work from another building, so if you don't really have to be here, you know, unless you have meetings or whatever it is, you can work from wherever and because we have the setup, we have the right equipment, we have skype, we have all sorts of things here

Me: yes

Opr@h: we can work from whichever location, really saved my life really, because it meant I didn't always have to be in this building, so, which was causing some of the anxiety, so, so, that happened, that lasted for about six, five to six months, a good few months before I felt quite comfortable again, so, but

Me: and how long did it go for?

Opr@h: It sort of helped that I knew what it was, I think that's what with me, I'm the sort of person that, if I know what something is, I can deal with it, if I don't know,

Opr@h: I'm, I get worse, I told the doctor now I know what it is, I feel I can deal with it better, cos I can put things into place cos I ate better, started doing supplements, I started doing yoga, I started calming down and relaxing, so all of that made a big difference,

Me: Um do you um did you find an alcohol effect?

Opr@h: yeah I did, I gave up alcohol, I gave up caffeine that was the other thing, I loved my tea, tea and coffee and lattes, I was all there, but I gave up caffeine totally after a while cos I found that caffeine made it worse, so, I actually gave that up totally, I still to this day I have limited caffeine now, I gave up alcohol, I didn't drink that much already but I gave that up, so I did really look at my diet and what I was eating, ate and drank a lot, took a lot more supplements as well so, more you know like "menopace" and more herbs and bebe magnesium, B6 and all that sort of stuff, so, so I as I definitely what I was doing and putting in myself and took up more exercise as well, so, (breath) it made me have a big overhaul of what I was doing, cos I think up till then I was taking it very much for granted,

Me:and do you feel better now?

Opr@h: certainly yeah, ten times more better than I did, (laughs) definitely a lot better, because I, I can feel the symptoms are more manageable(?) hot flush, the only thing that's getting me now I've got finally I'm getting hot flushes,

laughter

Me: laughs

Opr@h: finally getting me now but, but,

Me: laughing

Opr@h: they're definitely a lot more manageable than they were then,

Me: yes

Opr@h: so that, yes, I feel a lot better for now, so,

Really interesting in your case, I've known XXX a long time and worked with her a lot

Me: mm

And you know she's such a tour de force

Me: yes,

You know, very level headed and the change in you was really

Opr@h: profound, it was profound,

Me: mmm

Opr@h: its like you lose all your confidence, its really strange that the whole thing about people giving up their jobs I found was fascinating, cos that's how it felt for me at one stage I remember having this discussion with my manager and saying "can I do my job?" I really felt like that, I felt, gosh if I can't go to meetings, if I can't sit in long meetings, how can I do this job? and you know I was really like panicking

Me: yeah

Opr@h: thinking oh my God what do I do if I can't do this role? so

Me: yeah

Opr@h: It was really frightening it was frightening, that's what I think gets to people, if you don't have these symptoms before, because you sort of think to yourself, (breath) how do I keep my livelihood, how

Me: yes

Opr@h: do I keep this

Me: yes

Opr@h: you know if I'm feeling this bad, how do I get past this and I think you've always got to take the longer picture, now I know I have to take the long , things don't last for ever and you do know you get past the worst and that's what I learnt profoundly that as bad as it is now, it won't last for ever, you know you will get past this, (breathy)

Me: and are you aware of other women, I mean obviously through the network

Opr@h: mm

Me: but sort of other women you know well in terms of

Opr@h: Oh yes

Me: how it's affecting them

Opr@h: Oh yes, I mean I certainly know from um other, and from other girls that um and they more or less say the same as me "we didn't know anything" basically, "we didn't know anything" (laughs) it's really sad and because our parents don't tell us anything, you know, that they haven't you know my mother didn't say anything to me, she said 'Oh you had a bit of a hot flush' but then she had a hysterectomy

Me: (laughing)

Opr@h: and I was like "why didn't you tell me?" these things, the trouble is every

Me: did she have an answer to that?

Opr@h: no, she er. It was really interesting my mum cos she was very open, when I was growing up, she was really keen to tell me about periods, and about having children, because she was brought up not knowing this herself from her own mother, so she was always adamant that I am going to tell my children, as soon as I grow up, so the minute I hit eleven, she told me the whole works,

Me: laughs,

Opr@h: you know before I had anything, she'd told me everything, so I said to my mum you're so diligent telling me about periods and whatever, so I knew exactly what was going on, why didn't you tell me anything about the menopause? (laughing) so she said, or I sort of thought you'd just get on with that really, so she never really thought anything of it, but then her, she hers was a bit different, she had a hysterectomy

Me: mm

Opr@h: she went straight on to HRT she had quite bad hot flushes,

Me: oh I see, yes,

Opr@h: but she didn't have any of the panic or the anxiety that I had so

Me: ah

Opr@h: so, it was quite different, so I, that's the trouble, different people have different things, and I think that that doesn't really, and people don't tell you how long it lasts either, cos even now she says she still has the occasional hot flush, and she came off the HRT years ago, but there we go.

Me: but I'm this is a, a question to to both of you,

Opr@h: yeah

Me: would you say that once you've been through it, you tend to forget about it?

Opr@h: I think that it is, for me is it a bit like childbirth, is it that people think that sort of thing that's so bad that, forget about childbirth, but I've never had children

No me neither

Opr@h: but I'm assuming it's the same,

Me: that's true actually,

Raucus laughing,

Opr@h: that the pain is so bad and that body I'd rather forget about that now I've gone through it, and its like

Me: yes, I

Opr@h: maybe, maybe that's what women do, maybe its like self-denial you know, maybe its like I felt awful, but I just want to forget about it after I have gone through it, you know, but you know and just get on with my life, you know, so,

Yeah I think for me

I think it coincides with really tough times,

Opr@h: yah, yah,

And I suppose that it was just really all part of this lump of misery,

Opr@h: yeah

Me: mm

You know everything was

Opr@h: Yeah, yeah,

Awful,

Opr@h: Mm

And so it kind of got not lost

Opr@h: Yeah and swamped by everything else, yeah swamped

Together, um and and you know, when I did take the HRT I wish I'd done it

Opr@h: earlier, yeah that's what people say,

Yeah I wish I had, you feel you're never going to be normal again,

You know within a week,

Opr@h: you feel so much better, yeah, yeah, yeah

Hen night absolutely covered in sweat

Opr@h: wow

And yet a week later

Opr@h: you felt better,

Me: Fantastic

Opr@h: yeah

Me: So, I'm I'm drawing together now in terms of the final bits of my questions. Which debates around the menopause do you think are important? I know you sort of said
Laughter

Me: I'm just coming back saying 'what's the most important?

Opr@h: I do think we need to get more help from doctors, that I really do believe firmly, because I do feel that a lot of doctors, probably know about three sentences about the menopause and that worries me slightly because I remember the years before the, you know, I didn't know anything about peri-menopause, I didn't know the

Me: mm

Opr@h: stages, so my doctor never said

Me: mm

Opr@h: my doctor never said to me when I went to the doctor at forty-two, and said I'm really having problems sleeping, it was like you know you must be stressed or you know, Peri-menopausal was not even on the, the list

Me: mm

Opr@h: she didn't even talk about it, so she didn't mention that option, then when I said I had headaches, oh that must be because of something else, then when I had dizziness, that must be because of your ears, so you know,

All the bits

Opr@h: so it seems to me that doctors have very limited knowledge and that's what worries me slightly is that you go to your doctor and have a lot of faith and say they will help you, but they don't really know much themselves, so unless you're Googling it or you've got somebody who knows

Me: yes, yes

Opr@h: you don't know so having more knowledge I think from the medical profession would be really, really good, have teaching in schools and having you know, younger people being aware of it is also I think, incredibly hard and in the workplace, you know, having it more available here, so people know so I think just having that knowledge out there at a basic level,

Me: yeah, I'm er just going to share with you that my daughter who is coming up and er it there was a very um you know 'were her periods going to start?' they hadn't started, they were never going to start and derider 'first month, ok started, second month, 'what again?'
Loud laughter

Me: and then it was 'how long does this go on for?' and I said

Opr@h: and this is it, yeah how long

Me: until you get to my age

Opr@h: oh dear, poor mother goes on forever doesn't it
Laughter

Me: I, I agree with you I think there is optimum stage

Opr@h: yes,

Me: where actually, it would be something that the younger, young woman would sort of think its not going to last for ever,

Opr@h: exactly,

Me: there is an end in sight,

Opr@h: This is the thing, yeah

Me: and cement it as a kind of life stage,

Opr@h: yeah

Can't wait for the menopause cos periods are stopped, yes,

Opr@h: Exactly, you have that pain,

Yes

Opr@h: That's what you thought, yeah,

Thought they just stopped,

Opr@h: Especially if you had bad pains, you'd think oh great that means that I'm not going to have all these, so I do think that in schools they need to do considerably more on women's health through life, you know what is your health through life and it's it's a you know, it is a fact of life, to people's lives as is starting periods as is some people having children and so, do it as a round as a whole thing

Yes

Opr@h: Don't just focus on you know, periods and that's it, you know, so, there's more to life than that. So.

Me: I agree with you, so, ah, I'm now focussing right down on you,

Opr@h: oh yes

Me: how would you describe yourself,

Opr@h: Ha ha ha

Me: and more importantly (loud whisper) who would play you?

Opr@h: Oh god, (laughs) I don't know who would play me, I am very positive, I try always to see the positive side of things,

Yeah

Opr@h: I try not to be too negative, I try and be pretty resilient in tough times, try to be patient and I think working in the council you've got to be pretty patient about lots of things so patient, so I don't know who would play me though Oprah Winfrey is my hero so, anything she played me, I'd love that,

Yes

Opr@h: Oprah for president, great, (laughs) love to , so, cos she's a pretty positive person and she's a person that's built herself up and done as much as she could have done,

Me: exactly,

Opr@h: and she puts her money where her mouth is as well, and she has talked about the menopause apparently in the magazine,

Me: yes, someone drew that to my attention. So I am drawing it to a close now is there anything that you wanted to say that you haven't had the, that I didn't get round to asking you?

Opr@h: No, I think this is a really good project, as I said its great to have this out in the open, and have this actually really discussed and out there, as I said the zeitgeist is right now, for women so, and its just something as we said shouldn't be a taboo and

Me: yeah

Opr@h: and shouldn't be that you know, people will have to giggle or whisper or don't talk about it,

Me: yes,

Opr@h: so we're not in Victorian times, really,

Me: or making a joke,

Opr@h: or make it a joke that's the other thing is

Me: yes,

Opr@h: is that people tend to laugh about it, oh, it's just something silly, its like if you're going for those symptoms, pretty serious to you,

Me: yes yes, or your partner,

Opr@h: yeah, to both you both, impacts the whole family, impacts your colleagues, impacts you know, a wider ripple

Me: yes,

Opr@h: you know your children, if you have children, you know its all, its all the same,

Me: you know,

Only since we muffled

Opr@h: yeah

Council we have female important officers muffled females working here,

Me: mmm

Opr@h: yuh,

They have to stand all day

Opr@h: yes,

They have uniforms

Opr@h: Yes, very horrible yeah, they are a sort of a

And they don't have access to

Opr@h: Yes, breaks, yeah, yeah,

Um, yeah so those are all issues that

Opr@h: yeah, very much yeah, and I say that to people, when they're planning long meetings, it sometimes annoys me when people have meetings that go on for a whole day or six or seven hours, and say you must realise that sitting down for long periods of time can be really traumatic for some people particularly, what if you've got a really heavy period or something going on, you need to have frequent breaks and don't keep people sitting for longer than an hour or an hour and a bit, let them get up and walk around,

Me: mmm

Opr@h: and take breaks, don't just, I wasn't aware of that myself, until this period of time, but it makes me think how do you plan things when you're

Me: yes

Opr@h: when you've got a group together, think about, how people can be comfortable,

Me: and what about things like temperature

Opr@h: temperature again, I mean we can't do much in this building unfortunately, because temperature is very limited

Me: yes,

Me: is it centrally controlled?

Opr@h: in control, (coughs) it is basically controlled and but that's why the agile working is important, people can, and they can have little hand and desk um what-sit fans that you can,

Pretty much

Opr@h: So you can put those on your computers but it is limited with temperature, but there is something again we need to be aware of, when

Me: yes,

Opr@h: when we come into rooms like this, can we put blinds down? and

Me: yes

Opr@h: try and make it as comfortable

Me: yes,

Opr@h: as you possibly can for people, but we know we are limited with this building, so, (breath) unfortunately, but yes. (Upbeat) But I think that people are beginning to get that, that message, slowly but surely that is going through so, we're a bit more considerate of each other than we were before,

Me: I think it's terrific, I do, I said at the beginning, and I'll say it again I think that this is a terrific

Opr@h: yah

Me: initiative and I'm so, so

Opr@h: I'm really pleased that we're doing it and I'm glad we're pioneers as well,

Me: I think it's that important and I think its

Opr@h: yes it is

Me: sad that we should be pioneering this now,

Opr@h: it is sad isn't it, in this day and age

Me: really, but it needs, I

Opr@h: it needs to come out of the shadows, yeah, really, I mean that's why I'm so pleased with this, cos I think we've got it out of the shadows and we're talking about

We have

Me: mm

Opr@h: it so, you know, (coughs) is that the intranet page you've pulled down there,

Me: oh yes,

sort of a little overview of what we've got here,

Me: ok,

And so you've got some facts

Opr@h: coughs

About the

Me: oh, I get it,

Um, and we've got this infographic here,

Opr@h: yeah

Me: oh yes, where did the infographic come from, is that yours?

Opr@h: Yeah, no that came from the one of the yeah, royal society of the

Me: Oh yes, that's the physicians,

Opr@h: one yeah I think they put that together,

Umm so we've had a lot of stuff from this bloke we got, er a ball dit a biggit wall area in our café um

Me: OK

Um Which has had various menopause awareness week um and so here we've got um, about how we produced the guidance so there's a link to the guidance there,

Me: OK

And there's case studies,

Opr@h: hmm

Me: yes,

Er there's some comments about women's experiences we've all contributed to that. Links to lots of resources, um and you've got there's support and that there and then we've got the documents, that support the work that we've been doing

Me: yes, that's excellent

Opr@h: So it's a really good one stop shop for people

Me: yes, yes,

Opr@h: who don't know anything

Me; yes

Opr@h: to be able to find the things they need

Me: I think it is very

Me: good that you've drawn it together

Opr@h: yuh

Me: and and you sort of own it,

Opr@h: Oh yes,

Me: to be honest,

Opr@h: cos that was one of the things we really realised with this steering group, was that there wasn't any resources out there, I mean there, you know you have to Google it, if you're sort of, you know out in the big world, and there was definitely nothing internally, so

Me: mm

There's a few women who've tried to make a business out of it, by selling various supplements

Opr@h: yeah, yeah

But you know, I don't, that's not what women need.

Me: muffled

Opr@h: No yeah,

Charge to come in and talk to people,

Me: muffled

Opr@h: exactly, yeah, cos most people when they do it want to sell their own supplements and that's what this is about, so,

Me: yes

Opr@h: but we wanted to draw as much together, you know as we possibly could. I mean its interesting that even the Daily Mail, which I don't particularly read, has loads of articles about the menopause, if you Google, they do a lot of articles about things, muffled

Me: that would suggest their demographic was er

Opr@h: yeah because their demographic is what it is, you know

Absolutely, I'm afraid I'm a Daily Mail reader, yeah

Opr@h: yeah, laughs,

laughter

Opr@h: Virgin trains don't like Daily Mail these days you know they're going to stop stocking it,

laughing

Opr@h: But you know, yeah, but they have a lot of, you know, some papers definitely go into it, into quite a deep

Me: yeah

Opr@h: And in the EYE has had a few articles about that,

Me: yes

Opr@h: about the menopause as well, so it is like spot, spot the article about it(sigh)

But also we have xxx don't we?

Opr@h: We do, whenever we get anything new in we

Me: ok

Opr@h: we, we put it out,

Me: and its you or it's the steering group, or

Er

Opr@h: Its sort of any of us, yeah ny of us, if we see something, you know that we think is will be of use to others, we try to get it on an intranet page, so people can access it, so, cos we know that this is all about information and sharing, and a lot of people just don't have that information, so er, so that's why we think that this page is great, because it just gives people pointers about what things are out there, where they can go to, (in breath) because even things on there that even your doctors wouldn't know,

I know

Opr@h: Unfortunately, its really sad to say, that he

Muffled,

Opr@h: yeah, exactly, and don't you hear some terrible stories, terrible stories, yeah, and some doctors have said don't come to me unless you've stopped bleeding or whatever, that is their argument and you're like, actually but I'm going through all these things, just come to me when I've stopped and its like whats, whats that about, I mean, you, you could be up to ten years before you stop bleeding (laughs) I mean its ridiculous, but some doctors are just like that, you really have to shop around to find a good doctor that is willing to listen to you and take you seriously so,

There is something available at CUH

Opr@h: Yes, that was

Me: that was the

Opr@h: what Sus@n was saying, there's

Me: yes

Opr@h: a menopause area there,

Me: personalised HRT,

Opr@h: YES

Me: service that she found

Opr@h: yes I've heard, Tuesday

Me: it's a

Opr@h: Coughs

Me: muffled that she found it very, um er, um, validating,

Opr@h: yeah

Me: and um and really helpful I think

Opr@h: yeah, well you see most people don't know that even exists, unfortunately,

Muffled, er

Opr@h: Well no, because I think that Sus@n was trying to find out, more about who, who was actually there because there isn't we don't really have anything further of information,

So that's something we need to

Opr@h: yeah, we need to put that in, when we find out more, but I think Sus@n was investigating it, that's what she was taking up with R, or as well, I mean to, mm

Me: Lovely, I'd like to thank you very much,

Opr@h: You're welcome, glad you're doing it,

Me: for your time. I'm really pleased to have spoken to, to both of you actually, and er,

Opr@h: are you interviewing a lot of other people?

Me: umm,

(voice recorder finishes)

Appendix D: *Puzzled* script April 2018

Puzzled

playing time 30 mins. Draft 4: April 2018

Venue Croydon Clocktower- David Lean Room

Opal – Rose Akroyd

Helen - Pamela Jikiemi

Opal has been through her own menopause and is reporting back from the other side. Not all of what she says will be positive and there may be moments of bitterness, but her jigsaw doing is sometimes passive and sometimes assertive and excited. She also talks to herself sometimes, not always intelligibly, this is part grammelot, part chat. She also might possibly hum (a song) at times. The visual reference here is of Winnie in Beckett's 'Happy Days'- this is Opal's day and the jigsaw is the physical and visual metaphor for the menopause throughout the piece.

Helen is identified as a working everywoman. She is always busy, works hard, socialises hard, juggles a lot of stuff in her life, may or may not have children and a partner, really loves her work and life and is rightly very proud of what she has achieved. A fully independent twenty-first century woman of colour. Helen's narrative develops through the piece as she experiences both peri menopausal and post-menopausal symptoms.

Both Helen and Opal are composite characters based on more than one interviewee, so different rhythms indicate different participants, where necessary. The mood shift (or swings) can be quite quick. Silences occur, sometimes speeches overlap.

Pre-performance- 'Helen' is mingling in the queue with audience, she is dressed similarly to the other working women attendees and has an identity badge and pack of papers.

The audience is gathered outside together and let in at the last moment- this is the beginning of the half hour time slot. As the audience enters they are given a piece of jigsaw puzzle- every fifth piece is different either an edge piece or has a particular colour. 'Helen' gets one of these too. The audience is asked to sit in the front chairs and briefed that they should follow the instructions on the screen when they appear. As the audience enters they see 'Opal' seated at a high table, on a stool, she is facing the audience and doing a jigsaw puzzle. There is a spotlight on her. A live feed camera is focussed on her hands doing the jigsaw and a TV monitor to the side shows the pieces being picked up, sorted or fitted together. She acknowledges the audience with a faint smile, as if checking whether someone she is expecting is there. She does not recognise 'Helen'.

The overhead projector shows the scene from the jigsaw puzzle.

Slide 1- Office picture

As the audience is enters, the PowerPoint springs into life-

Slide 2- Please do not sit down

Slide 3- GREETINGS/WELCOME/HELLO

Slide 4- If you are not holding a jigsaw piece, please sit down
(one fifth of the audience will sit down)

Slide 5- If you do not have a straight edge on the jigsaw piece, please sit down
(this will leave one fifth of the audience standing)

Slide 6- If your name is not Helen, please sit down
(this will leave the actress and maybe one or more others)

Slide 7- If your name is not Helen S. Johnson, please sit down

Slide 8- Helen S. Johnson, please come to the front.

H; Umm no, what me?

silence

Slide 9- (more emphatic) Helen S. Johnson, come to the front.

Helen:*(Reluctantly)*, no, no, I think there's been a mistake, I don't, I mean I think, umm I mean, I just wanted to, umm

Slide 10- desk picture

Helen: Umm, I don't understand, why? *(to screen)* Hey is that my desk? What's going on? Why is that a picture of my computer? Um I don't er, Why? *(to the screen)* Do I have to?

Slide 11- Helen S. Johnson, come to the front (more emphatic)

(makes her way out gets part way to the front)

Helen: Umm, ok, ok. I just, no wait, I should get my bag

(goes back to get the bag- starts coming down to the front, she is carrying her bag, a coffee cup, her conference papers and the piece of jigsaw)

Helen: OK um er, Now what? What's happening? I don't know, What' m I supposed to do?

(A light comes up on the second stool- to the side- there is a package on it, addressed to her- Helen S. Johnson. She picks up the parcel and puts the coffee cup on the stool, with the jigsaw piece, puts her bag on the ground, with the papers next to it)

Helen: Oh! its addressed to me, How did you know? I mean, like where did you? umm I mean, is it really for me? Really? This seems a bit um, mad, er

Opal: *(turns her head to watch)*

Helen: *(to Opal)* Is it for me?

Opal: *(makes no verbal response, goes back to jigsaw)*

Helen: umm, my name is Helen Johnson and I work on the ninth floor in Bernard Weatherall. *(pause)* Is it really for me?

(pause)

Helen: Umm, if it's for me, should I open it?

Opal: *(turns her head to watch again, makes an 'its up to you' gesture)*

(pause)

Helen: Umm, well, I don't know, is this part of the show? I mean you know, I don't know, umm well, I do like presents, I wonder what it is, I feel I should, like you know umm,

(she opens the box, inside there is a box with a bow on the front)

I wonder if there's a card?

(turns it over looking for a note, and on the floor too)

No. Can't find one.

(to Opal:) Did you see anything fall out?

(Opal shakes her head)

oh there it is,

(picks out card opens it and reads)

To Helen S. Johnson, huh

(she shakes the box) I have no idea. Oh! it might be, no, no, I only ordered it yesterday, umm, well I don't know what to do.

Ok, so if it is for me, I wonder, I mean, what is it? It feels quite warm,

(shakes the box)

I dunno

(smells the box)

it doesn't smell of anything, and I can't see any white powder, I'm not sure if, you know, it can't, I mean I only came to, I'm not, I um, I really I, ur, so, look my name, yeah er, Helen

Helen *(to Opal)* -Hi Helen,

Opal: *(shaking hands)* Opal

Helen: so what is it?

I'm just going to see, I mean it might be, oh *(opens the box)* it's a jigsaw.

(beat) *(She looks at Opal)*

Helen: No, I don't have time for this, no no no, you know I've got so much to do and there's this big group thing coming up next week and um well, I

(Opal looks at her)

Helen: um no, I don't think so, I'm not ready to do the, *(to Opal)* it's just mind over matter isn't it? I mean 'why are you making such a fuss?'

Opal: 'you just have to get on with it'

Helen: 'It's part of life.'

(Puts the box down)

Opal: I see myself as a very resilient and resourceful person who's *(breath)* coped with an enormous amount in my life, and that's why I love my job so much, why I'm so enthusiastic about what I do.

Helen: yeah

Opal: Umm. Well, I, I, hum. I was a bit affronted cos I always thought it was a sort of mind over matter, and it wasn't going to happen to me and er, I was only forty-six and it was Christmas day and I had to keep going outside, and I thought 'what the hell is wrong with me?' Cos I'm naturally a very cold person but I was having hot flushes, my first hot flushes and um and I I, carried on like that for four years um, really you, thinking all the rumours about HRT, the minute you stop taking it, you age overnight and er, that wasn't going to happen to me. Um. I was going through quite a difficult time in my life, I was actually doing lots of training and presentations and things, and I was finding it, you know if I was struck down by hot flush when I was doing that, I just couldn't *(pause)* carry on, speaking.

Helen: uh it is really hot here, do you think the windows open? I think I might, I think I must, so hot *(feelings of anxiety and panic- takes her jacket off, puts it on table, takes off jumper too- overhead, arms get trapped in sleeves)*

Helen: so it was the last bank holiday, I remember it vividly, and I was in the hairdressers and I just felt so over whelmed, my heart started beating, I started sweating, palpitations, I thought I was going to faint, I felt awful and I thought I've never felt like this before, I don't know what it is, I just felt this, this intense fear er almost took hold of me, and I just thought, I want to run out the shop, I don't want, my friend just looked at me like "what's happening" *(laughs)* and I was just like "I don't know, I don't know, I just feel really really nauseous like I'm going to fall", you know so because I felt so bad I called the doctor and went and home straightaway and called the doctor and said I feel really really strange, you know, like, and she was like come and see me, come and make an appointment, *(gasp)* and she said well I don't know what it is but come and make an appointment, give you all the tests you know blood tests, heart tests, whatever it is. But she gave me all the tests and then she basically said it sounds like you had some sort of anxiety, some sort of panic attack, *(pause)* and I thought I can't believe that, *(laughs)* I don't know what that is. Cos, I've never had anxiety or panic in my life so I was quite shocked you know *(pause)* but she said it could be because you're peri peri-menopausal and I had no idea what that was, I'd never heard the term.

Opal: *(makes sound response)* mmm

Helen: All I know about menopause, it happens to you in your fifties and you have hot flushes. That's all I know.

Opal: but we also recognise that menopause can come early, different people have different things.

the trouble is I can't tell where it finishes,

there aren't many edge pieces

Helen: *(turning to her own table again)* Oo I have an edge piece, is it one of yours? Its purple, a bit of writing
(goes over to Opal's table, it fits on the side)

Helen: Where's the big picture?

Opal: There isn't one.
(lifts the lid, which has pieces in it, its similar to Helen's)

Helen: Was there a factsheet?

Opal: *(shakes her head)*

(Opal puts pieces in the jigsaw, Helen watches her)

Helen: *(upbeat)* I mean I certainly know from um other, and from other girls that um and they more or less say the same as me "we didn't know anything" basically, "we didn't know anything" *(laughs)* it's really sad and because our parents don't tell us anything, you know, that they haven't you know my mother didn't say anything to me, she said 'Oh you had a bit of a hot flush'. It was really interesting my mum cos she was very open, when I was growing up, *(overlapping speech with S)* really keen to tell me about periods, and about

Opal: *(as mother)* really keen to tell you about periods, and about having children, because I was brought up not knowing this myself from my own mother, so the minute she hit eleven, I told her the whole works,

Helen: you know before I had anything, she'd told me everything, so I said, you're so diligent telling me about periods and whatever, so I knew exactly what was going on, Why didn't you tell me these things? why didn't you tell me anything about the menopause? *(laughing)*

Opal: *(as mother)* I sort of thought you'd just get on with that really, so never really thought anything of it, but then mine was bit different, I had a hysterectomy, went straight on to

HRT had quite bad hot flushes, people don't tell you how long it lasts either, cos even now, still have the occasional hot flush, came off the HRT years ago, but there we go.

Helen: *(quietly)* umm, I just feel like I'm hardly keeping my head above water, I feel like I'm drowning the whole time, and it wouldn't, be so bad, if

Opal: (as herself) Society is is a different world

Helen: yes

Opal: now my mother would be, never admit to having periods let **alo-one**

Helen:*(chuckles)*

Opal: a menopause

Helen: *(laughing)*

Opal: and so you've got nothing handed down from generation to generation and also our mothers were less likely to be in or at work, or in senior posts

Helen: and, was your line manager understanding when you,

Opal: He was great, I couldn't fault him at all, he was really really easy about it and very you know, just like said

Helen: *(as manager)* do what you have to do, if you need to go away for your treatment or whatever, do what you have to do, if you don't want to come in today, that's fine just let me know and what you're doing

Opal: and you know he was really easy, and I think that's what made it so much better for me,

Helen:*(as manager)* Did you get a fact sheet?

Pause

Opal: you might as well just Google it.

(jigsaw pause)

I can't find that bit, I think it might be missing

(Helen finds the piece and puts it in the jigsaw)

Helen: aha!

(They both work on the jigsaw during this section)

Helen: I think the real value of the work that the support group are doing, is the contact, the human contact, and sharing of I experiences, um and feelings, and acknowledgement of feelings.

Opal: so this goes here (*about the jigsaw, she stands up to reach over the table*)

Helen: we've been put forward for an award you know

Opal: oh yes,
that's really good and we've also put a lot of information on the intranet.

Helen: There's guidance and an infographic.

Opal: um, a couple of times when we first started, it got mentioned in meetings where there were both men and women present, and there was a little bit of a (pause) frisson,

Helen: yeah?

Opal: shall we say, passed through the room,

Helen: (*chuckles*)

Opal: like tumbleweed

Helen: (*as interviewer*) so what is?

Opal: the business there is a solid business case,

Helen: (*as interviewer*) when you say business case what do you mean?

Opal: forty-three per cent of our staff demographic aged between forty and sixty-five are potentially affected of the whole workforce,

Helen: (*as interviewer*) wo-ow, That is nearly half isn't it?

Opal: yeah, and the, the programme er was it yeah the *Tonight* programme said that was it one in four? Yeah, one in four women who are experiencing difficult symptoms have thought about leaving their jobs

Helen: (*as interviewer*) Really?

Opal: and that's the business case so, that would be some of the things we want to highlight, let's, let's get all of the managers trained in the menopause,

Helen: (*as interviewer*) what do you think the most important thing in terms of expressing to other people about the menopause?

Opal: I think it's understanding what it does to some women's minds, and how fragile that makes one

Helen: mmm

Opal: feel and that it doesn't necessarily come out as fragility, it might come out so what people might see in the workplace, see if I'm feeling very overwhelmed, it's that kind of utter frustration, and though it might be like,

(noise off)

banging around or huffing, or like next time the computer goes wrong or the photocopier doesn't work, *(breath)* and it isn't working cos its clunky, they always buy the cut down versions of stuff doesn't work half the time,

Helen: *(cough)*

Opal: so then I can't cope with it very well, either, and I'd be tearful or super-frustrated or *(breath)* or really agitated, as if somebody's trying to tell you something, and then it's so hard to to retain any of that, that remembering, people would be yaddering on, verbally, you wouldn't do that to somebody with dyslexia,

Helen: no, no

Opal: or autistic spectrum, you'd know you were going to drive them into a frenzy, understanding that and understanding what it is to work in *(breath)* when that place is full of people,

Helen: yeah yeah,

Opal: it's humming. It's buzzing, it's just so, so awful, *(breath)*

pause

(now talking to herself while jigsawing)

and outside the workplace, doing less, cancelling everything, just, my life is much smaller than it was, you know, for many years I couldn't travel, just sort of everything was too much so I remembered Oprah Winfrey, and I remember all those women talking about being quiet but, it was you know it's nice so *(pause)* doing things that make me happy doing sort of exercise that's uplifting, clubber-size, zumba, that, I do that for my mind, I think I get a little bit fitter but not that much fitter, maybe a bit of upper body strength, trampolining, quite good definition there *(pinching arm)* *(breath)* um, but I'm doing it for my mind, all of its for my mind,

Helen: *(sympathetically)* mmm.

Ooo that fits together, there you go,

Opal: *(reading from the jigsaw)* H R T

Pause

H: (as herself) did **you** take HRT?

Opal: not for four years,

Helen: oh ok,

Opal: Umm and during that time I, such a difficult time and so I was going to through really the worst bit and I got HRT, and within a week I've my life back. And so much so that I was on it for ten years, and I was very reluctant to, to come off it. But actually menopause for me lasted about fourteen years,

Helen: really?

Opal: yeah

Helen: and what was the coming off the HRT like?

Opal: Umm, I was very worried about it and I did tail it off, and I, I did get a few hot flushes but they weren't as bad as previously and gradually they've tailed off.

Helen: hmm

Opal: But I was very concerned about it

Helen: of course,

Opal: there's no way I wanted to go through

Helen: no no

Opal: again

Helen: no and, and, so you feel yourself again now?

Opal: YES, well what's... (laughing last words become unintelligible)

They both concentrate on the jigsaw

Opal: I don't know if it's all here, do you think there's any pieces missing?

(putting the pieces together that spell Thyroxin)

Helen: *(to Opal)* for a long time as I tried to manage my Thyroxin levels with the GP, who doesn't know that much about it. I got quite a lot of help from that GP though, they really tried to, (in breath pause) support me, in juggling, so we juggle my meds, we don't stick to a same dose and she also sent me for a great triaging service that we have in Obs & Gyny at the University which is um, a kind of a personalised HRT service and all, I di, didn't really

take much from it other than validation, so lovely, this Doctor sat down and went through all the risks and he said that everything's up to you, we can do this little thing for that symptom, and this little thing for that symptom, and it was really like, it's a one shot thing, you go there and then they advise your GP and then you go back and then they, anyway I think I've right off the question. Sorry, what was the question?

Opal: Umm?

Helen: But then I, the Thyroxin, I ended up having to have too much of it, and it pushes you in the same dark place as not having enough of it.

Pause

Opal: *(to audience)* I do think we need to get more help from doctors, that I really do believe firmly, because I do feel that a lot of doctors, probably know about three sentences about the menopause and that worries me slightly because I remember the years before the, you know, I didn't know anything about peri-menopause, I didn't know the stages, so my doctor never said to me when I went to the doctor at forty-two, and said I'm really having problems sleeping, it was like you know you must be stressed or you know, Peri-menopausal was not even on the, the list she didn't even talk about it, so she didn't mention that option, then when I said I had headaches, oh that must be because of something else, then when I had dizziness, that must be because of your ears, so you know, so it seems to me that doctors have very limited knowledge and that's what worries me slightly is that you go to your doctor and have a lot of faith and say they will help you, but they don't really know much themselves, so unless you're Googling it or you've got somebody who knows, you don't know. So having more knowledge I think from the medical profession would be really, really good,

Helen: I think for me, personally and what others have expressed as well, it feels like, um, *(long pause)*, just you feel sane, you feel like you're not making it up, that you're not bad or a failure for being all these ways, that it's really wrong, you kind of get. I feel empowered like, why the hell isn't this more dealt with? why the hell am I having to be in my ninth year of living like a, miserable maniac? why? I am not this person, you know maybe I am this person which is the depression that's come to me, from slipping back into it, cos I thought it was over, thought I was coming out of it,

Opal: yeah

Helen: The lack of tolerance with the menopause, is that the extreme mood swings, ah, now I'm enraged by it, it, I'm frustrated beyond belief about it, I am tearful and upset about it, I am depressed beyond measure about it, it's different. *(pause)* You know, on the other hand, you know it has really deepened my compassion for people who, live with this *(visibly very moved)* as a mental health issue I, feel very deeply for people who

Opal: mmm

Helen: have had that kind of thing, to live with since their early twenties, you know

Opal: *(rustling opening tissue packet)*

Helen: it has given me a stiller place to be with it. If you know what I mean, like stillness as opposed to trying to fix problems,

Opal: mm

Helen: And I want to fix problems, if I can fucking fix this I will, and I keep trying.

Opal passes her a tissue

Silent jigsawing- Helen is still agitated

Opal: Um, *(pause)* how do you feel now?

Helen: Honestly?

§§ §§ *(cackle sound and hand gesture)*

Opal: Huh?

Helen: §§ §§ *(cackle sound and hand gesture)*
like one of those, one of those horrible creatures that

Opal: Ha

Helen: with the ears, and the fur,

Opal: oh, you mean, the

Helen: §§ §§ *(cackle sound and hand gesture, it makes her laugh)*

Opal: *laughing too*

Helen: what are they called? I can't remember, what they're

Opal: the trolls?

Helen: they're called, not a troll but

Opal: like a shrek?

Helen: the ones in before, they were like a furby thing, pointy and pointy little teeth, I think feel when I'm not well,

Opal: ogre?

Helen: going round like a little, they're sort of, troll-like, I don't know, they were in some Spielberg film or something, but they're like these nasty little

Opal: oh, like gremlins,

Helen: trolls, like a gremlin-kind of thing, but furry

Opal: yeah (*laughing*)

Helen: oh, I don't know what they're called, they had a name, but (long pause) like like one of those but, like and I just need to be like soothed, and petted or something, (*laughing*)

Opal: mm (*laughing*)

Pause

Helen: no not really, I would just like people to think more about the mental disaggregation, the mood, the deep grief, and distress, that kind of makes everything really hard, to find solid ground again, and the length of time it goes on for some people and I know it's only some people, (pause) and that the disability side of it, I know that's a real hot potato, but I would say nine years is well in excess of two years, which is the normal disability thing that they talk about, umm so yeah, and not just humourous, cos, most of the stuff that's out there artistically is humourous,

Opal: mmm (*quietly*)

Helen: and I can understand, we do have a laugh in the support group as well, people told horrendous stories and funny stories,

Opal: mmm

Helen: but it's not all funny ha ha, it's just not, it trivialises it to some degree, it's a tragedy, (pause) with funny moments, there's not all that many funny moments, some in the sense of solidarity, and the relief of being able to share, some of the tragedy with somebody else,

Opal: mmm

Helen: (pause) it's not that funny, a lot of the stuff that goes on, (*long pause*) yeah.

Lights dim, slide changes

Slide X- jigsaw picture as at the end of the show.

Actors acknowledge the audience- bring on HB.

Slide Y- Thanks to Menopause support group

Slide Z- Actors credits

Final slides – picture of the jigsaw at the end of the performance

cross fade to final completed jigsaw.

End with black screen

Appendix E: Lambeth permit & risk assessment

Lambeth Events - Event Management Plan Template

Event organisers have a legal obligation to ensure the health, safety and welfare of their employees, contractors, public, visitors etc during the event, the set-up breakdown and whilst accommodating the site.

The Event Management Plan is a document that is unique and specific to your planned event. This document will serve several purposes. As a clear written plan, the Event Management Plan can be considered as the blueprint to the event - how the event will be safely executed and delivered. As a working document it can be amended and updated as necessary in the lead up to the event. Below is a useful template that can be adapted for any event.

Introduction	
Date of Event	Sunday 30 th June
Location	Walled Garden, Brockwell Park
Event Title	The Missing Women Statues
Outline of Event – programme of event	<p>Hilary Baxter (artist and producer) will install five statues (on live female models) in the Walled Garden for viewing on one afternoon only. Visitors are invited to vote on their favourite statue.</p> <p>There will be a small information point outside the garden, with flat posters displayed, potentially in the Temple portico, and a second, smaller information point for voting directly opposite the entrance on the grassed area. One or two small gazebo covers may be needed for the information points (outside the garden), in case of rain.</p> <p>The statues will be standing on wooden plinths, installed at different points of the garden, on the paths where it is possible for the garden users (including wheelchairs) to pass without obstruction.</p> <p>The statues will be in place at 2.30 pm until 3.10 and then again from 3.30 until 4.15pm. The statues will leave and the installed pieces will be removed.</p> <p>Question: Is it possible to cover any of the existing park benches with covers? If they have no dedications on them? So I can put</p>

Lambeth Events - Event Management Plan Template

	<p>a statue in front of them?</p> <p>Note: I would like to explore the idea of installing a (new) model house with the other model houses already situated by the Walled Garden entrance, as one of the statue ideas has been inspired by Ibsen's 1879 play <i>A Doll's House</i>.</p>
Who the event will be aimed at	General park audience including families.
Times of event	2.00pm- 5.00pm
Approx number of attendees	Approx. 50 invited guests plus general park users.
Advertising/promotion used:	Local press, Park noticeboards, Posters, Personal invitations
Organisation	
Event structure chart-roles and responsibilities	Hilary Baxter- Artist and Producer
Contact numbers of key personnel	Hilary Baxter
Boundaries of site	Please supply event map with a key. Attachment following.
Crowd Management	
Access/exit points	As per the Walled Garden
Fencing	no
Signage	Yes, outside garden, display signs next to models.
Security/Stewarding (numbers and positions)	Two positions outside Walled Garden Temple and directly opposite the gate. One steward inside the garden entrance, two other stewards in different areas of the garden.
Communications(between staff and public; staff and staff)	Face to face- staff and public Mobile phones- staff and staff
Traffic Management Plan	Not needed
Facilities	
Car parking/ public transport arrangements	Only one car entry needed for delivery and picking up the plinths/signs. No parking.
Medical/first aid provision	Nearest hospital is King's College Hospital,

Lambeth Events - Event Management Plan Template

<i>– include details of the nearest hospital Emergency Department</i>	Denmark Hill. Small first aid kit will be kept on site with
Information/lost children	At voting booth opposite garden entrance.
Food/refreshments- <i>Hygiene certificates need to be obtained from all traders serving/selling hot cooked food; Food hygiene questionnaire also needs to be completed by traders – Lambeth Food Safety Team 020 7926 6110.</i>	None provided.
Toilets – <i>detail what provision and quantities</i>	Outside Walled garden- public loos
Waste management/disposal –	Litter collection after event, recycled where possible
Disabled Facilities	Disabled access enabled as per garden.
Infrastructure – please provide	
Staging	Small individual plinths provided for models to stand on.
Power- <i>Only diesel generators are permitted in Lambeth Parks and Open spaces</i>	None
Lighting	None
Tentage – Marquees/gazebos	One gazebo for voting booth Rain covers for bad weather
Other structures	
Fire, Safety and Emergency Procedures	
Access for emergency vehicles	As for park
Fire fighting equipment	As for park
Evacuation procedures	As for Walled Garden- leave by gate.
Risk Assessment	
Noise Control	
Noise levels	none
Method of dealing with complaints	Reported immediately to Hilary Baxter, who will be in attendance.
Build/Breakdown Schedule	
Plan of works, deliveries	Some site preparations at the opening of the park on the day (7.30 am). Installation of statues starts at 2.00pm for 2.30 start.
Site supervision/security	From 2.30 – 5.00 pm
De-rig schedule	Site cleared by 5.00 pm including litter and signs not in the glazed park noticeboards



Lambeth

Permit Number:
LMBEVE000277
Date of this
Agreement:
12/06/2019



events@lambeth.gov.uk - 020 7926 6207

Agreement to hold an event in Lambeth

Title of event:

The Missing Women Statues: Brockwell Park.

This conditional license agreement is made between:

EventLambeth, London Borough of Lambeth

And:

Event organiser company's name and address

Hilary Baxter

Further to the application made by the Licensee to hold an event on property belonging to Lambeth Council (in which application the terms and conditions that are set out in this Conditional Licence Agreement were accepted by the Licensee), the Council hereby offers conditional approval to hold the event described below at the Site(s) listed below (the "Permitted Use ") at the times mentioned below (the "Permitted Times") in accordance with the terms and conditions of this Conditional Licence Agreement and in consideration of payment by the Licensee of the fees in accordance with this Conditional Licence Agreement. The Licensee accepts and understands that there may be further relevant legislation, acts of parliament, statutory regulations, orders, guidance and codes of practice including any subsequent amendments or comparable legislation, required permission or licences which will need to be obtained before full permission can be granted by way of issuing a Park event Permit.

Venue	Brockwell Park- Walled Garden		
Location details:	The Walled Garden; entrance including the front of the temple building, the row of model houses and inside the garden itself.		
On site:	30/06/2019 12:00	On site contact:	Hilary Baxter
Start event:	30/06/2019 14:30		
End event:	30/06/2019 17:30	Ticketed:	No
Off site:	30/06/2019 19:00	Open to Public:	Yes
Event type:	General Event	Invited guests only:	No
Total Attendance :	100	Audience profile:	All ages



Event details:

Event description:	<p>Performance installation using live models wearing statue costumes, installed around the walkways in the walled garden, to be shown over the course of one afternoon, approx. three hours in duration. The focal point of the installation is the empty statue plinth in the far end of the walled garden (see above). I will offer a series of female statues for the garden, using live models. The female statues will represent women in the middle of their lives (45-55 years) to make up for the absence of representations of such women in contemporary culture- television programmes, films, portraiture and public statues. This performance is an integral part of my Drama and Healthcare PhD studentship, which is focussed on the experiences of mid-life women in the UK. It follows a verbatim performance based on interviews with founder members of the Menopause Awareness Group at Croydon Council. The statue designs will be worked from female characters based in literature, drama, history and mythology, also drawing on ideas contributed through short interviews and interactions with park users and focus groups, conducted in the three months before the event (with ethical clearance from my university). The garden users will be invited to vote on the proposed statues (on the day) using both digital and traditional voting formats, to identify favourites and give feedback on the ideas. This event will take place in the context of the inVISIBLE women campaign for more gender equality in public statuary, and as a local variant on the "Fourth Plinth" competition for Trafalgar Square, although at this time this is a hypothetical competition rather than an actual one. I suggest that this could be a future development for this work, if the event is successful. The intention of the performance event is to respect and enhance the tranquil ethos of the walled garden, so the costumed statues will be either static (placed) or moving slowly along the paths. The empty plinth itself will not be used. At present there are plans to use five or six performers in the garden at any one time, with some provision for others at the entrance. The event will be free to park users and will not restrict their usual park visit. Leaflets will be distributed in the park in advance of the day, and also on the day itself, to draw attention to the event taking place. This will be a small scale distribution. In advance there will be posters about the project and also on the day itself, with instructions (signage) on where to see the work.</p>
Benefit to local community:	<p>This is a reflective piece to enhance the atmosphere of the walled garden. Spectators are invited to comment upon the work, if they wish, or simply spectate. The intention is to raise awareness of the experience of mid life women, promoting positive ideas (visually) around the ageing process in general and experience of the menopause in particular. Park users and other members of the local community will also be invited to contribute ideas to the project in the design and making phases.</p>
Type of activity:	<p>Other, Art installation- static or very slow moving.</p>
Budget for this event:	<p>TBC</p>
Event funded:	<p>This is self-funded as a part of my PhD studentship at St Marys University Twickenham, with a small amount of funding from my university.</p>
Event activities:	<p>Other, Costumes displayed on live models with provision for spectators to comment on the work, both in a traditional voting format and digitally using QR codes.</p>
Other facilities:	<p>Lighting, Seating or tables, Signage</p>

Event Safety Information:

Required Consents and Permissions:

Leaflets distribution: **There will some leaflet/programme distribution on the day, to inform about the art event taking place.**

Specific Terms:

Special Conditions Venue: **Do not place any equipment or models in plant beds Do not block any footpaths with equipment Do not leave any waste in the park Vehicles not permitted to park in the park during event. Vehicle movement 5mph and access permitted for set up/pack up only.**

Special Conditions Schedule: **subject to event plan, site plan, risk assessment and public liability insurance**

Licencee's representative: **Hilary Baxter**

Licencee's accounts representative: **Hilary Baxter**

Authorised council officer: **Gabi Grose <ggrose@lambeth.gov.uk>**

Fees and charges: **subject to payment of hire fees**

RISK ASSESSMENT

Name of Event:

CHANGING IN PUBLIC:

Women of Brockwell Park _____

Location of Event: Walled Garden/ Brockwell Park

Date(s) of Event; Sunday 30th June 2019

Event Times

2.00pm- 5.00pm (where 2.00pm is setting up to start at 2.30 pm and event finishes at 4.30pm to be cleared by 5.00pm)

Risk Assessment

Under the “Management of Health and Safety at work Regulations 1999”, it is a legal requirement to assess the risks. Risk Assessment is also a vital part of other legislation. Specific Risk Assessments would be needed for the “Health and Safety (Display Screen Equipment) Regulations 1992, Manual Handling Operations 1992, COSHH 1999, Noise at Work Regulations 1989, Provision and Use of Work Equipment Regulations 1998, Lifting Operations and Lifting Equipment Regulations 1998 and Personal Protective Equipment at Work Regulations 1992.

Risk Assessment is a vital part of health and safety strategies for the prevention of injuries, accidents and ill health. Other benefits of using Risk assessment are: -

- An increase in staff motivation and morale.
- Improvements in the deployment and utilisation of resources
- An increase in standards of efficiency, productivity and quality.
- Lower rate of claims for compensation.
- Reduced insurance premiums.
- Reduction in uninsured losses.

If integrated well risk assessments can become part of good management practice in general.

The “Management of Health and Safety at Work Regulations 1999” define Risk Assessments as: -

“A risk assessment should usually involve identifying the hazards present in any undertaking (whether arising from other factors, e.g. the layout of the premises) and then evaluating the extent of the risks involved, taking into account whatever precautions are already being taken”.

The HSE lists the risk assessment as being a “careful examination of what, in your work, could cause harm to people, so that you can weigh up whether you have taken enough precautions or should do more to prevent harm”.

The principles of risk assessment depend on the identification of two main issues.

- **Hazards - something with an inherent potential to cause harm.**
- **Risks - are the likelihood or probability that a hazard will cause actual harm.**

Risk Assessment then evaluates the risks arising from the hazards and then gives the user the information to decide whether existing precautions are adequate or whether more could be done. The Risk Assessment should then be recorded and after a suitable period of time reviewed. A review will be needed if a process is changed and/or if new staff are introduced. The assessment of the risks needs to be suitable and sufficient.

RISK ASSESSMENT MATRIX FOR PERSONAL INJURY

		Severity					
		Multiple Death	Single Death	Major Injury	'3 day' Injury	Minor Injury	None
		10	8	6	4	2	1
LIKELIHOOD	Certain 10	100	80	60	40	20	10
	Very Likely 8	80	64	48	32	16	8
	Probable 6	60	48	36	24	12	6
	Possible 4	40	32	24	16	8	4
	Unlikely 2	20	16	12	8	4	2
	Very Unlikely 1	10	8	6	4	2	1

Notes:

The numerical scale used is to allow comparisons of the risk levels only. No literal meaning is implied by the scoring level.

'MAJOR INJURY' SHALL BE AS DEFINED IN RIDDOR

KEY TO SHADING

100	Level of risk is unacceptable.
24	Level of risk may be tolerable. Seek to reduce level of risk.
12	Level of risk is acceptable

DEFINITION OF LIKELIHOOD CLASSES

Certain	10	Has happened before and is expected to happen on this occasion
Very Likely	8	Has happened before and is very likely to happen on this occasion
Probable	6	Has been known to occur before and is likely to happen on this occasion
Possible	4	Has been known to occur before and it may happen on this occasion
Unlikely	2	Has been known to occur before but no reason to suggest that it will happen on this occasion
Very Unlikely	1	Has never happened before and there are no reasons to suggest it will happen on this occasion

Completing a risk assessment

To complete the risk assessment please follow the steps below

- 1) Identify your risk and enter it in the 'Hazard' box on the form (e.g. Trip hazard of cable from generator to fridge, both behind stall)
- 2) Identify who this would be a risk to and enter the relevant abbreviation in the 'To Whom' Box (e.g. S for staff)
- 3) Assess the risk level using the matrix provided making sure you list the severity, likelihood and overall risk (e.g. for a trip hazard the severity would be Minor Injury (2), the likelihood would be very likely (8) so the overall risk is 8x2 which is 16.)
- 4) If the risk level is 12 or less then you would not need to put in any control measure. If it is greater than 24 you will need to put in control measures to minimise the risk as this is unacceptable. If the risk level is greater than 12 but less than 25 then you should consider putting in some control measure if possible. The control measure should be entered in the "Existing Control Measure" box (e.g. all cables will be covered with rubber matting)
- 5) If you have added control measures you should reassess the risk as described in point 3 taking into account what controls you will put in place. (e.g. for your trip hazard the severity would still be minor injury (2) but the likelihood would now be unlikely (2) giving you a revised risk level of 4)
- 6) If your revised risk level is still of an unacceptable level then you should put down any additional measures that you will implement to make it safe in the 'Additional Measures' box. In some cases the additional measure may be to remove equipment from site or not operate certain items.
- 7) The comments box is for you to put any additional information in that you think is relevant to the hazard.

Appendix F: Ethics 2 Approval

From: Michael Foster
Sent: 09 April 2019 20:17
To: Hilary Baxter

Subject: RE: Research Instruments

Hi Hilary,

It all looks very good, and the form is especially clear and thorough. The only question I have on the research instruments is whether it would be better to have the consent to take part on paper rather than read out:

8.2 Semi-structured interview pro forma:

Permission form read out by participant for the recording, together with the following information:

a- Their name, the date and the venue (not using any business name)

It feels a little odd that they will be declaring their names on the data they produce as interviewees if we are assuring them that the data is anonymous. Could they just sign a consent form? Am I missing something?

In any case, I am completely happy for this to be signed off as a Level 2 (ie, no need to go to the committee).

All the best, and I hope you're enjoying your holiday,

Mike

Appendix G: PEI Partial transcripts

Photo Elicitation Interview (PEI) Partial Transcripts

Interviewer – Hilary Baxter (H)

PEI1: Olivia

Transcript:

2.0 to 9.0 nothing

9.00-12.00

Mrs Browns Boys. Don't like it. Old fashioned. Cannot bear musicals.

12.0 nothing

20.0 -I love moss

O: I love moss too, really love moss. Now you can keep your scenery to be honest, but oh look at that

H: But the hills and the mountains

O: Yeah, the hills and the mountains. Again I'm just ditching these just because it's what they represent, not necessarily the visual, umm obviously.

H: and so- what's that one you put there?

O: The shed, the shed, it just represented a little haven, a little haven of tranquillity that's just peaceful, very connected to nature, it's a rather aesthetic scene, where you just- I just feel very relaxed and I- I can gather my thoughts, I can collate, I can dismiss and disperse

H: And you said before that you have a shed that you write in, is this your writing shed

O: yeah, and it's very new, only had it a few months, and I'm just settling into it, but I just love it, cos I was in there yesterday painting and, the rain was coming on the shed and you could see it and you could see the birds, it just it just feels a little bit like posh camping, do you know what I mean?

22.0-25.0 Sunlight coming through the trees

O: Again that's rather enchanting

H: So that's wisteria isn't it? Sort of hanging round

O: its floaty, quite um, freeing because a lot of this is about being free, I've always had that, I don't just think that's a menopausal thing to be honest- but I think

H: Do you think it has become more or less since you became a menopausal woman?

O: umm... uh I think it's the same, actually. But I think it's the same... because I've more or less come out of children straight into the menopause and when you've got children you want your space all the bloody time, so it's a fine line to demarcate between the two. I've always needed my space and my time since I can remember - things being little. Just you know, just, even if it's just an hour or two in-n the day, somewhere that it's just mine, where I can just de-clutter. I think I get over-stimulated and I have t- my brain can't cope with it so I have to find a space, *whispers* which it's just like that. Like that.

H: So when you go 'like that' ?

O: like that see, that's uh-it's really hard, I don't actually know what the words are, it's just feeling... free. Its free and its open and its smooth its sensory things, they're not necessarily emotive that I'm aware of, they might be. But they're definitely to me its yeah its its that feeling – like when you drink water, and that coldness goes down you *sigh* that's its oooh. Its soothing.

Photo Elicitation Interview (PEI) Partial Transcripts

H: so it's very much of the body in the moment that the – uh – and are there smells connected with this?

O: Not so much actually, it's very much touching – this one there as well. Touch, taste, feel, um not so much hearing not so much smelling actually.

H: So all of these, are we now down to all the flowers, we've flowers and mountains.

O: We've flowers and mountains yes

H: And is there one where you would say yes I really like all the colours in that?

O: I mean I do love an English country garden-esque, so I'll ditch that one, that's the shed but its representing the shed not the actual picture. Again that's representing so we could have this lilac in this garden so– and the mountain hmm *muffled*, that's got to umm.. I mean this- I just, I have got a thing about moss and it's just, again, its sensory, touching. And that's just a very beautiful scene, as is the sunrise coming through the woods, and that's just gorgeous. That could almost still be in that country garden as well along with the- ohh and the old bee having a bit of a poke about. And then, oh yeah, this is my life

26.0- nothing

27.0- 28.0 Food, cake, chocolate

O: Foody foody

H: Foody foody

O: *Intake* well that's chocolate – well it's just food, basically. Cake! God, life without cake is not worth living, uh chocolate um, weirdly that's changed.

H: What?

O: The chocolate since my menopause, I'm not as addicted, I used to be a chocoholic, big time, I'd always have chocolate puddings everybody who knows me- I mean chocolate cookery books, chocolate, chocolate, chocolate. As I've got a bit older and I- I do have a couple of pieces of Lindt dark choc- not Lindt uh green and blacks – but it's not, I don't sort of go ohh ohh, gotta get chocolate, I'd rather have cake now

H: So the cake is the?

O: Cake, but cake has always been there, cake has been ever since I can remember, chocolate has definitely loosened off. So if I had to get rid of one I would get rid of the chocolate, much to the surprise of- and it's not so much the hot cross buns its representing cake

H: So the cake is better?

O: so the cake is better. And- that's just food. I just love food

H: So between – is it really the cake?

O: No because if I have too much cake I'll be sick

H: so it's a balance

O: so it's a balance between food and cake

O: Oh and I decided I wouldn't eat lamb again after I looked at those gorgeous little lambs the other day, but I haven't eaten lamb since I said that but, we'll see what happens.

H: I know, food is difficult because you can think one thing and actually do another, very easily, you know, you can be full of all kind of resolutions.

29.0- smooth sculptures

Photo Elicitation Interview (PEI) Partial Transcripts

O: Again, these, it's not again this representation but the smoothness of these sculptures, you can sorta imagine just doing 'that' a lot with your hands and touchy feely

H: Do you do, you go, and see stuff like that at all

O: occasionally yeah, I mean I don't naturally, I have got the Barbra Hepworth-

H: where would you go?

O: The Barbra Hepworth and the um, the other chap, I can't remember his name, really famous, Henry Moore, um is on my list to go and do, its- I think it's in Essex somewhere, I'd like to go have a look. J-j-just to have a look

H: Oh okay, because there's the sculpture park isn't it Wakefield or something like that?

O: yeah, yeah, yeah, I'd like to go but- I'm not sure if you're allowed to touch them, but I do like, that, again it's like a pebble, so beaches like I will often, my kids will tell you, if I pick up at a beach I will pick up a very very smooth pebble. I nearly did it with your thing downstairs but I thought oh she's gonna think I'm a bit weird. The little tiny bowls you've got in that dolls house, I nearly put it on my cheek

H: *Laughs*

O: something very very smooth, I gotta put it on my cheek or my lip, cos I like that sensation, so to me, it's in fact, again it's about the feeling, the touch and the smooth

36.0- nothing

46.0-rushing

H: And how would you then represent the menopause through this? How has that been for you? What- has anything changed is this who you always were?

O: I've been, I've much, I've quite, I think, I've always rushed. My kids have actually got me a thing a little thing on my keyring and it says 'Olivia rushes, in order to avoid rushing' and that is very true, because, and I don't do it so much now, after definitely taking a *breathes deeply*. I'll rush around, I don't plan, I don't do things in advance, the day- night before or the morning we're going on holiday I'll pack, right, I don't take a lot with me, so I don't overthink it, its normally a very small case for a couple weeks, it's just, I'm not interested in taking stuff to be honest, but I do think shit, I probably should, do I need to take that or that? Often we turn up and there's no knickers- or somebody hasn't got knickers or somebody hasn't got, ya know- something. It's not that I'm chaotic but I can't bear that packing and organising and having to think about what might happen in three- or four-days time, it's like woahhhhh. So I just leave it to the very last minute, and then go round rushing and being bossy and organising... and really if I had done that two or three we-well day or week whenever before, I could have just done it casually, but it's boring, I don't- I'm not interested I hate packing – hate it. So the things I don't like doing I will leave to the very last minute and just go boom, and then that cause a little bit of turmoil. I don't do that as much now. You know it doesn't matter, the stress of children, you know when they don't eat, and the, all that crap that comes at you, they're not going to sleep, they're on the toilet and they're not flushing- all that frustration and boringness that comes with bringing up children, you know, you can get very very stressy and eat a lot of cake *laughs* to get through it. But it's not important anymore, it's not ya know, whatever, whatever. So I don't, I definitely don't do as much rushing around I don't say yes like I used to, and I wouldn't say yes just to be a pleaser but I would just, I'd like to get involved, I'd like to- if somebody needs help- yeah I'll do that.

Photo Elicitation Interview (PEI) Partial Transcripts

49.0 to 53.0 menopause- weight gain

O: that's one thing about the menopause, the physical symptoms that it gives you, you haven't got the energy, the inclination and you can't be bothered to go into the detail, anymore, so it's you know. It doesn't mean to say you're unreliable, it just says don't take on too much, slow down, and you don't need to get all *panting* you've done that, and actually its, I've never liked it anyway, so in a way, that's been a real positive. The physical symptoms are hideous.

H: On a scale of one to five, how would -bad would you say your symptoms were with the menopause?

O: Again it depends on, it wasn't all consuming for a long long time, but when – there was three or four points where I nearly went on HRT. Where I was just- *mumbles* you just don't feel yourself and you know, you know, rationally it's the menopause but you think, am I ever coming back? Am I ever coming back? I used to be quite enthusiastic and now I don't actually give a shit, that's a bit unkind, maybe it's alright not to give a shit, it is alright not to give a shit, but you don't want to end up a miserable fucker, because your symptoms are just, grounding you down. Walking, definitely, this- I think what you had the Achilles hobble thing, that's so boring, and I went to the dentist the other day and she did something, she injected me and as I laid on the bed, my aches vanished. And I'm thinking oh my god, and I walked home from the dentist and it was like a spring in my step, and I thought that was really really interesting, so I thought that's why people are addicted to drug- painkillers, I never understood what the painkiller addiction was, but of course if you're taking a high drug and it makes you free of physical- it's not, it's just the ache, it's not like nerve pain that's a different sorta pain, but that heaviness and that weighted down, ya know you, when I walk I'm very ploddy, I'm not light on my feet I don't go *ch-ch-ch* cause that walk back I was light on my feet and I thought oh, that's nice. So I feel like I've, the menopause has made me feel like I've really, my feet are really stuck in the ground and glued, so it's a little bit slower, sluggish, there's not much freedom in movement, quite hot, quite tight, quite restrict- all the things that I love, it's a bit like going, right you can just feel too hot in that lovely cool weather you can just feel a bit restricted in that floaty dress cause your bras too tight, or whatever, and I think that's, what most, it has impeded my freedom its restricted me and I've felt restricted, and I just hate that. But then, I sort of believe in the natural cycle of life and its meant to be doing it, why it does it better or worse for some people I don't know, but, I've always reached the point where I've gone, I've made the appointment. I've even, I've even had the prescription

H: Oh so you've had the conversation

O: I've had a prescription, she's given me a prescription for HRT, I knew I wouldn't take it but I've got to that point and then almost as soon as I've reached that point, its softened and lessened. And at the moment I just have a few hot flushes, which I'm-completely manageable, this Achilles pain is a pain in the, Achilles, um and the weight is a bit annoying, cos I've got this sort of, it's not so much there today, but this bit here, which has never, has always been flat, not only have I had here, but I've put it on here too, and so I feel like I've got this tightness there so when you put it altogether and you bend, it's in the way, it's just, slightly restricts your breathing and it feels *pants*, then *mumbles*. So then I've now decided that I'm actually going to be very mindful about what I eat, let's see how long that lasts, but I'm gonna try

Photo Elicitation Interview (PEI) Partial Transcripts

54.2 to 57.0 periods, babies etc.

H: If we were going to try and make a big recommendation on the menopause, what would we try and recommend to the outside world, what needs to be said?

O: I think like we were saying the other night, it's one of those things that, you know, you are more or less told about your periods at sort of 13, either your parents tell you or school tells you or your friends tell you, it's all going on in that – and because you're surrounded by thirteen fourteen year old girls, it's just all consuming, very very similar when you have babies, you tend to be one person's gone another person's gone another person's gone you find groups – what those baby groups are called, and you know, people are in the same situation, I think what happens is once children leave home your- everything is sort of more dispersed, you've got your friends obviously but they might be doing it at different times to you or not even have it, and you can have conversations that are quite private with one or two people, but it is, as far as society goes a bit of an end of the line for women, like we were saying you know, you've done what you're meant to do, you're not really that attractive anymore, you're a bit podgy, you're always moaning about some condition and you just talk about smelling of wee and eating cake, you know,

H: *Laughs*

O: it's that sort of, we do resort to humour, so we become these humorous, what's that beryl actress, that artist, Beryl somebody

H: Uh Beryl Cook

O: yeah the big fat ladies, ya know, that is very much representative of once, you are over the hill as it used to be said, and I think Madonna has done something quite well I think for that, although, I'm not keen, to be fair, on fifty odd year old women wondering around the stage in a leotard, but you know she's as artist she's an actress, whatever, fine, who am I to judge, but, I think trying to be younger than you are, trying to cling on to something that's gone, I don't think is a great idea, embrace what's coming through but you don't have to, I think the problem is historically the role models are the beige coat, the old lady with the perm, we haven't created our newness yet, and I think that will come but we are the generation to change it for the next one, and the problem is we're sort of treading on, we're not quite sure, ohhh- hang on do we do that? Oh fuck I've just put the big knickers on, well yeah! We need the big knickers because the big knickers are really comfortable and everybody I know, my age, wears big knickers, my mum used to wear big knickers and I used to think, hmm weird, and I look at my kids knickers and I go you must be joking

H: aha, do they wear the thongs?...

O: Yeah one of them wears thongs and you go what? But you want to be comfortable, the problem when you say that word, it immediately then goes frumpy, flat shoes, we don't do heels you go over on your ankle, it becomes practical it becomes comfortable, it becomes you don't want to be sort of... you know out in your mini skirt and your heels on at three o'clock in the morning in a club, you just don't! You know, your priorities change, you change, you want your lunch rather than an evening meal, you want to go to bed earlier, and that's, I don't think that should be seen as a bad thing or an oh my god. It should be revered and respected and wow, you know she's gathering in, you're gathering in, um so I think we've, again, I think there is a bit of a problem, there's not many really old women that you can go yeah, brilliant brilliant role models.

Photo Elicitation Interview (PEI) Partial Transcripts

PEI2- Violet

Transcript:

3.0 problems in the workplace

H: and why did you decide to attend the menopause reading group in the first place?

V: I think because it, its just something that I'm kind of on the brink off, If already not, not already in and uh I guess from a work point of view our entire senior management team bar one- got one man on it, who slipped in, whose um, who are all in-in this stage, so it can be quite challenging, and it can be lovely *laughs*, it can be interesting and I think I'm just trying to give some context to when I say to people, you know, we have to have training, we have to understand some of the behaviours, it's not you know, it's not challenging, it's just some of the things- and you know just practical things like you have to write everything down because we don't remember things

H: And what sector do you work in?

V: I work for the charity sector

7.0-14.0 -nothing

16- face cream -so rude

H: I'm just uh-unfolding the picture of the face cream down there.

V: Ohhh-h, ah, good save!

H: Umm Face cream?

V: Uhh, I think it's, now let me see what does this say, age defying, I object to that!

H: *Laughs*

V: I think that's just, you know, uhh its, it's just rude, I can't believe they, they, must have had a- a you know, a focus group and who would have said that would be a selling point? That's just amazing

20- what's wrong with ageing Ho angry women

V: And anyway what's wrong with ageing gracefully? With you know with all your bumps and sags and wrinkles and um, the whole you know, face lift and Botox is so umm damaging, I think it's as bad as the whole kind of um you know cult-cult of thinness, almost, heroin chic and anorexia and all of that sort of thing, I thinks it's all kind of...

H: And I'm just going to draw your attention, you've got a couple of women's faces, one is the *muffled* one, and she's next to the- that's a bit psycho isn't it, that one?

V: Yeah-I uh, kind of, you know, angry women, is just, another thing that is perpetuated all the time. If you, even dare have an opinion you're immediately branded angry or um, yeah

23.0 -27.0- nothing

29- 30-The sea- the space etc childhood

H: You've chosen the sea picture over the animals.

Photo Elicitation Interview (PEI) Partial Transcripts

V: Yes because I love being by the sea, I think it's just space, there's so little space in London, uh um, I think it's partly that, it's partly uh, just the lack of crowds and uh, I-I spent a lot of my childhood on the sea, windsurfing

H: Oh did you?

V: I did- in the water, so I-I love water and I love being by the se- by the coast, coastline so that kind of covers that- and the kind of whole thing about the environment

H: And of the three pictures that you've chosen, in many ways that's the most emotional because it's a landscape, it's got the kind of feeling of the deep sea about it

V: I suppose so yeah

H: And the dark blue colour with the whales moving through

V: I think it reminds me a lot of childhood, because now that I have asthma, you know, I'm much more conscious about being underwater or being underground, on the tube or, so you know, I- it'd be lovely to get back to that uh level of health where I don't have asthma or hay fever and uh- actually go out in the sea not in a wetsuit, would be great as well

H: *Laughs*

V: I grew up in Malaysia, so you know you didn't have to- well actually you had to cover up or you'd get burnt out on the sea if you were you know, out for hours

H: And was this kind of sea warm?

V: Yes it was like getting into a warm bath

H: was it? and was it blue?

V: Yes, yes in the days before pollution

H: yes and plastic

V: yes, yes, yes well plastic of course, yes its horrific, it's very worrying

31- Mindful of what you eat

H: so then tell me about um, this other image here, this one next to it

V: So this one is interesting, so not particularly the detox or the coconut oil because to some extent I object to the fads, uh that kinda come and go and, you know, everyone buys into it and, you know, the people behind it make millions and billions, it's such a big industry but, I think there's a lot to be said for being mindful of what you eat, I think having probably having grown up in uh, kind of, the 70s and 80s where the, kind of, body image and what you saw did not actually reflect you. Despite growing up in an Asian country, a lot of our publications were from Australia and Britain and America, it just happened that yes, they were, so you know there's this, this distortion, so I think the kind of, this is more about um, kind of just embracing who you are, what you are, what you are, what you've got to work this, and I think, especially now, I can see the difference between changing- making small changes in diet to wellbeing. So some of the symptoms of menopause have made me think about being a little more careful about what I eat and um

H: Do you have very bad eating habits?

V: um yes...

H: Says the person who used to have a bag of crisps every day for lunch *laughs*

V: yes very bad eating habits, I'm not interested in... I guess I love food, food is really important, but when I'm at work, I'm not interested in going out and exploring what's there and taking a lunch break because I eat at my desk, and even when I eat at my desk, I'm lucky enough to have an office and the door is shut, people still come in! I'm like the door is shut!

H: Do you ever lock it?

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V: Don't, I don't lock it, I mean I only ever shut the door if I'm in a meeting, doing pay roll, or having lunch, none of this makes a difference they still come in, I have to say, okay pay roll, but I can't really say, sorry I'm having lunch I can't talk to you, it doesn't happen. So I think this is about um not buying into um- and I think this is directed at women as well

H: Why do you think that?

V: I think, uh, I think because we if-um, I think we've been socialised- the things we read growing up as children um and you know- I'm thinking about Vogue and Cosmopolitan and um, and it was full of cakes and diets in the same magazine! it's like, one parts how to lose seven pounds and the other part is

H: *Laughs*

V: *Laughing* is how to bake...! I mean it's incredible when you think about it now, but uh- it was quite difficult to um, I think consciously I didn't really think that was bizarre, it's just now I think about it, and I think, why- We can see why we have problem.

38- Being invisible/ under the radar- doing what you wanted to do

V: (Talking about her third image) This covers so many things, from fashion to art, to um, uh how couples are viewed um, and how women of a certain age dress and look are- you know, that's not someone who is going to be ignored, so um

H: And is that a good thing? Not being ignored?

V: I think Uh *Laughs* well its quite, I think a lot of my friends say its its- really odd being invisible and uh, and people don't look at you anymore. And- Its doubly worse- I had a friend who was in a wheelchair for a while, while she was going through cancer treatment, she said people just don't acknowledge you when you're in a wheelchair. And so it makes you think about, uh women in midlife, but um I think for me I think it's been good to be invisible because if you're under the radar, um you can do, you can do so much- so many things that you wouldn't be able to do otherwise.

H: *Laughs*

V: And because I grew up with two brothers and um, eight of my cousins- nine altog- Eight out of nine of my cousins were male um, it was really helpful to be under the radar, to be able to do what you wanted to do and live your life and not have a lot of attention because then you'd probably be reeled in

H: So what did you want to do? That you might have been stopped from?

V: Uh- I think everything from what you were reading to uh, who your friends were, to uhm, I suppose um, you know, being able to live away from home because it's much more um- I think mum and dad would- mum when she was young, I think they would both not agree with me but sons are much more important than daughters, so having your sons at home is much more important to them than letting your chil- your daughter go, so I think uh, it's just things like that, so I kind of always checked how everyone's been doing and then I'd go off and do my own thing and no one would notice!

H: *Laughs*

41- if you want to break rules

V: So I- I was lucky enough that I was the eldest, so you know, I kind of had a lot more time I probably had the best years of mum and dad, and I probably had more say in what I wanted to do and how I wanted to do things, um and I had to break a lot of rules first, because you

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know everyone who comes along after the first child, doesn't have to work as hard, but you know, the kind of balance, you got a lot of attention and, to some extent, lots of things were tested on you by trial and error, so its swings and roundabouts

V: Something someone said to me that was very interesting, if you do want to break rules, um you know, if you dress very conservatively you're more likely to kind of get through what you want to do. Whereas if you dress in- if you dress in either of these ways, it's much harder, and that's because it's still a man's world. You know so if you conform and you look the part of whatever is- whatever environment you're in and you're actually trying to do something controversial or you're trying to break rules as you said, I'm not sure how far this would get you. I mean this is great in terms of if you look at things holistically and the midlife woman being um invisible, um like on a more practical in the workplace or in relationships uh- perhaps not so much with friends, there's an element of having to still having to say the right things or do the right things and say okay, you snip something else, but you can, you know that's really important. So I think with those sort of things it's about what's important to you, and what you want to achieve.

43- What's important?- Every woman – why not represented -

H: [about the menopause] What's the key thing you think should be, that you think is important at this stage?

V: I think that it is a positive experience, it's just natural, it's something every woman goes through, I can't understand why it's not represented more, it's not more visible, there's not more information about it. Um, you know, one of the really interesting thing- I was really shocked, when some of the symptoms started presenting, but I read so widely, and I have a group of friends who are women who are all older than me, but no one said anything! I was just very lucky that I had someone who sat behind me at work and said 'Right'.

H: And what did they say?

V: Uh so basically said, uh I think you should think about doing some reading and talked to me about her experience of going through the menopause. So talked about uhm, the mood swings uh, being emotional, um, you know, um for the first time actually being interested in sex in a very kind of transactional way, um so I think that was really interesting cos you've just coasted along, you've hit your forties and then suddenly, if you've had very heavy periods, you've had to manage all of that, suddenly you come to a four year period, when it becomes light, it doesn't really affect you so much, you're skipping along very merrily, you know careers going fine, and then this hits you and you think, what! Is this all you get? Do you only get a four year, you know, window where you're relatively stable and- so it starts all over again. But I think now that I've- I think, I've decided, I'm just gonna sit through, I was just gonna experience it all, even though she said 'have you thought about HRT?' 'have you gone to your doctor?'

45- friend

H: Was she taking HRT?

V: She did, she did, and her daughter started the menopause quite early, her mood swings were so bad that they effected the relationship with the children so she really encouraged her, her daughter to see the doctor and go down the HRT route, but I thought, this is normal

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and this is natural and everyone's just going to have to put up with it. And so, I did just do it in my own way

H: And is she still working there with you?

V: No, she's not

H: I just wondered what you thought about her intervention in that way at that particular moment

V: Uh I think it- I think it was really important, because I didn't understand what was going on, it didn't even occur to me I might be going into peri menopause, and I think until then, I'm not sure I'd heard the word peri menopause and if I had, it hadn't actually sunk in

46- mum

H: And do you remember your mum going through the menopause at all?

V: I do I do. I was already living here and I- gone home for a holiday and she was in an absolute state, so um, I kind of understood it was the menopause, but she had to go onto anti-depressants and- so she found it really difficult, I think the thing was separating out children leaving home so that's a big change, just getting older and um and- the menopause, so there's so many factors. And um- I think a lot of the times, it wasn't depression, it wasn't clinical depression, it was actually the menopause, so she's been treated for something she doesn't actually have, so that's very distressing

53- the inter-weaving of strands of life

V: I still feel I don't know a lot so I just felt um, I'll give it a go see you know, what I come away with

H: And what have you come away with?

V: uh I think, that its interwoven in so many different strands of your life, it isn't just about one thing, but I think um, we're going through menopause as well as all the going through all the other things, it's just one part of what we're trying to cope with

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PEI3- Emma

Transcript:

5.54- I thought I was going barmy

H: Would you have attended if you had known it was a menopause event?

E: Um, yes, because it would have been interested to hear other people's stories. Um the person who I will reference as the teaching assistant who stepped down from being a teacher, um maybe mid-fifties? Um, she was sat across the table from me, who said I thought I was literally going mad, I thought well yep *claps*, I can empathise with that. So it gave me a few more reference points. As regards to the black lady who I sat next to, who turned round and says, women don't pause well, no but our bodies do, so there has to be something that is justified in how its stated, and until we get role models- Catherine zeta Jones, Gwyneth Paltrow, whomever, who start saying yes this is fine. So if we actually look at a role model, who better than the queen. Well and truly a pensioner and still working

H: And having worked all the way through

8.18- I thought I'd let nature take its course

8.45- ' for 2 years

H: When was the word first mentioned?

E: I don't know, I suppose you become more aware of it as you get older so, mid-thirties perhaps? It is something that will happen therefore, I've got to start looking into what will happen, how it'll happen-

H: And did you do that?

E: Erm- No. I just thought I'd let nature run its course, it all worked perfectly well at fourteen, so why wouldn't it work well the other way around?

H: Can you just touch into me a little bit of your own experience?

E: So unfortunately I was actually misdiagnosed at forty-three, by a GP, um through blood tests that I have to have every year, because I've had high blood pressure since I was thirty-six, um I'm now, I'll be forty-nine this year *claps*, um so I have to have my liver and kidneys checked through blood tests and whatever the um indicators are of the menopause, apparently they indicated it when he spoke to me. I was then put on HRT and I can only just say, for two years, I thought I was absolutely going barmy. I really did, as I told you, I took myself off to a psychiatrist, a lot of my friends from boarding school went to- on to become GPs, they were able to give me- I basically told get off the HRT, go see a gynaecologist, there's nothing wrong with you. He said I don't have the authority to say that but you do not have bi-polar you do not have anything that you've come to me with, there's just something not right with the medication you're using, if you've had your high blood pressure tablets since you were thirty-six, it's not those. So, it's gotta be your HRT that's doing this, potentially because you're not menopausal.

H: And did you stop with the HRT?

E: No, I didn't, I dedicatedly carried on because I thought my GP knew better than perhaps a psychologist, its only when I went to see a gynaecologist, um care of, the company I work for privately, when I phoned the GP practise and I said I wanted to see a gynaecologist, "[quiet voice] oh well you can come in and talk us"- no I want to go privately, "oh yes we'll write you a letter". So, they wanted to discuss it with me and keep me on the HRT.

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10.0- HRT-(key points)

E: Something I resent whole heartedly about HRT and the two-three years that I was on it, is I paid um two sets of uh prescriptions, for the two drugs that you're getting, and I didn't need them

Friend witnessed a change, completely transformative coming off the HRT,

E: to who I am now and who I normally am

Started sleeping properly

E: It just affected almost everything. So, it seriously ruined my work life for probably three-four years

11.0- To me its criminal

(talking about the lack of knowledge GPs have)

H: Sadly, they don't know so much about it

E: To me, it's criminal, if this was a new disease, that's fine, but it's not, it's something that we've been going through-

H: Since forever

E: yes, so why is it an issue?

12.0-20.0 nothing

24.0- 'so much is focussed on women'

H: So things like the Olay, and stuff like that, why is that on the I don't like? I just think um, so much is-is forced on, on women or has always been forced on women around beauty and remaining some modicum of what you were in your twenties and thirties, not having the wrinkles, not having this, not having the other, and I just think it's wrong, we're meant to age, we're not meant to look like Joan Collins when we're eighty

26.0-27.0 nothing

29.0- I love my wine-

H: As we went through, you've always giggled at this picture, so, the wine bottles?

E: *Laughs* It's my greatest poison in life, *laughs* and I do love my wine, um um I blame my dad for it and um, yeah, could I live a life without wine? No, I'd rather not

32.0 I grew up wisteria

H: So talk me through why you've made this selection.

E: So um deck chair, woods um, hills, drystone walls, and pebble beach, I associate with um, with relaxation, perhaps also, the wisteria um because I've grown up in houses where wisteria was draped all across the sun lounge or whatever it was, and you know, it just has strong associations. Um the um bedding, well, bed is my favourite place so, *laughs* I cannot not have a picture of bedding

H: that's a picture of white bedding, does it have to be white?

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E: Oh god no, I love my bedding – which is um- it has, pictures of fuchsias on it so. It's very comfy

36.0 don't realise what you've got

E: So the two show ladies are all to do with what is perceived as femininity when you're younger, you know when you've got the curves and everything else and its-it's a very well-trodden phrase but youth is wasted on the young, you don't realise what you've got until its gone. Um and when you look back at your photos- when you're in your twenties, and you go "yeah I used to be actually, quite not bad", and it's like, well why didn't somebody tell me that? You know, you're all fighting, you're vying to be seen and yet, no-ones saying actually, stop worrying.

H: yes, yes, and uh just on that, has your hair always been that colour? What would you call it?

E: Yes yes, so I was the same colour as Fergie when I was a lot younger um and, as I am quite happy to say, this is now dyed to maintain the colour but I was a natural red-head as a child

H: And would you call it red or what would you call your shade of colour

E: Its known as titian

41- strip lesson

E: The other story I'll tell, is um, for my fortieth I learnt to strip

Earned £3500 for two hours work

About having the confidence to just go if it all goes wrong and I don't get paid, it doesn't matter

It's such a boost to your ego

Massively empowering, for all that it is a part of society you don't see, it is massively empowering

E: I could never tell the people I work with that I've done that, that's the sort of thing, when you have the meet and greets, business meetings, "has anyone got a really interesting fact about themselves" and it's like, no! I can't tell that one, *laughs*

Some of the other girls said, oh she doesn't know what she's doing but after I came off, the said it was quite a good first time

47- parcel arrives- ?

[doorbell]

E: oh.. I'm not expecting anybody, but! Oh I am expecting a delivery, is that today? Sorry

H: Don't worry

E: Hello! Oh it is for me, how exciting!

52.0 Jane Austen adaptations

H: If I was going to ask you who would play you in a mini biopic of your life, who would play you?

E: Umm, I think I'd have to-um do my love of Jane Austen adaptations and it-it would have to be Emma Thompson

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H: Oh really, she's lovely isn't she?

E: Mmm

PEI4- Holly

Transcript:

2.2- Reasons why-

3.0- 5.0 mum, sister preparation

H: Okay so first of all, I'm going to ask you, why you've decided to come and be interviewed?

Ho: Um because I feel that the menopause is something that isn't discussed enough, isn't thought about enough, isn't represented enough in our society, and it is something half of the population go through, if we're lucky to reach they age where we go through it and uh, I've been discussing it with all my friends and we're all going there, we're all in our mid-forties up to mid-fifties and I thought it was a really interesting project to be involved with because we need a voice

H: And do you remember when you personally first became aware of the menopause as a thing?

Ho: Yeah I do! It was with my mum um and she was always hot and bothered, always annoyed, always moaning and always blaming her 'change' and she was actually only-

H: is that what she called it?

Ho: Yeah, she was actually only, I'd say, in her late forties when that started, um strangely enough she was a nurse, um but didn't seem to know how to cope with it at all, and gave me- or my sister, no advice, no discussion not talking about it at all. It was never mentioned again, I was just very aware of this thing that happened to old women, as I thought at the time, you know I was like sixteen, but that's the first time I really thought that it was something that effected our lives

H: And what did you do with that information?

Ho: It made me frightened, it made me frightened that that would be something I'd have to face, so I made, as I got older, when I got into my kind of early forties I decided to try and read a lot about it and talk about it with older friends

H: So you were preparing yourself?

Ho: Yeah, I think yeah, I think it was the only way I could see around not being hijacked by it, I think

H: And was there anything particularly useful at that point, that you read?

Ho: I think the most useful things that I found out were not necessarily medical or anything like that, but were more about attitude, it was more about looking at it as something that was new start, rather than- stop looking at it like it's an ending, look at it's like a beginning. And that's something that I still feel to this day, I remember reading about that- who was it? a journalist? Something about that, about how to maintain a positive attitude towards it, yes of course we're going to go through things that aren't very nice, you know, the night sweats uh you're drenched its horrible, you can't sleep, but once you've come through it all, you've got- much more of a liberty than you had before, and that's something that I kind of held on to

7.00 easy time

H: So do you remember your first symptom? When you though, oh yes, we're off

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Ho: Night sweats, yeah I don't remember anything before that and I remember thinking 'oh my god, I've got night sweats what could that be', at the age of about forty-six, *laughs*, and then thinking, oh yeah of course! it didn't feel, I don't, I didn't have a sense of anything else before that, and then of course once they started, I remember a few nights sleeping on a towel because *laughs* they were the week before my period I remember, they used to come a week before my period, about three nights a in the week before my period

H: Oh so your periods weren't stopping at that point?

Ho: still got them now, they're a bit erratic but um I've still got them now, husband never woke up which was amazing, so that was quite good, it didn't really disrupt my life that much I have to say. Yeah, I mean I've still got obviously somewhere else to go with it, but once the periods stop I don't know, but um, as we stand today, over the last few years, I don't think it's particularly disrupted my life, I do forget things but I've always been forgetful *laughs*

9.0- 14.3- Nothing

17.00 – Obsession with skin care

Ho: I hate the obsession with um chemical things that we're supposed to put on our skin, it just annoys me because um they're not good for our skin, and they're not made ethically, and. I hate Olay *Laughs*. And I hate this kind of, ohh look at the galaxy ahead of you if you've got skin with no wrinkles.

20.0-23.0 -nothing

24.0 – Trees, landscape, walking, seaside

H: so we've got some nature ones, so what's this?

Ho: Yeah um I love the natural world, flowers, plants

H: Okay, and there's um, sort of the trees, so that was the wasp picture, the trees, then we've got the yellow flowers, we've got the um sort of pink and white, we've got the roses, then we've got the landscapes-

Ho: Nice sort of beach, lovely, lovely to get away into the countryside or walking in forests is beautiful, likewise walking at the sea-edge at the seaside I love.

34- we need to talk about the menopause

H: which debates around the menopause are important, what do you think needs to be said?

Ho: Um, I think, I think, as a society we need to be more open about it, we need to be able to talk about it the way we can talk about puberty, puberty isn't hidden, particularly, its seen as a positive thing, its seen as, you know, a new start in a, in a, child's life, becoming an adult, you know, there's a sense of hope and promise from puberty, and I think menopause needs to be talked about in the same way. Whereas menopause, it's so hard to find anything positive about it in general feeling if you talk to people about it, for start men never want to talk about it in my experience, even my husband, he'll just go a bit quiet and put his arm round me or something, he doesn't really talk about it.

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36- 9 'Do what you want to do'

Ho: Yeah I think feel very strongly about the fact that the menopause, is just, for some reason, it has become this- it's no longer the secret it probably was, you know, in the 1960s, 50s, 60s, 70s, but it's still the thing, that it's, 'ohh it's a bit dangerous to go there' or 'oh she's probably upset, move on', and you know, I'm not upset about going into the menopause, I'm not upset about it. What upsets me is, attitudes towards it, when it's an opportunity in your life, to find something else, to go somewhere else with it, to do something else- or not even that if you don't want to, you know- take all the HRT you like, dye your hair, stay on a diet, if that's what you want to do, do it! But it's just, I don't like the way its brushed under the carpet, and I didn't think that by the time that I got to my early fifties it still would be like that, I thought it would be much more of an open thing, and if found even my GP doesn't want to talk about it, yeah, and she's a woman.

H: Have you opened up the conversation?

Ho: Yes yeah, I've requested to be allowed to go to the Chelsea and Westminster menopause clinic, because I want my bloods tested, since I've had this huge operation I've noticed things have changed, and I- I want my bloods tested properly, I want to be able to speak to somebody who is an expert, not a GP who really doesn't know anything about the menopause, um and I was kind of met with a 'oh but you're nearly there aren't you? Why would you? We don't do that anymore, we don't do that anymore', well I know they do, so I'll have ask again

H: so how did you know about the clinic?

Ho: I just read things online and funnily enough, um, I'd read the- online about being referred to the Chelsea and Westminster, and then I um- accidentally caught the *The One Show* and there was an article on the one show saying don't be- don't let your GP tell you that they can't do this because they can, and my GP had also said to me that the NHS no longer do bio-identical HRT, they only do the regular HRT, which I don't want to take, its full of chemicals, and she told me that they no-longer refer people for bio-identical, which is absolute nonsense. If the BBC can research it and tell me on the one-show that they do that, then how come my GP in Wandsworth doesn't know. So little things like that, that's what annoys me, it shouldn't be a fight, you know, you should, women of a certain age should be allowed to say to their GP, I'm feeling this, I'm feeling that, is it this, is it that, who gonna help me? And you can't, you have to say, I want this, I want this, and you have to keep on, and that's what annoys me.

43/4- Attitudes have to change.

Ho: One of the reasons I wanted to talk to you is because I feel so strongly about the attitude that needs to change. Attitude is the most important thing we need to change, one menopausal woman at a time, need to change the attitude of people around her.

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PEI5- Peggy

Transcript:

Key times for transcription:

3.02- approx.- talking about her menopause

To 6.0 mins

3.02-

P: It's nice to talk about it

It's nice to talk about it, to someone, I mean I spoke to my do, Doctor years ago about it a- and I spoke to other people you know, and you know, like women with it,

H: Yuh

P: And its all, it's a different menopause wiff everyone, ye know, not everyone is the same, if you know what I'm saying, right

H:

Yuh

P: umm, er an it 'elps yuh. Elps yer come

H: Do you find it helps you?

P: It comes to terms with, come to terms with it. Yer know, yeah

H: Was it a big shock when you went into menopause?

P: It was, cos I weren't- (microphone stuff)

3.45-

P: When I first had it, I did n't know what it was

H: muffled mm

P: and then I found out that from the doctor

H: yeah

P: cos I kept getting the hot flushes

H: yeah yeah

P: cold flush, I didn't know what it was, yer know

H: yeah

P: and then it was the night-time what was doing me- as I said to you last week about

H: yeah yeah

P: waking up in the middle of the night

H: yeah

P: gotta change the bedding, gotta change the covers,

H: yeah.

was it bad?

P: it was bad, but I came to a reality,

H: yeah

P: that every night after that, at a certain time, it would 'appen

H: muffled

P: so, I got used to that time,

H: yeah

P: about 2, 3 o'clock in the morning,

H: yeah

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P: I had to get up, do what I had to do

H: muffled agreement

P: get a bath, change ma bedding, get my pyjamas on, so it was sort of a routine, yer know

H: And how long did that go on for?

P: aaw, it went for a couple of months,

H: really?

P: that bedtime one, and the daytime one, I still get a bit of them now?

H: Yes?

P: get a bit hot flushes, umm not sure if that's to do with my panic attacks and all that, but

H: yeah

P: it comes,

H: yes

P: I feel it coming, I have to cool down a bit

H: yeah

P: you know just, if stand I, if I'm sitting, sit on it, just get me breath back, yer know, so I'm lear, live, learning to deal with it,

H: yeah

P: yer know, I thought I'd be finished by now I'm 54 but (makes a face)

H: Laughs

P: I don't know how long it goes on for- (she laughs)-

H: Well like you said everyone's individual, so no-one can say, oh you know, another week or so and you'll be done muffled

P: oh yeah, you know I mean, I've bin going for 14 years now, so like

H: really?

P: muffled its bin calm, calmer over the couple of years, you know.

When I first started, with it – it weren't calm.

H: yeah

P: like the sweating,

H: yeah

P: like the sweating, moodiness, I mean I was right moody, oh you've gotta believe me, and um yeah, yeah, I was snappy, din't know what I was doing, then until someone said to me XX, you know, you don't have to shout at me, you can talk to me,

H: (laughing)

P: And it's like, right, and it knocked me back to reality

H: Yeah, yeah

P: if ya know what I mean, so now I'm tryin... calm

H: Yeah

P: the situation, like yesterday when I walked in the hospital I was sweatin,

H: Mhmn

P: cos I like to get there a bit early

H: Yes, yes

Until she talks about the hospital appointment- at approx. 6mins.

Second section- as above

9.0 mins -talking about her mum

To 11.0 mins hot flushes/ doctor

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H: And did you speak to your mum at all about it?

P: Nah, my mum died

H: Oh okay

P: My mum died when my son was, my last son was two

H: Oh gosh

P: So I didn't really have a chance to talk to my mum about that, ya know

H: and do you remember anything about her menopause, did she ever say anything about herself?

P: Er no, cause my mum was... how can I put it, my mum weren't that type of person

H: Yeah, didn't share

P: She, she weren't a talker my mum

H: No, no

P: If she had a problem, I fink she would've gone to the doctor

H: yeah

P: She wouldn't've gone to her mate, my mum weren't like that ya know

H: Yeah

P: She was like strict n, how can I put it... Strong woman

H: Yeah

P: Ya know, strong woman, ya know, and she wouldn't let her business go out.

H: No

P: As I say, when you're, puttin' your, airin' your washing out in public, my mum weren't that type of person

H: Just, no, no, my mum –

P: N she did have mates but sh- I don't think she told anyone

H: mhmno, so she just carried on

P: Yeah, carried on ya know

H: That's not unusual, mean *mumbles*, it's very, it's very rare to find anyone's mum -

P: I mean because before I – I found out it was the menopause, I was doing it and I was finking, oh why do I keep getting hot flushes n

H: yes yes

P: whys my clothes sticking to me, n ya know, it's not hot out there it was cold, ya know, cold winter, n I thought why am I so hot,

H: Yeah

P: and I couldn't understand

H: and how did you, sort of, come to the idea that it was the menopause?

P: Uh, I – I went to my doctor and told my doctor what was accs- actually happenin'.

H: Mhmno

P: ...er, and- and then, then, he said erm, ya know, you might, might be going through the change of life

H: ohh, and is that what they said? The change of life?

P: He didn't say the menopause, he said the change of life, and I thought, well I could do with a change cos I don't like this one

H :*Laughs*

P: yeah, n I had a little joke wiv him,

H: yes yes

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P: and he said, you know what you're going through don't you? You- It's the change of life. Usually, that, your age group – it sorts - its, it's that time

H: yes yes

P: and I thought, uhhh, I know what it is now

H: oh okay, and so you then, then you knew it was the menopause?

P: yeah, ya know and I thought oh here we go, it's another thing on the list

Third section -just keep the main points covered from 34.4 mins

garden pic to end- so the numbered sections I'd like in more accurate detail:

34-

P: (talking about the garden pictures) I like it cos its quite pretty, n like... soft toys so.

34- chocolate

H: And the chocolate or just the soft toys?

P: Both. Both. Both. One of my faults, I like a bit of chocolate when I'm watching EastEnders. I usually, either dairy milk or KitKat. When its easter I kept buying easter eggs for my grandkids, and I put em up the top so I couldn't get em. But then I got the chair, and I ate two of em so I had to replace them. I had to buy six cos of my grandkids and I had to buy two more and I ate two.

35- slacks

P: I like them because they look comfortable, I like trai- I wouldn't wear a dress. I don't wear dresses or skirts.

H: Did you used to wear dresses?

P: Nah I never. Yeah so I'd wear something like that

38- clean kitchen/ Christmas

P: Kitchen looks nice

H: Does it look like your kitchen?

P: Nah, I wish it looked like that. It looks, how can I put it, posh... clean... tidy

H: Is yours a clean tidy kitchen?

P: Yeah I do like my kitchen tidy, my sons are murder. They just puts in the sink and think they're gonna wash emselves

P: Ahh Christmas, I like Christmas. I have family over yeah

H: Do you cook?

P: Me and my daughter yeah, its tradition, I've carried it on so it's nice

H: So do you do turkey and then all –

P: We don't eat turkey, get a bit of chicken, bit of beef and we do it that way. We have **all the trimmings**, it's just not turkey

41- Duvet/family

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P: That duvet looks comfortable, look like you could stay in it for little while longer, another ten minutes would do one of them wouldn't it

H: Do you have a nice duvet?

P: I can't sleep under it, cos I get too hot, but as I was saying that looks comfortable. I wouldn't sleep under it I'd be on top of it but it'd be another ten minutes – I'll be out in another ten minutes, ya know one of them ones and you never get out on those ten minutes. The duvet's white but my cupboard is pink

P: (about the family photo) I like that – family. I like seeing people like that in the street

48- miss Piggy, mum's house

P: Oh yeah you can't beat a miss piggy can ya? You gotta admit you can't beat a miss piggy. Everyone likes Kermit but I like miss piggy, she like *muffled*

H: Oh the diva absolutely

P: You like to be in charge wouldn't you

49- Clean

H: *about mums house* so did she keep it clean?

P: Oh yeah, my mum was a good cleaner, hooverin out the place. Uh think that's where I get it from. Cos with my son, he'll leave things – if he's had something to eat he'll leave it in the sink, n I'm like why don't you wash it up, well hang on a minute mum, well why don't you do it now? N it's like, my mums telling me you got to do that, its madness but it's just the way things are innit?

P: cos my son lives with me and oh he is a – I don't know where he gets it from cos he never gets it from me, but he is one messy so and so. I look at it sometimes and I think don't look at it XX, if I don't look at it I won't bother ya know. And sorta I'll look at it again and think oh, go out for a fag, calm XX, calm

50- going for a fag

H: And does that calm you down?

P: Not really *laughs*. And I'll have to come in and say ent you done that yet? N he'll go, uh I'm just doing it mum

51- menopause

H: If I said to you, what is the most important thing that needs to be shared about the menopause, what would you say, from your perspective?

P: Advice, talk to more people, talk to people who you think, how can I put it...? confide in someone. I didn't have that opportunity. I think if you confide in someone, like, me and you are talking now, it's better. It's like you're coming out, and you're helping other people, ya know, as I said everyone don't go through the same stuff, but everyone goes through the menopause - all women go through it, ya know, you don't realise, and it's scary, if you don't know what happening. Like when I didn't and I got to know and I got that advice and it made me feel a bit better not *muffled*. But ya know, it made me feel a lot better, that I

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weren't the only one, ya know, who was going through this, ya know, and it would be nice if you had somewhere you could talk to about it to someone

H: you mean someone other than a doctor?

P: Yeah, like a friend, a sister anyone, a family member ya know, someone like close to you

52 - 55= daughter and mum

H: Would you talk to your daughter about it?

P: I would if she asked me yeah.

H: Would she have to ask? You wouldn't tell her?

P: I think I'd tell her, but I don't think she'd listen so far

H: *Laughs*

P: My daughter is a bit, how can I put it, she's alright, but she's – she's like me, stubborn

H: Do you see a lot of you in her?

P: Yeah, it's a mini version of me, n I'll say ey – people will see her n go XX that's you. That's the double of you

H: and does she see that as well?

P: Uh, in some things, she won't admit it, she won't admit it at all. She reckons she's not like me in one bit. N me and her are like that though, we get on, and then we'll have dissapoi-disagreements, could be about anything, n I look at her and I think nah, I-I don't like the way you've said that. Or if I say something, she'll go, mum, please don't say it like that and you meant to say it like this cos my daughters a teacher –

H: Oh okay, so she teaches you?

P: yeah like - she's still at school, still teaching the little kids, cos sometimes I can act like a little kid, n fair enough, but sometimes it's like mum mum you can't say that, and I go why can't ya, she'll go mum you can't, not in this society, you can't say that

H: So that's a shift really, between how things were when we were young, and we grow up and you learn things, and what other people our children, think you should and shouldn't say and language you should and shouldn't use

P: Its different now, yeah, I mean children these days grow up too quick, like – I think they do. They grow up too quick these days, ya know, children, they only had a childhood. I mean with me I had a childhood but it was so – my mother took- was strict but fair ya know, old fashioned type, ya know but these days I think the kids grow up too quick. They're on phones n they're on computers, n ya know, got no life. It's a different category ya know. I mean I wouldn't know how to do Facebook. I wouldn't how – I don't really wanna know, but my grandson keeps saying nan, do you want me to show ya, No. But why not- No. N I just do it and go no. And they leave me alone. If I say yeah I'll go into something, yeah, n I can't understand it.

P: N in this society, I think they grow up too quick, they know more about computers than we ever knew. I mean I don't know nothing about a computer, to be honest, I know how to turn it on and turn it off.

59- my sister

P: It's like my sister when I used to talk to my sister, one day I went round there for a cuppa tea, n she says something to me and it's like being at home... with me mother. Yeah, n she says something n I went ya know what, mum woulda said it exactly the same way. N she got

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the *muffled*, and she went no she wouldn't've, and I went no she would've, but you know, its mad, and you know that, ya know, it's crazy.

60- friend made jewellery box

P: I was like to er- my mate *muffled*, she used to do woodwork, n she made me a nice jewellery box, uh I was gonna say that to ya , I still got it, n I put all my jewellery in it, but my mate made it, and on the front it's got XX, it's so nice... sentimental, ya know and I keep it on me sideboard, and I don't let no-one touch it, none of the grandkids. I don't let none of the grandkids touch it, they think they can, they go what's that nan, that's wonderful that is, you aint touchin it

H: Laughs

Interview interrupted by small child...

End

PEI6- Helen 2

Transcript:

2.2- support for research

H: Why did you think talking [to me] about the menopause was a good idea?

H2: Um, because this is uh, very current for me, I think I'm in it, I'm still at the beginning, but, I'm in it. I stopped menstruating two years ago so, and um, I just want to support whatever research is out there, as long as it's not involving needles *laughs*, and um, because I think, there's a whole lot about menopause that is not understood yet, as a society and for-for medics and generally, so yeah

3.0 – told by a nurse

4.3- sticker on my forehead

H: So when did you first become aware of the menopause? Do you remember hearing about it, do you remember somebody going through it?

H2: Well my mother went through it but um, I first, I first became aware that it relates to me, when I was told by a nurse that I'm peri menopausal, and I'm like, what is that?

H: and when was that?

H2: That was like um, four or five years ago? And- and, I think I was just, I had problems with my menstruation the last three years of, um- of my fertile life

H: And you went to the doctor about it?

H2: I went to the doctor about it but um, the remark about peri menopause um, came just totally unrelated from it, *mumbles*, she was just taking down the information, and said 'oh what's your age', 'oh you're peri-menopausal',

H: So really so she did it from your age wow, and what did you think about that?

H2: I thought, I didn't know what it was, so um, I thought, no I'm not in menopause yet, I just felt, it was a sticker attached to my forehead. And suddenly- I never wanted children but now that it became clear that it was going to be the end of my fertile life, I'm like, do I really not want children? Do I want children?

H: and what about your mother, what do you remember of her menopause?

H2: I've always been- I've lived abroad a lot of my life, so whenever I see my mum, it's like checking in, what's going on? So, high blood pressure, cholesterol, diabetes, weight, because that's what she has, and then suddenly there was menopause

H: And she told you?

H2: Yeah she told me, and she asked me, to 'use sanitary pads because I still have some I don't need them'

H: Oh I see, it was a practical, kind of, I'm getting rid of the equipment! And she didn't say much more about it?

H2: Well, she said she had hot flushes for some time, but she worked in, in an office with other ladies so everyone is like, understanding, and much, they were all much in the same age group, so

H: do you think they supported each other?

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H2: Yeah, I think so, because they didn't make a big fuss about it and when one of them had a hot flush, somebody else had a towel, washcloth, whatever else was needed. Yeah, so my mum said didn't, um, say it was a big deal, she just said 'I had hot flushes for a while and then it all just stopped'

7- notes on fibroid problem

Mother never had issue with menstruation

Somehow made a connection, 'I think I need to see a gynaecologist and a neurologist, because maybe I'm so incontinent because the womb is pressing on the bladder'

Speaking about the doctor – 'They always have this face like a question mark'

I felt violated

We take the whole womb, and we leave the ovaries so you won't have menopause straight away

H2: I don't remember much about the day surgery, but I think the whole experience must have been so traumatic for me that I blocked it out completely, and I had the whole thing done again at St Thomas's

H: what the whole thing, investigation and everything?

H2: Yeah, yeah, I was bleeding so heavily, that I collapsed at work, in the office, and they called an ambulance. And I said the place I usually get treated is Kings, and they said 'we can't go that far, we can take you St Thomas's', and that's when the whole process started again, and I had the same procedure again, but much nicer doctors, they didn't talk like 'oh, you know, we take out the whole- we take out everything', but in summary it was the same thing, I had a fibroid and they wanted the womb, and, it had to do with my age. They wanted the womb because of my age, because I wasn't going to use my womb, right, and and they, it was really off you know, I'm trying to, to kind of say, I have MS you know, this is like, the whole surgery thing, that's not good. 'yeah but you will be immobile for some time' but then you know, they say 'after the removal- it's not key whole surgery, like a caesarean, so it'll be two weeks of hardship, and then you can start regaining your strength', and I'm thinking, that doesn't work with MS! I need to- you know, to be mobile. So I said no if um, if you can't do key hole surgery, what else do you have? And he said 'well to minimise the bleeding we could put a coil' that was before they did the exploratory surgery, I say yeah okay put a coil in. And they did that, and the coil didn't stay in, and I said how come it didn't stay in and he said, because everything down there is so loose, there's no- um and I said 'do I look down there as if I've had eight children or something?', and he's like 'no, but it's normal for women your age, to not be as firm as a twenty year old', I never realised that, I thought that it's only outside that we differ from twenty year olds, but it's inside as well. So I said no I don't want the surgery, so I'm on my own, trying to deal with the menstruation, and I can hardly work because my menstruations are twenty days long, I'm using the biggest pads I can and I'm still staining my clothes and um, one day, on the way to work I collapsed again, on the train platform, Denmark hill, so close to Kings college, and they took me in, and they said, it's amazing you're still walking, my iron levels were so low, they had to give me blood transfusions. I had three blood transfusions, and then I felt good, and I said- I said to them, so what I my iron levels now? And he says 'we always prop you up true, you know, to the bottom of the normal level, the rest you have to do, and I said can I please have one more, one more, one more? He said 'no, Kings' college doesn't have any spare', and I

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thought, I really have to deal with it because, I can't be getting blood transfusions every month and

H: And when was that?

H2: That was... 2015, 2014? And I was still having problems with it and in 2015 in February I lost my job and I was just drained, and it took me like 6 months before I could stay awake for a whole day, it's not about being active, it's just staying awake. And I didn't know whether it was because I was bleeding so much, or was it the MS, so I went to Guys, guys and St Thomas work together, and I was seen by a gynaecologist there, and I said to him 'I am ready, I give up', and he said, 'why the sudden change?' and I explained it to him, and I also explained my concerns that I would be losing so much strength that I would really struggle to walk after that, because of the MS, and, and suddenly it's like he said, 'there's another way', and I say 'oh is there', 'fibroid embolization you ever heard of that? Highly recommend it', they go through the groin, find the blood vessels that, um, feed the fibroid and, I don't know, set them on fire or shut them off. It's one night in hospital and he says 'you will be, they will give you pain medication', I was on a morphine pump for that night, then I had paracetamol to take home, because a fibroid is twitching, you know, and then you're, you know, then you will have a normal menstruation and then you will eventually stop menstruating, I had two or three more normal menstruations, the type I had all my fertile life, just on time, no biggie, I could deal with it, and my iron levels were normal! And then I stopped, and I thought okay, that's what menopause is, not too bad!

19-28 nothing

29.0

31.59- cake empty calories

H: there's the cake?

H2: empty calories, absolutely empty!

39- description of beautiful lady

H: We've got the lady with the red dress and the sun glasses

H2: Yeah I just, I just think she's beautiful and- and cool, so she's resting within herself, she knows who she is

H: Yes it's a very cool look that kind of thing

42.5- trees soothing

H: And the flowers, those are sort of mixed flowers

H2: Yes! Plenty of flowers

H: So, we've got the mixed flowers, the wisteria, the roses, there's the cherry blossom, there's the stain glass of the flowers

H2: I find that this is art, to make stain glass, or to work with it is- but I- I like flowers because, I don't know, they just cheer me up.

H: Do you grow flowers yourself

H2: No, and as much as I like all these images of nice flowers, No

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...

H: So then we've got the trees, is this the same kind of thing?

H2: Yes and I find, I just find forests very- or even not even a forest, but um, just a little park, I just find that so soothing

H: do you go and sit in parks, and things like that? And we've got a little mountain here with the cherry blossom? So we've got lots of landscapes as well?

H2: Yes, yes, yes, I just, it reminds me of yo- there is um, you see the human impact, like here you see the houses at the bottom, but it still kind of harmonises with nature

...

H: and then we've got other landscapes as well, this one is very English and then this one is obviously not very English

H2: yes, yes, I spent a lot of time in south east Asia so this was normal. I- In Singapore, it took me ten minutes' walk to get to a beach?

H: And why did you choose to leave?

H2: oh because Singapore is very dynamic and it's just, it just got more and more crowded when I was there, and I just- couldn't take the messes anymore, and I didn't like this, having to plan everything, like you needed to buy a cinema ticket for the weekend on a Thursday because otherwise you're not going to the cinema

48- insects

H: So tell me, so is this about the flower or the bee?

H2: The bee, well I think bees are amazing and what they do and how important they are, if I would have a garden, I would have a beehive

...

H2: I see a lot of cats in my neighbourhood because many people have cats and they let them out during the day. I-I think cats have a tremendous environmental impact because they kill singing birds and they kill insects, and I don't like insects but I think I have to admit that when we are gone they are still there

52.42- whales

H: And then finally I've got the whales in the water

H2: Yes, I love those, I really feel we are doing ourselves a big disservice if all the world's whales get killed

55-0 pandas

H2: Did you know, that if the WWF would not have chosen the panda as one of their five big animals to protect they would be extinct

H: Really?

H2: Because they are so stupid! They eat only bamboo shoots! That's a very limited diet. And they are not crazy about sex so, they wouldn't even, necessarily mate, if not for human interference

H: Should we have saved them?

H2: Well they are cute aren't they

H: they are very cute, we all like pandas yes

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H2: That's just human interference with nature, right? I fear if humans don't interfere with helping animals to survive, we would all be surrounded by even more insects!

57- it's a natural process- celebrate it.

H: Thank you very much that was really interesting. If you were going to give some advice about what really needs to be understood about the menopause, what would you say?

H2: I would say that it is a natural process and we should celebrate it and not look at it as an illness that needs to be treated. So, um, have- I didn't mention that yet, but there was a time, when every evening at 9:30 pm, I would have a heatwave going over me, Yeah but just like one, I'd think okay its 9:30, so I'd sit down and I would be drenched in sw-weat. I went to the um Royal London hospital for integrated medicine where they use homeopathy and I was given something to take at 9:28

H: And did it help?

H2: absolutely

H: Really, wow what was it they gave you?

H2: um some mixture- I think it contained belladonna, but um, homeopathy is personal right its- it depends on- and just because it worked for me it doesn't mean it would work for someone else but um, I think um, alternative treatments, or natural medicines can do so much, especially when it comes to the symptoms of menopause

H: Who would you think would represent you really well?

H2: Helen Mirren

H: Oh okay, I can see that, she's got a kind of good energy about her

H2: Yes, she does things

Second Notes:

Consumption,

Human Interference

'Flowers they just cheer me up'

'I love living in London'

Very, very difficult health issues around fibroids and also with an existing serious health issue.

Her menopause sorted out the fibroids- much easier, felt much better.

Although not working at the moment- because she is ill, she had worked previously for a bank- hot desking- horrible atmosphere- felt quite detached from the company.

Spent a lot of time abroad, Singapore, SE Asia, etc.

Very keen on green and environmental issues, and the relations between human impact and nature.

PEI7- Judi

Transcript:

4.0- Not wanting to take HRT

5.00 couldn't make decisions

6.0 Herbs

9.00 Infusion

10.00 sick of it

11.0 stopped taking the herbs

J: They told me I was pre-menopausal, which I thought was, okay, but they did, they did, a blood test for the fsh and it was quite low, I think it has to be low, um and then from there I had, from time to time, I went to see a doctor, and they kept testing for bloodte- tsk, for the fsh level and it was getting- it was deteriorating, so it was obviously, I was in the, them, menopause, and I kept getting information about HRT, but I was determined, well not determined but I was hoping not to have to go down that route, um and had in mind to use more alternative methods to try and help me through it all

H: Okay, and with the alternative um methods what did you use?

J: Um Well, I was reading up quite a lot about it in the sort of early stages, um because I had an idea that maybe some herbs would do, or- I use reflexology- I do reflexology myself so I know reflexology can help in some cases, and you know, it was very kind of vague, but um, it got to the point, at one point, um I can't remember I was probably still in my forties, where- now- I never really had any major physical problems, you know I wasn't like losing huge amounts of blood or anything like that, but um sort of practically overnight, one- I realised I went to work and I had lost all my confidence, and um, I couldn't make a decision, and you know it's not as if I had a hugely responsible job or anything, but I was just doing things that I've been doing for a number of years and it was nothing new, but I just couldn't decide on anything, and realised that it wasn't just at work, generally I couldn't make a decision about anything. This is when I went to YY, got in touch with YY, and at that time she was doing some naturopathic work, and um I thought I needed some, having gone to some of the lectures and read up, I thought wild yam was my thing to do, um and maybe some other things, so in the end I started taking the wild yam and the agnus-castes as a balancer and the confidence improved fairly quickly, it didn't get back to where it was, it never has done, um but certainly I wasn't this sort of quivering wreck I was turning into. Um and I took both herbs for quite a number of years because my periods became less and less frequent, and they were a bit odd and you know, that sort of thing.

...

J: I also took um uh, progestogen cream which um various people had recommended-

H: and was this from the doctor?

J: No, no, and um- because it was meant to be this sort of, new miracle cure to menopause, sort of thing, and um I- a couple of people were in America, friends who were going to America, brought me back some, because it was hugely expensive here, so I was trying to get some from there, and um with very varying results, some of them I just had to stop immediately because- they were having very noticeable effects but not in a good way, you know so, in the end I had to pay the right price and go get the progestogen cream here, and it helped a bit, but at the time went down that route, well I was still taking the herbs, it was

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the hot flushes that were getting to me and um, they were, they were quite bad, although again, not as bad as you hear from other people, um but I did have the night sweats and waking up in the middle of the night, of soaking, and having to get up get all dried and tryin to get up quickly so the bed wouldn't get soaked as well- um and during the day too, um at that time I was working in this *muffled* place which was a very small organisation and um we were all quite good friends you know, so all my menopausal experiences were- that anybody noticed, were understood and um- or at least not made- made fun of or whatever, and, so that went on for some time and I tried all the different seeds and the nuts and making the infusions to drink with nettles, to drink cold for all night, *muffled*, and all the menopause cakes and, all this stuff, and I just got so fed up with it all, and um- I still had this woolly head from time to time, and I don't know if everyone feels this way but I just was getting so sick of it, and I thought it would never end. And I can't remember when my last period was, I did write it down in my diary if you want that, I can give you that later. So I think I must've been about 50 or something when it stopped, uh, maybe early fifties and the symptoms, after the periods stopped I was still getting all the symptoms and hot flushes and feeling a bit off and all the rest, um and eventually, those symptoms gradually drifted away, but as I say my confidence never came back, or not fully, and one day I was just, I took the herbs in liquid form, and I took them Monday, and just- it was a day I wasn't at work, and I just felt awful after I took them and I thought this is crazy, and then in my way, I tend to over-analyse things, and I was trying to work out, now what had I eaten in the previous 24 hours, had I eaten anything that might affect the herbs, and I just got so sick of it, so right, I'm not going to take them. And I stopped, stopped the herbs and um, I stopped overthinking about it as well, and, I didn't feel much difference, but I didn't feel any worse, and I just went from there, and I think with the herbs and stuff, I get into a habit of doing things and taking the herbs became a habit, and um, I think it was time to stop.

15.50- everybody is supposed to be really reasonable-workplace gossip

J: [talking about her new job after being made redundant], it was the sort of place where people were watching, you know, there was a lot of office gossip and stuff, and um, I didn't tell anybody about my hot flushes you know because it was like, they'd all be very sympathetic at the time but then it'd be *gossip imitation*, you know, a lot of gossip going on, so that wasn't so good, but yeah I mean that's life, people put up with a lot worse, um it has gradually faded away eh, since then, so that's about ten years ago, less than ten years ago

16- mother

H: And do you ever remember your mum talking about the menopause?

J: No, I knew when mum, I knew there was something wrong with my mum, not something wrong, there wasn't, but that something had changed. I didn't realise until later um what she was going through, and um when I mentioned something to her, uh – we didn't have a very, sort of, close relationship, and I mentioned to her one time about hot flushes, and or, maybe I wasn't feeling- one time when I was up there or whatever, and she said 'oh for goodness sake that should all be over and done with by now!', and I thought, well thanks mum *laughs*, so you know, things were different in her day, you know, you didn't talk about all that

Photo Elicitation Interview (PEI) Partial Transcripts

...

J: But yeah no, my mum wasn't a source of information or guidance, or anything like that,

19-26- nothing

30- sound like my mother

J: the computer thing, yeah yeah, I- I am a bit of a dinosaur, and I get so fed up with people being on their phones all the time, I use a phone too, and a computer at work, but it- it just makes me think of you know, get an app for this, get an app for that, and it's like uhh, life was, I shouldn't say life was easier, makes me sound like my mother or something now but, um, I don't know, there's too much focus on phones and tablets instead of people actually appreciating the rain or the sun or whatever it is they've got at the time

32-36- nothing

38- whole description of cherry blossom tress and being in her twenties

H: so let's have a look and see what we've got.

J: The blossom uh, I always like that time of year when it all comes out and that pink blossom in particular, when I – when I lived in Scotland um I lived in a place, there's a little town and there's a park in the- just as you drive into it, and it was planted with these trees, and there was a certain time of year where it was just beautiful, you know, they had a whole line of trees, two or three lines of trees- so it just makes me- I was happy, when I was there yeah?

H: so was this was when you were younger?

J: yeah I was in my 20s, yeah I think, yeah

41- Pandas

J: Pandas come into the same category as whales, I just really like them

42- more tree stuff

J: [Talking about the monks and the trees] And I love the tree that they're- I'm assuming that's a tree. Yeah, it's just quite a peaceful picture, I mean probably most of the landscape things are just- peaceful

43- Christmas

H: and then there's the Christmas tree as well?

J: Yeah its Christmas, I like Christmas

H: Do you? Do you do a big thing at Christmas?

J: Mhmn, Not a big thing but I like making it nice at Christmas, but I like making it nice at Christmas and having a Christmas tree, and, all that

Photo Elicitation Interview (PEI) Partial Transcripts

45- work used to be really important

J: you know I think, again as I get older- work used to be really important to me when I was younger and I- um, what people thought of me at work, and y-dah y-dah, I wanted people to think I was reasonably good at what I was doing but now I don't care, well I do care still, but people think what they will and you know, you can't change your thoughts and I don't think works important really in the grand scheme of things, as you get older and like your parents, you know, mum and dad died, and its um, it's just you go back to work, it's just all the same petty stuff and everybody is me-me-me, and um, so yeah, so yeah, I think being peaceful, you know like meditation I'm trying to do, well I've been trying to do it for a while but it's getting time to do it, which I know- I should just make the time, but yeah, I'm getting there *laughs*, yeah, and just to sort of try and take a view in the world as opposed to- or just observe it rather than getting into the fray, or at least not getting into the fray if I don't have to.

47-49- listen to what the doctor says- Go broader

H: What is important to share about the menopause, what needs to be said?

J: Um, listen to what the doctors say but make up your own mind, and-and find out as much as you can about options from HRT, and do what's best for you, because everybody is different and I've known people have taken HRT and, you know, swear by it, and they got on really well with it and um, and that's great but um you know, the only thing the doctors ever gave me about the menopause was a, a little kind of booklet thing and it was obviously done by the firms who make the HRT pills and its selling it, you know, so. I had to go into the day surgery thing one time, when I was having the menopause, and I went for the results in the hospital, and the guy who was there- every time I went there was a different doctor and it wants the doctor who did the operation, er he said to me, 'oh how are you, and yeah we have the results and everything's okay' and I was having a conversation with him and I said I was in the menopause, and he said 'you can't be in the menopause, no, no', I said well you know I've done a test and the nurse check back the blood test and sure enough they said FSH labelled, and he said, oh what're you doing for that, and he said I've got a woman doctor college and she doesn't want to take HRT so what are you taking? ...

PEI8- Jane

Transcript:

Jane Notes and Transcripts:

5.5 Mother's menopause

J: [About mother's menopause] so I have to be honest and say I didn't notice a huge amount, but my, you know, contact time with them was quite limited, and I guess when we did see incoherently she would be putting on her brave, best face and trying to minimise the impact on other people, as I have done myself in my own turn.

H: Are you aware of repeating your mother's experience?

J: Oh yeah definitely

7.0-25.0 nothing

29.4 Christmas-

J: Yeah I mean I think Christmas is such a time of excess and pressure, pressure, particularly on women to hold the whole thing together and you know run around making everybody's Christmas nice, without necessarily enjoying it themselves or being looked after

H: Have you been in that situation?

J: Yeah definitely and I've seen lots of other people, women, be in that situation and I think it's wrong and it needs to be changed.

32.58 the lifestyle kitchen

H: And then we have the kitchen?

J: Yeah it's the staging, it's the whole sort of lifestyle thing, you know, that we're being manipulated to aspire to consume or rip out a perfectly good kitchen for a new one just for the sake of it, and you know, nobody's real kitchen would look like that if you, you know, turned up unannounced

H: were you ever tempted to have the show kitchen?

J: Not really no, it just feels sterile

34.41- hysteria Christmas
-not healthy

J: So I mean again I'm not religious but you know, Easter has been um subverted, by you know, commercial interests to flog as much chocolate as possible, and um chocolate is problematic for me in terms of uh you know, comfort eating and things and I'd rather not have it being shoved in my face all the time, and you know, the encouragement to eat to excess, it's not helpful

H: Do you like chocolate?

J: I do like chocolate but I have to be careful around it

40.07- pressure to confirm

Photo Elicitation Interview (PEI) Partial Transcripts

J: you know although I respect, you know, the sort of commemorative elements of remembrance events and you know the sacrifices that were made to, you know, try and keep our country in this instance free and, um you know, to sort of stand up against tyranny, I also think it's become this kind of tyranny itself, the pressure to conform and wear a poppy and, you know, although there are women here which is good to see, um you know, a lot of this sort of thing does tend to be male dominated and you know there's the whole sort of, males are much more prone to engage in conflict as a way of trying to settle differences, whereas you know women might- had the role of women been different at that time, it would be interesting to know whether the conflicts that the world has been through whether some of them might have been avoided or tackled in a different way

42.0 Women have been constrained

J: [about burlesque dancers] women being constrained in the ways that they can express themselves because, um you know, the possibilities have been limited by their own experience or their own imagination. You know us as women in society, there might be other ways that don't exist or people haven't really cottoned on to

48.1 nature- well-being

H: this is the big tree picture?

J: yes so, I mean this is, nature is to me is a very soothing and um sort of restorative um experience, so I do like um, you know going for walks or runs or whatever and where we live on the edge of the high *muffled*, this is a very common scene, we're very lucky that you know often even just driving you will see this, you know sun um, slanting through eh trees at various stages of greenery, or autumn colours, and eh, I don't take it for granted but it does give me joy and a feeling of wellbeing

64.0 ? missed generation -football

H: have you always played football?

J: No I was part of the so called missed generation that didn't get the chance to play you know from young years like girls do now and fortunately, you know, people have woken up to that and some sort of pioneering, sort of, female leaders have set things up so that old girls can still take part and go back and celebrate what they missed, so I've been pleased to be a part of that

69.0 an industry based on the menopause

H: which debates around the menopause do you think would be important to either discuss or see staged?

J: so I think I did do some thinking about this before. So I guess this kind of, I don't know if you can call it a meta-debate, but to even have a debate, you know, that there should- it should have a higher profile and peoples um experiences and views and feelings surfaced within society and public life.

H: So even to begin the discussion about whether there should be a discussion.

Photo Elicitation Interview (PEI) Partial Transcripts

J: Yeah

H: do you think that there would be push back?

J: um, I'd like to think not among women, but sometimes, you know, women's pre-occupations get drowned out, or you know, not respected or responded to in the ways that they should

H: Have you got an example of that?

J: um, well maybe moving onto my next point, which is that despite you know everything and the efforts of people like Germaine Greer, um the menopause is still viewed in quite a paternalistic and um commercialised way, in that its um you know, how can outside interests exploit the menopause for their own purpose without women taking control of the whole agenda, um and our interests, how would we organise things and what support and provision would we put in place if it was fully within our control

79.00 .0? Gloria Steinem- women cast away on the scrapheap-

J: another answer I've just thought of is, I would either like it to be somebody who is unknown, but you know, has merit against the selection criteria, or alternatively, someone who has, a woman, effectively been put on the acting scrap heap, because she's seen as too old, but you know I wouldn't, you know defend that happening, but it happens, and I'd like to push back against that so let's get somebody back off the scrap heap!

79.0 New strategies -sowing seeds

J: Where did I get this phrase from? New strategies? I think it was something you put in your information sheet. I think cultural representations are important because they, you know, encapsulate the experience in a, sort of, satisfactory and rounded way that women can identify with, and that they might- you know, it might sow some seeds of things that they haven't quite sort of you know, coalesced in their minds but it might sort of, it might help those things come out or, you know, talk to each other about what that portrayal meant to them and how they identified with it, um and anything that ensures sort of, renewed focus and attention on women's you know needs and provision and experience, when you know we deserve this because in population terms, Germaine Greer said, we are 17% of the British population, this is the over the fifties females.

Appendix H: PEI Likes/hates collages

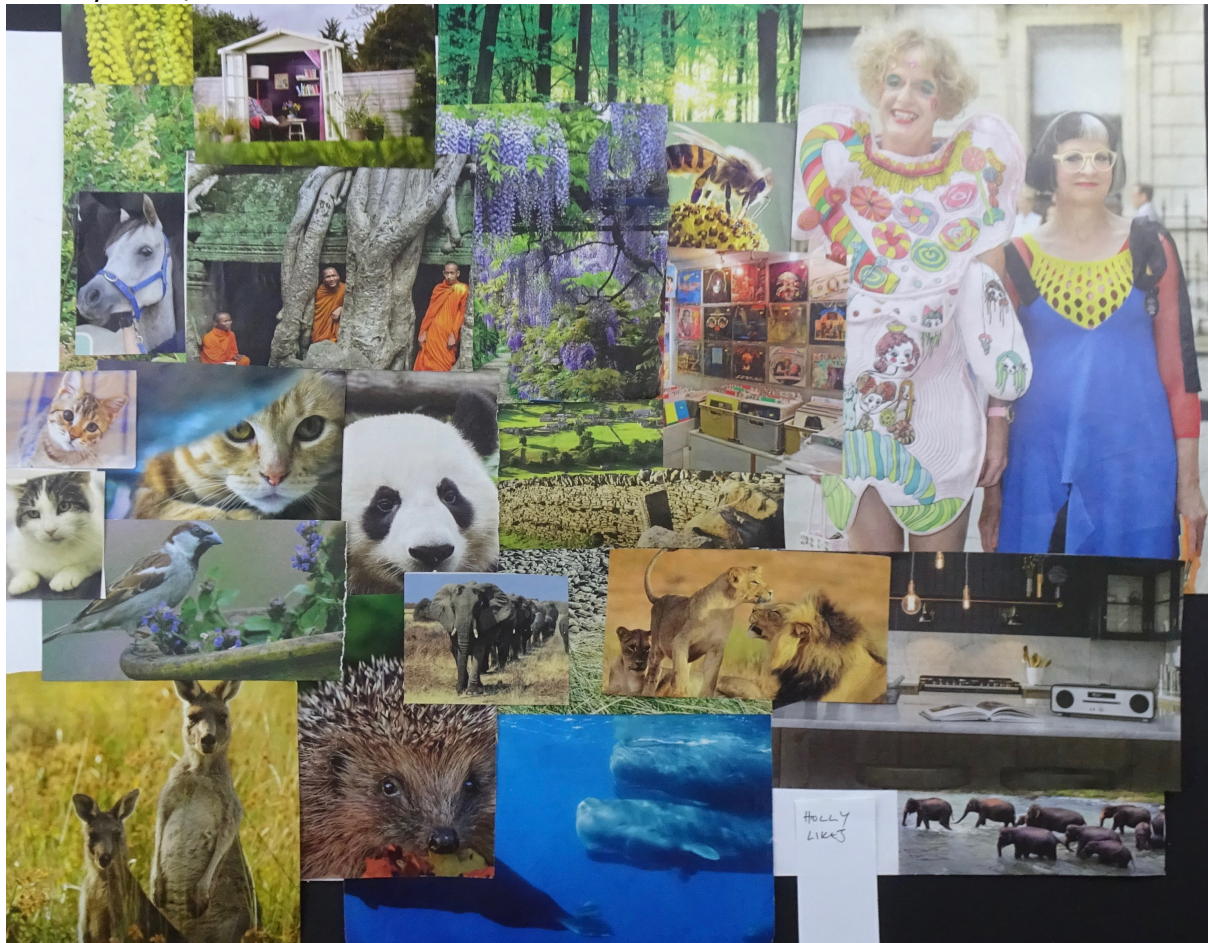
PEI Collages:
1-Olivia: Likes/ hates



3- Emma : Likes/ hates



4- Holly: Likes/ hates



5- Peggy: Likes/ hates



7- Judi: Likes/ hates



Appendix I: *Women of Brockwell (missing statue)* Spectators' voting data

Women of Brockwell (missing statue) Spectators voting data

No	most preferred	preferred	MERCIE	VIOLET	NORA	HELEN	OLIVE	Child's writing
1	helen	olive	3	4	2	5	1	
2	all	violet	5	4	5	5	5	
3	olive						5	
4	helen	olive	3	2	4	5	1	
5	helen	liked all	2	1	4	5	3	
6	olive	nora	4	2	1	3	5	
7	helen	violet	3	1	2	5	4	
8	nora	olive	3	2	5	4	1	
9	nora	helen	3	4	5	1	2	
10	helen	olive	4	3	2	5	1	
11	mercier	violet	5	1	4	3	2	
12	mercier	violet	5	1	3	4	2	yes
13	nora	liked all	3	1	5	4	2	
14	nora	mercier	1	2	5	4	3	yes
15	nora	mercier	1	3	5	4	2	
16	helen	olive	3	2	4	5	1	
17	mercier	olive	5	2	4	3	1	
18	helen	olive	3	4	2	5	1	
19	helen	mercier	1	2	3	5	4	
20	nora	helen	4	2	5	1	3	
21	nora	helen	4	2	5	1	3	
22	nora	violet	2	1	5	3	4	yes
23	helen	violet	3	1	4	5	2	
24	nora	mercier	1	2	5	4	3	
25	olive	nora					5	
26	mercier	helen	5	4	2	1	3	

27	mercie	violet	5	1	4	3	2	
28	olive						5	
29	nora	mercie	1	4	5	3	4	
30	olive	mercie	1	3	4	2	5	
31	nora	olive	4	3	5	1	2	
32	mercie	helen	5	3	4	1	2	
33	helen	olive	2	4	3	5	1	
34	helen	violet	3	1	4	5	2	
35	nora	mercie	1	4	5	2	3	
36	olive	all good	4	3	2	2	5	
37	nora	mercie	1	4	5	3	2	
38	nora	mercie	1	2	5	4	3	
39	nora	mercie	1	4	5	2	3	
40	mercie	olive	5	2	4	3	1	
41	helen	violet	3	1	2	5	4	
42	helen	mercie	1	3	4	5	2	
43	nora	violet	3	4	5	1	2	
44	mercie	violet	5	1	4	3	2	
45	helen	mercie	1	4	2	5	3	
46	nora	olive	3	2	5	4	1	

47	violet	olive	3	5	3	4	1	
48	violet	mercie	1	5	4	3	2	
49	nora		4		5			
50	nora		4	3	5	1	2	
51	violet	olive	3	5	2	4	1	
52	olive	nora	4	3	2	1	5	
53	nora	mercie	1	3	5	4	2	
54	mercie	olive	5	4	3	2	1	
55	nora				5			

comment/most preferred	comment /least preferred	general comments if any	No
It was the most realistic as a statue.	I love this statue, it was beautiful. My choice is based on the likeness to a statue		1
1- 5 because of the ladies effort	2 her expression seemed angry		2
She was very realistic and always gave you a wink.			3
It was the most statue effect, less human. Love the expression on the face	It was more human, I could see more the person, even though the look was really good.		4
There was an air of calm modernity & confidence to her. She has arrived at her place in life & is relax & comfortable, not fearing the future.	Liked them all in different ways!	It's very hard to choose which is the best, as they are all important and necessary. I would love to see all of these statues as a permanent fixture in the park & in other public locations. The whole installation is eerie, evocative (evocative!) & challenging. These ghostly figures should be made real for us in theatres permanently - Well done brilliant project!	5
5 pretty	3 looking down & "didn't look that pretty"		6
She seems powerful	She's scary		7
Nora the costume	Olive the least interesting- although all statues were very good-so hard to rank.		8
liked the doll-house inspiration- best hair make up & costume.- back story "bird" "travelling"-> really interesting	futuristic vibes		9
The statue looks very natural. I liked the outfit. Helen represents every woman of out times	I like perfection and its sad when you see a damaged by fire statue.		10
Mercie Interesting colours	Violet less decorative than the others		11
colour	not intrestend		12
Very beautiful & loved that she (Nora) spoke many languages & travelled	? not sure all wonderful!		13
(because the white one had a fan)	(because it stared at me)		14
MATERIAL AND STORY	JUST BECAUSE I HAD TO SAY WHICH WAS NO 5 BUT THEY ARE ALL EXCELLENT		15
She represents women I can relate too.			16
			17
of the colour and her smile!	I still liked this statue, only #5 because an order 1-5 was required!		18
She looked happy & proud			19
She was in the most difficult pose but maintained it with a quiet dignity and grace	I found this one the least interesting		20
the pose was engaging and the costume was visibly striking & gave the impression of movement	The costume didn't have the same Victoriana vibe as the ones I preferred		21
I liked it the best because it is prity.	it stared at me.		22
of the jolly model	of the scary model!		23
1 She looks like a real statue	5 because of the colour		24
Represents Crafts	3-Norah- LEAST STATUE LIKE		25
			26

she looked like a bell!			27
I am a socialist			28
After being a kept woman by her husband Nora makes the brave decision to leave and become her own person, using her experiences to become independent.	Mercie seems weak and without character, seems to settle without argument or opinion		29
5 She winked at us with a coy smile	5 She is more fabulous than us		30
Statue 3. She was so still and looked like a statue	5 she was knitting so it didn't look like a statue	note: scoring did not align with descriptions- recorded as original	31
She is full of strength and emanates power. Changing colours between the green and purple suggests changing weather, scents and moods.	Less interested in the costume although still love the presence of the statue herself		32
most striking	she was moving		33
the costume and posture captured a sense of movement	sorry, the facial expression reminded me of a stern teacher! Otherwise looked brilliant though.		34
She represents where I've been + where I'm going	She seems stuck and dull	NB. I like all of them, there are aspects of all these women that I	35
OLIVE OF HER LINK TO CREATIVITY + TEXTILE CRAFTS. MERCIE FOR LINK TO CONTEMPORARY CRESSINGHAM GARDENS CAMPAIGN	THEY WERE ALL GOOD- GREAT INSTALLATION.		36
Nora has escaped she is free, Independent, Self taught and Powerful Girl Power I love her	Mercie easily forgotten		37
she defied expectation was brave and used her education (self taught & other) to find herself. Her beautiful clothes are an individual expression of her intellectual power!	she conformed and stayed within her societal expectations although she did do "good works" - the least rich Victorians could do!		38
the white created a sense of space and she was highlighted as she was clear to see against the gardens backdrops of green colours. I loved her attitude and the frills of the costume. It felt both traditional + contemporary at the same time	I'm not sure. I think she was just inside the garden next to where people were chatting and her spot was quite shady- I maybe couldn't appreciate her full glory.		39
She was still and looked like a real statue	she was knitting so it wasn't a proper statue.		40
I related to her the most			41
4 Helen Bronze Desire to live life.	1- Mercie Her land went to her husband.		42
Nora's interest in education and willingness	Her work ethic		43
I like weathered copper	I don't like the ursula le guin		44
1 smiling copper contemporary beautiful hopeful	5 green and victorian		45
the background for the statue really resonated with me And I love the style of the statue. Statue 2 was a close second for the same reasons	I preferred the more modern and local themes to the greek mythology- as much as I enjoy greek mythology		46

the idea about an older looking woman being able to represent the human race fully given her life experiences appeals; also her humility in being nervous yet brave; humorous and clearly practical, in her hope that the spaceship will be clean!	I am programmed to recall Athene as goddess of wisdom, justice, warfare etc (even maths!) rather than "just" traditional craft skills and was a bit disappointed that none of the above were associated with "Contemporary mid-life women"! However maybe this is a telling limitation and unfair evaluation on my part of traditional craft skills! Interesting.		47
I love the idea of a statue based on Ursula le Guin- not a type of character you often see as a statue	It's the most 'traditional' - can easily imagine it already existing		48
Nora's free-spirit.			49
Finding her freedom.			50
			51
I liked the reference to Athene and highlighting of weaving - crafts that have often historically been ignored/ not given due credit due to their domestic function/production by women		Thank you for creating a thought provoking work and adding a wonderful element to a relaxing Sunday walk around the gardens. Love the highlighting of women from this age group. Good luck with your thesis	52
I liked the story of Nora's self-education, plus the interpreter beside her was really good at detailing her story.	I connected least with her story	thank you for a wonderful, provocative, thoughtful performance lovely to stumble across these hidden story of women in the garden, fascinating body of research. Good luck!	53
The story	The others are fab		54
She was very still and there were good views of her from the garden			55

Appendix J: *CHANGING IN PUBLIC* script January 2020

CHANGING IN PUBLIC

by

Hilary Baxter

January 2020

CHARACTERS

HELEN	A contemporary midlife woman.
HERMES	The messenger of the gods, here played by a woman and disguised as Angela a theatre usher aged around 30.
MERCIE	Midlife woman -Mercie Cressingham
NORA	Midlife woman - Ibsen's Nora
VIOLET	Midlife woman - The Space Crone
CYW	Chorus of Young Women: These four women are individually named but also work as a distinct group of late teens/twenty-somethings
PEGGY	Young woman (full name Pandora)
SPIDER	Young woman (full name Arachne)
DAFF	Young woman (full name Daphne)
ECHO	Young woman (aka Eee)
The FURIOUS WOMEN	A Flash Mob of midlife women seated in the audience until the closing scene.

Living Statues

The statues all speak about their character- they are offering an outsider's perspective on their own life stories, so when they talk about themselves- they are reflecting on what they did in their life- what has changed- they can even quote their old voices- but they are able to see the context of their own existence. They are very calm- nothing bothers a statue.

TIME

Present day with some repeated layering of events.

SCENE BREAKDOWN

Airlock: Briefing before audience enter onto stage space- smoke filled and 'cave'-like.

	PROLOGUE	
'cave' interior		Present
	ACT I	
Scene 1 'cave' entrance		Now
Scene 2 Glade of trees		Earlier
Scene 3 Statue Glade		A little later
Scene 4 Living Statues		As scene 3
Scene 5 Changing in private		Now
Scene 6 Delivery		Later
	ACT II	
Scene 1 Delivery		As previous scene
Scene 2 First experiences		Earlier
Scene 3 Mothers, daughters, X generations		
Scene 4 How I'm feeling		
Scene 5 Treatments		
Scene 6 Problems and solutions		
Scene 7 What I need		
Scene 8 Meltdown		Now
	EPILOGUE	
Flash mob dance		

AIRLOCK

(Audience in small groups [max.6] enter into airlock for show briefing delivered by HERMES disguised as Angela the usher, the name on her security pass, wearing a show T-shirt)

HERMES

calls for quiet- turn phones off- prepares for the unknown- health and safety amplified- it's really important to keep quiet.

(HERMES escorts the group through the darkness with only a tiny light phone light source. The dark should seem endless, smells of wet coldness, muffled sounds come from onstage)

PROLOGUE

(in blackout)

HERMES

Gives the warning stories- the depth of the 'cave', numbers of lost souls etc. no sounds allowed- cannot wake the FURIES etc. HERMES makes wailing sounds- says that Clytemnestra's Ghost can wake them from their sleep- points to the door and explains that their guide will be waiting for them.

(HERMES opens the door for the audience to enter into auditorium, preferably on stage. HERMES repeats this until all audience have entered)

ACT 1

SCENE 1 Projection: The cave interior (The audience group enters a smoke-filled space, very little light and some 'cave'-like ambience but no fake dripping. They are warmly welcomed by HELEN/ a guide/ teacher/ group leader- also wearing a security badge. The audience are prevented from taking their seats, should stand waiting. HELEN makes small talk with audience groups, about 'cave's, temperature control, she's professionally entertaining.)

(When all the audience are gathered, HELEN takes a position upstage centre with the audience facing, away from the seating)

HELEN

This is what a myth looks like- from the inside. In these 'cave's under the Parthenon, where Athene locked up the Furies at the end of the Oresteia- explain a bit- these are terrible

women - the priestess who saw them last, was so affected that she could not walk, and had to crawl away- quote the text. It is said that 'Only Clytemnestra's ghost can wake them up- so I don't think they'll be joining us'

(she laughs and the laughs are echoed by CYW)

HELEN- semi-improvising

So, before we leave this cave, I wanted to tell you, you know that Greek words underpin lots of English words, so for example say menopause- before we leave the cave, I just wanted to show you that there is a spot here where, if I can just find it, you should be able to hear 16 echoes- should be around, around he-re ish.

(Speaking loudly she tests the echo)

(HELEN finds the spot in the 'cave')

HELEN

(loudly)

Menopause

CYW

(16 echoes are heard overlapping and diminishing in volume)

(HELEN walks through the audience towards the seating bank now lit up. Bright lighting on the CYW lined across the back of the seating bank wearing satin kimonos with a green glade print, arms outstretched displaying the print. This indicates the exit of the cave. When HELEN arrives in front of the audience, she directs the audience to find their seats.)

HELEN

(having cracked a silly joke)

Ha ha ha

(HERMES shouts from the upstage doorway. Holding up a parcel)

HERMES

Helen - I've got a delivery for you

HELEN:

Ok, uh I'll come and get it.

(HELEN carries on sorting out seats for the audience. When this is done, she sits to the side of the audience furthest away from HERMES.)

(Lighting change.)

SCENE 2 Projection- Glade of trees

(As the audience take their seats, the CYW move any hand props (carpet, book etc) onto the stage area, then waft the raining smoke away with big dramatic gestures of their kimono sleeves. This falls into playful movements, once the audience is seated. The CYW remove their kimonos, hang them on the hooks on the side of the stage, green glade side out. ECHO exits after hanging her kimono on a hook to wait with the statues DSR.

(HERMES is still holding the parcel as at the end of the Prologue- she's upstage by the 'cave' door and wearing a plain black t-shirt- no show logo. SPIDER, DAFF and PEGGY work to lay out a large green tarpaulin like a picnic rug over the centre stage. This is carefully done, as if a familiar ritual. They might also mirror each other's movements. They fiddle with the position of the rug until)

that will do

PEGGY

is this the right place?

SPIDER

I think so

PEGGY

I don't see any statues here

DAFF

The lighting is on point to be fair

PEGGY

but I'm sure there were meant to be statues. It's not like her to be late.

SPIDER

I'm sure she will turn up

PEGGY

I hope she's alright. Maybe she's late because she caught the menopause off her auntie

DAFF

You can't catch it. All I know is that it happens in your fifties and you get hot flushes.

SPIDER

PEGGY

Well I've never heard of it, not a thing.

SPIDER

It's not as if we can call her.

PEGGY

Yeah cos she can't answer back.

DAFF

ECHO? ECHO come here

SPIDER

You don't have to call her like that. She's not a dog.

PEGGY

Well...

CYW

(sniggers)

DAFF

it's a bit shit that she can't talk to us

SPIDER

Yeah, because the gods took away her voice for no reason

PEGGY

well not for no reason. She did bring it upon herself as she does talk too much

SPIDER

No one brings that upon herself. So you're saying you make one mistake in your life and you deserve to have your voice taken away.

PEGGY

No, but are you gunna go up to the gods and tell them they're wrong?

SPIDER

Well someone bloody needs to!

PEGGY

I'd like to see that

SPIDER

Well I'm not being funny but they're a joke!

PEGGY

Well if you piss off a god you're going to get punished

SPIDER

we don't even know the full story, what happened? What are they even doing up there? They come down here, make a mess and then we're the ones left here to clean it up.

(HERMES enters)

PEGGY

Can I help you?

HERMES

Just making a delivery

PEGGY

Don't I know you?

HERMES

If you do I'm sure it's only from nice places

PEGGY

Who's that for?

HERMES

It's not for you.

(HERMES throws the parcel to end up near the
upstage 'cave' door)

PEGGY

I'm sorry but I just don't like boxes. I got given one once and was told not to open it, which of course I didn't, but I dropped it and it broke open. It let all this bad stuff out of it and I got blamed for it.

HERMES

Look, there's no need to get upset. It's not for you. No need to worry.

PEGGY

There's one box I do like though. It's a jewellery box with my name on it that my friend here made me. It's filled with nice things.

(beat)

Happy things.

HERMES

Is that your book? Whatcha reading?

PEGGY

Yes.

HERMES

Ooh, Sexual Politics. Bit of feminism. Good choice. Nice work. Isn't that second wave feminism though?

(pause)

Bit old fashioned for you though isn't it? All that patriarchy, matriarchy, binary stuff.. Didn't think you'd be into that. Great choice though. Really good read.

(to DAFF)

How're you doing? You alright there?

DAFF

Sorry, brains somewhere else. Just seen an email from work. I've got a meeting with the top-level boss which is actually really good because I think that means I might get a pay rise. Everyone likes a bit more money...
Maybe a few more nights out.

CYW

(laugh)

HERMES

Are you sure you want to go to that?

DAFF

Yeah!

SPIDER

What if something bad happens?

DAFF

Nothing bad is gunna happen he's just an old man.

PEGGY

No one's just an old man though.

DAFF

But you know me, I'm faster than him! Sprint champion 2014!

SPIDER

But where would you run?

DAFF

Look, if something goes wrong, Dad's office is just down the street. You know, I can just run down there.

HERMES

And then... he can turn you into a tree!

CYW

laughter

PEGGY

You would make a beautiful tree!

CYW

(more laughing)

SPIDER

Is she nearby yet? Eee? Eee are you near?

ECHO

Near, here

(ECHO enters downstage from another part of the wood, and gestures crossly for the others to follow her.)

SCENE 3 Statue Glade

(As the CYW begin to leave the stage, they cross with the statues entering who were following Echo. The statues walk to the plinth positions accompanied by the CYW, who set up the plinths, help the statues onto them, and then, as a group, restage the entry into the second glade. HERMES remains onstage in the same position, statue-like, until the stage picture is set...)

HERMES

This is gunna look amazing on your Instagram guys!

PEGGY

Who are these people?

SPIDER

Does it matter?

DAFF

Yeah, I mean they're all probably dead now and I'd like to be remembered when I'm dead. Look, look! They've got little codes! You can scan it with your phone it's so cute.

(DAFF uses phone to scan QR code on statue plinth)

(PEGGY scans QR code and reads from phone)

PEGGY

This one is MERCIE Cressingham, 1796-1855. Inherited half of the Brockwell Park estate as a spinster in 1807, but on her marriage, the property passed to her husband...

Damn the patriarchy!

MERCIE was a respectable Victorian woman. She modelled herself patriotically on Queen Victoria.

(scans QR code and reads from phone)

SPIDER

This is NORA, she's made of stone, based on the leading character in Henrik Ibsen's 'The Dolls House' written in 1879.

(PEGGY interrupts her)

PEGGY

Wait, she's in my book- it's a really good bit- listen:

HERMES

No time- you're next.

(pointing to DAFF)

(reading from phone)

DAFF

This one's called The Space Crone made from VIOLET Flame Opel. The Space Crone, a short story by Ursula K. Le Guin - who suggests that it is the older working woman who would be able to fully represent the human race, bla bla bla... She's given birth to herself as an autonomous person

(HERMES pretends to read from phone)

HERMES

And this one is HELENE made from copper. She is an 'everywoman'. Dressed in a mixture of comfortable and practical elements with a big bag. Very practical.

(swipes the air above the plinth)

HERMES

She's also missing!

(laughs)

Anyway time for selfies! Let's get a group one first!

(The CYW cluster around HERMES who takes the group photo)

HERMES

(To PEGGY)

Now just you! The theme is classical.

(sounds of encouragement and photo taking)

HERMES

Who are we seeing here?

PEGGY

Pandora, of course, who else?

HERMES

Who's this?

SPIDER

Arachne.

HERMES

And DAFF, what's this?

DAFF

I'm a tree.

ALL

(laughter)

HERMES

(goes to step on empty platform)
 And how about

ALL
 No, no, What about ECHO?

(Echo comes forward)

ECHO
 Echo, Echo

SPIDER
 ECHO can go on that one!

(The photo encouragement sounds continue as they position ECHO on the plinth and themselves around her. When the photo has been taken, PEGGY, SPIDER and DAFF move to one side of stage. ECHO and HERMES are left together. ECHO is staring at HERMES imploringly)

HERMES
 Okay, fine. I can give you your voice back, but only for one minute.
 (makes a start gesture)

ECHO
 Thank you, but please just give me a little more time. Let me just explain.

(to PEGGY, DAFF & SPIDER)

I miss talking. I miss talking to you. This isn't my fault. I've been punished for no reason. It was Zeus, he tricked me into helping him hide his affairs from Hera. I didn't even know that's what he was using me for, but she blamed me! He was the one going around fucking the other nymphs and yet I'm the one who ends up getting fucked. How am I supposed to live the rest of my life like this? How am I supposed to meet someone, to fall in love, have children?! How is this a just punishment? It's not fair. Please, HERMES, give me my voice back for a bit longer. Please, just give me a little more time.

(HERMES gestures again and ECHO's voice is gone again.)

ECHO:
 Time, time

(HERMES quickly moves onto the bronze plinth and poses as Clytemnestra's ghost. It's a specific pose, and played for laughs. HERMES begins to play chase the CYW- they dodge away- they are all laughing, HELEN laughs too, loudly. HERMES hears HELEN laughing and remembers the parcel, left upstage, goes to collect it.)

HERMES

(shouting across stage to HELEN)

HELEN - I've got a parcel for you-

(SFX - Rewind sound)

HELEN

Ok, I'll come and find you.

(HELEN leaves her seat and walks around the set to the downstage door- She knocks on the backstage side of the door. HERMES moves on set to the door, as if to open it.)

(Lighting change.)

SCENE 4 Living Statues

(The previous scene is now repeated using the same actions of the CYW but without volume. The CYW parts and movements can be slowed or speeded up to fit with the statue's dialogue. The scene runs nearly as before, but this time we only hear elements of the CYW dialogue. HERMES is now waiting, also like a statue, from beside the downstage door, with HELEN behind it offstage. The three statues are watching the CYW.)

MERCIE

I love watching the girls play.

VIOLET

I love watching the families- makes me happy- the girls are different now

NORA

Girls! I think we're supposed to call them young women now

MERCIE

Yes, I think she's right

NORA

It's all changed again

VIOLET

Girls, dames, broads

MERCIE

That's the American term

VIOLET

Chicks, Bints, Birds they were in my day

NORA

but keeping up with the new ideas is really interesting. Shush.

(The statues listen as the descriptions are read out.)

PEGGY

(reading from phone)

MERCIE Cressingham (1796-1855). Inherited half of the Brockwell Park estate as a spinster in 1807, but on her marriage, the property passed to her husband, according to the law of the day.

MERCIE

I liked being married, really liked being married. But it was a shame about the school.

SPIDER

NORA- stone, based on the leading character in Henrik Ibsen's 'The Dolls House' written in 1879.

PEGGY

Wait, she's in my book- listen
(she's paraphrasing)

'Until Ibsen's NORA slammed the door announcing the sexual revolution, this triumph went nearly uncontested.'¹
It's her (tails away)

NORA

(modestly)
that's true. I needed to change. We both needed to change, to live better lives. And so I had to leave my husband. I was playing at being married really- we both were.

(beat)
I regret leaving my children- but I didn't know who I was- It took me years.

MERCIE

I like it when they read the books-
Jane Austen was always my favourite-
I might have met her, you know, in Bath.
Back then. It's just so lovely to hear about the parties,
I can see that really I was diverted into marriage- I did enjoy being married-
no I really enjoyed being married. I saw myself as being like the Queen- what a role model, and like her, I lost my husband so early.
I've always been patriotic.

DAFF

the older working woman who would be able to fully represent the human race, having experienced more of life and given birth to herself as an autonomous person after the demands of family and society have been exhausted. Here, VIOLET is represented as a traveller, nervous but brave.

VIOLET

We were too poor to travel really. I left school as soon as I could, we needed the money. I can see now that I just lacked the opportunity- I've done all kinds of jobs-
I found caring very hard, became a bit too fond of one old boy- really cut up when he died,

(beat)
but I didn't know - I was amazed when they asked me to join the Space programme- but now I can see that I represented more than half of the human race. Imagine sending me to Mars. But, I did feel sad at leaving my grandson.
I love watching the families.

¹ (Millet 2000: p115)

MERCIE

Now for me, really it was my brother, or my affection for him that stopped me from opening my little school. I could really see it, when I first inherited Tulse Hill Farm- and we went to visit. The prospect was marvellous, the sloping fields and the pretty flowers. It would have been wonderful. I was very fond of my brother, I lived with him again, after I was widowed. He thought that women should be decorative, and I was.

DAFF

All I know about menopause, it happens to you in your fifties and you have hot flushes.

SPIDER

That's all I know.

ECHO

No No

PANDORA

Well I've never heard of it. Not-a-thing

ECHO

Nothing, nothing

VIOLET

I had quite a bad time myself with the change, but I minimised it, yer know, that's what you did. I was all done when those tablets came through- the er HRT, kept you young for your husband, that Robert Wilson said 'stopped the living decay'.

MERCIE

I was unwell myself- took to my bed. There were some herbs you could take, didn't do much for me.

NORA

I read everything I could. There were a lot of women locked up in asylums, and particularly if there were problems in the marriage. Climacteric insanity they called it, a bit quick with the knives too.

MERCIE

But they don't appear to be that advanced now.

(puts on a silly voice)

I thought I was going ab-so-lute-ly barr-mmy.

ALL

(Laughter)

(Change of lighting.)

SCENE 5 Changing in private

HERMES

(shouting loudly)

HELEN - I've got a parcel for you-

(HERMES holds the parcel up)

(SFX- rewind sound)

HELEN

(Shouting from offstage)

Ok, I'll come and get it.

(The CYW help the Statues down from their plinths, and then set up the work areas; each with a wheelie office chair and a big cardboard box. Then, the CYW each take a green kimono robe off the wall and turn it inside out to reveal the second lining pattern, which will be used by the mid-life women as they do their faces. They roll up the tarpaulin/rug, A kimono is hung by the downstage door- this will be for HELEN.

The CYW help the statues remove the costume, one in each of separate areas of the stage space. The statue costume pieces are hung on hooks around the walls of the set. The mid-life women put on the kimonos now dressing gowns, once the costumes are removed, and sit to remove the statue face-paint. The CYW produce all the props; the wipes and make up remover from the boxes. The mid-life women begin to chat to each other as they clean their face. The CYW sit near or next to the mid-life women.)

NORA

I'm so glad Christmas is over

MERCIE

Ah, Christmas, I love it, all the trimmings, I have family over yeah

VIOLET

It's just all the pressure from family,

NORA

And the excess, it's a bit hysterical

VIOLET

There's too much.

(The women begin to re-do their hair and makeup in normal streetwear fashions, helped by the CYW when necessary.)

MERCIE

Really hate the way that they try to sell you this stuff

VIOLET

I just think so much is forced on women- always has been. I think we're meant to look our age-

(NORA holds up a red jar)

NORA

(reading from the side label)

Age-defying! It's just rude, what focus group said that would be a selling point?

MERCIE

I hate the obsession with chemical things- they're just not good for our skin.

NORA

We're not meant to look like Joan Collins when we're 80.

MERCIE

It's just not me.

VIOLET

(wrapping her blue kimono dressing gown round her
comfortingly)

I used to love swimming when I was younger, not in this country, but where it's like getting into a warm bath. The sea was an incredible blue colour..

(VIOLET laughs at her own memory, all laugh)

SCENE 6 The event

HERMES

(shouting loudly)

HELEN - I've got a parcel for you-

(holds the parcel up)

(SFX- rewind sound)

HELEN

(Shouting from offstage)

Ok, I'll come and get it.

(She knocks on the door and opens it)

HELEN

Hi, er

HERMES

Come in

(HELEN comes onstage through the downstage door which closes behind her. Now the women are finishing getting ready for work, finishing their hair. They are still wearing the kimono dressing gowns. HERMES gives HELEN the parcel)

HELEN

Oh! It is for me,
How exciting
How did you know? I mean, who is it from? umm

(she shakes it)

(To HERMES)

HELEN

should I open it?
I do like presents, I wonder what it is,

(She puts her bag down, HERMES picks it up and hangs it on the wall)

HELEN

I feel I should,
like you know,

(she opens the box, inside there is another box with a bow on the front)

HELEN

Is there a card?

(to HERMES:)

Did you see anything fall out?

(she strokes the box)

HELEN

I have no idea. what is it? It feels quite warm,
(shakes the box)

I dunno

(smells the box)

it doesn't smell of anything, and I can't see any white powder, I'm not sure if, you know, it can't, I'm just going to see, I mean it might be, Oh

(opens the box)

it's a jigsaw.

(beat)

(She looks at HERMES)

HERMES

That's right- you know what it is

HELEN

Have we?

HERMES

You know who I am, we've met before

HELEN

Well, I don't have time for this- I can just leave it here

(she puts the jigsaw box under her hanging bag, she goes to open the downstage door, but there's no handle)

HERMES

Er no, that door only lets you in,

HELEN

You mean I'm stuck here? Where am I anyway?

HERMES

What can you see?

(HELEN describes what she can see of the set, except for the ceiling)

HELEN

Well, there's a big screen, and a very pretty ceiling

HERMES

you know what that's made of

HELEN

Oh,

(As HELEN speaks individual images come up on the screen at the same time she describes them. They are like small paintings not full screen images.)

HELEN

that's a lovely picture,

(Image 1- A golden Buddha)

HELEN

and that one too

(Image 2- A photograph of the Fjords)

HERMES

So it's different for everyone-

(Image 3- A large collaged image of positive photographs including the two already shown, as HERMES puts the kimono dressing gown over her shoulders, the print is identifiably the same image as on the screen)

HERMES

this is the stuff you like

HELEN

Oh
Wait, it's gone dark,

(Image 4- Another collaged image, but darker more negative)

HERMES

Yes, try not to dwell on these ones- they'll only upset you more

HELEN

But I don't know anything about the menopause, I mean I know the word, obvs

HERMES

(exasperated)
honestly, you humans know so little about yourselves
You can always Google it you know.

(Image 5 Google slide on menopause- should be from the day of the performance)

HELEN

But how can I get out? I need to go to work-

(HERMES points to the remaining door.)

HERMES

Oh you can get to work, that door will take you to work

HERMES

or you can work here,

(Walks up to the upstage 'cave' door.)

HERMES

I wouldn't use this one- you know with the dreadful Furious Women

(HERMES makes the Clytemnestra face and pose and exits through the 'cave' door, laughing.)

HELEN

No, I don't have time for this, no no no no no ,
you know I've got so much to do

(Blackout.)

ACT II

SCENE 1 first experiences

(HELEN is already visible, as MERCIE, VIOLET and NORA begin to speak lights come up on them - they are positioned in what be their "work area". They can move around, shift position -there could be props to support this action- files- boxes- telephone, computer, lap tops, pens pads etc. small whiteboard even. There are 3 office chairs as before, and the boxes.)

HELEN

No, I don't have time for this, no no no no no ,
you know I've got so much to do
and I'm doing this group thing again next week
and um well,
it's

(she moves)

HELEN

it's just mind over matter isn't it?
I mean

MERCIE

'why are you making such a fuss?'

VIOLET

'you just have to get on with it'

HELEN

'It's part of life.'

NORA

I see myself as a very resilient and resourceful person who's
(breath)
coped with an enormous amount in my life,
and that's why I love my job so much,
why I'm so enthusiastic about what I do.

HELEN

yeah

MERCIE

Umm.
Well, I, I, hum.
I was a bit affronted cos I always thought it was a sort of mind
over matter,
and it wasn't going to happen to meee and er,
I was only forty-six and it was Christmas day and I had to keep
going outside,

and I thought 'what the hell is wrong with me?'
 Cos I'm naturally a very cold person but I was having hot flushes,
 my first hot flushes and um and I I,
 carried on like that for four years um,
 really you, thinking all the rumours about HRT,
 the minute you stop taking it,
 you age overnight and er,
 that wasn't going to happen to me.

NORA:

Um.

I was going through quite a difficult time in my life,
 I was actually doing lots of training and presentations and things,
 and I was finding it, you know if I was struck down by hot flush
 when I was doing that,
 I just couldn't

(pause)

carry on, speaking

HELEN

So it was the bank holiday, I remember it vividly,
 and I was in the hairdressers and I just felt so over whelmed,
 my heart started beating, I started sweating,
 palpitations,
 I thought I was going to faint,
 I felt awful and I thought I've never felt like this before, I don't
 know what it is,
 I just felt this,
 this intense fear er almost took hold of me,
 and I just thought, I want to run out the shop, I don't want,
 my friend just looked at me like "what's happening"

(laughs)

and I was just like

"I don't know, I don't know, I just feel really really nauseous like
 I'm going to fall",

you know so because I felt so bad I called the doctor

and went and home straightaway and called the doctor and said I feel
 really really strange,

you know, like,

and she was like come and see me, come and make an appointment,

(gasp)

and she said well I don't know what it is but come and make an
 appointment, give you all the tests you know

blood tests,

heart tests,

whatever it is.

But she gave me all the tests and then she basically said it sounds
 like you had some sort of anxiety, some sort of panic attack,

(pause)

and I thought I can't believe that,

(laughs)

I don't know what that is.

Cos, I've never had anxiety or panic in my life so I was quite
 shocked you know (pause)

but she said it could be because you're peri peri-menopausal and I
 had no idea what that was,

I'd never heard the term.

(Behind them we hear the girls

DAFF

(repeated from previous Act Scene 1,)

All I know about menopause,
it happens to you in your fifties and you have hot flushes.

SPIDER

That's all I know.

ECHO

No no

PEGGY

Well I've never heard of it. Not a thing

ECHO

Nothing, nothing

NORA

(continuing from before)

um, (in breath) so that,
that was quite difficult and also, I was having some very, very
sleepness nights,

VIOLET

Yeah

NORA

and then every time one of the hot flushes went off, the periods
came back and I was in absolute agony, I mean I've always had
problems but they were far, far worse,

VIOLET

Was there a factsheet?

(NORA shakes her head. They hear the girls
laughing, turn their heads.)
(Lighting change)

SCENE 3 X-generations, mums etc

HELEN

(upbeat)

I mean I certainly know from um other,
and from other girls that um and they more or less say the same as
me

"we didn't know anything" basically,
"we don't know anything"

(laughs)

it's really sad and because our parents don't tell us anything, you
know,

that they haven't you know my mother didn't say anything to me,
she said 'Oh you had a bit of a hot flush'.

It was really interesting my mum cos she was very open,
when I was growing up,

VIOLET

(as mother)

really keen to tell you about periods, and about having children,
because I was brought up not knowing this myself from my own mother,
so I was always adamant that I am going to tell my children,
as soon as they grow up,
so the minute she hit eleven,
I told her the whole works,

HELEN:

you know before I had anything, she'd told me everything,
so I said, you're so diligent telling me about periods and whatever,
so I knew exactly what was going on,
Why didn't you tell me these things?

(beat)

why didn't you tell me anything about the menopause?

(laughing)

VIOLET

(as mother)

I sort of thought you'd just get on with that really,
so never really thought anything of it,
but then mine was bit different,
I had a hysterectomy,
went straight on to HRT had quite bad hot flushes,
but not any panic or the anxiety,
it was quite different,
that's the trouble,
different people have different things,
and I think that, that doesn't really,
and people don't tell you how long it lasts either,
cos even now, still have the occasional hot flush,
came off the HRT years ago, but there we go.

MERCIE

Society is
is a different world

yes
HELEN

NORA
now my mother would be,
never admit to having periods let alo-one

HELEN
(chuckles)

NORA
a menopause

HELEN
(laughing)

NORA
and so you've got nothing handed down from generation to generation
and also our mothers were less likely to be in or at work, or in
senior posts

MERCIE
but we also know that menopause can come early and it's different
symptoms for each woman.

NORA
and shouldn't be that you know, people will have to giggle or
whisper or don't talk about it,

VIOLET
yes,

MERCIE
we're not in Victorian times, really,

VIOLET
or making a joke,

NORA
or make it a joke that's the other thing is

MERCIE
yes,

NORA
is that people tend to laugh about it,
oh, it's just something silly,
its like if you're going for those symptoms,
pretty serious to you,

MERCIE
yes yes, or your partner,

VIOLET
yeah, to both you both,

impacts the whole family,
impacts your colleagues,
impacts you know, a wider ripple

NORA

yes

VIOLET

you know your children,
if you have children,
you know its all,
its all the same,
(Lighting change)

SCENE 4 How I'm feeling

HELEN

uh it is really hot here, do you think the windows open?

MERCIE

"I thought it was just me" "I thought I was going mad"

(in breath)

I had that thing of crying all the time and, not being able to be in,

in possession of myself as a normal professional, and I'm somebody who, I kind of, sort of manager roles, I was quite a senior manager, I was taught by, I had a lot of male mentors who were amazing they taught me to be more blasé , than I had been encultured to be as a girl, and as a woman, and so I was quite a confident manager,

and still

I still do do big things like that but, I don't find it, easily in myself anymore,

but umm,

NORA

and the its almost

its almost as if

if in my mind it's like when I saw that thing

and they had all the lights and swirling,

that's how it is it's like an assault on the senses,

stuff swirling around,

stuff coming at you in different ways,

like a war zone, like bombs and stuff,

(pause breath)

I feel like that edge of adrenalin a lot of the time,

and that's really horrible

MERCIE

and outside the workplace,

doing less,

cancelling everything,

just,

my life is much smaller than it was, you know, for many years I

couldn't travel,

VIOLET

I couldn't go to Kings Cross on the train to see somebody,

just sort of everything was too much so I remembered Oprah Winfrey,

I remember her restoring your spirit, section,

it's really beautiful and I just remember all those women talking

about being quiet, doing meditation and get my tepee in the garden,

those Americans, but,

it was you know it's nice so

(pause)

doing things that make me happy

HELEN

have had that kind of thing, to live with since their early
twenties,
you know

(Pause)

it has given me a stiller place to be with it.
If you know what I mean,
like stillness as opposed to trying to fix problems,

ALL

mm

HELEN

And I want to fix problems,
I want to fix this

(Pause)

(Lighting change)

SCENE 5 Treatments

VIOLET

did you take HRT?

NORA

not for four years,

VIOLET

oh ok,

NORA

Umm and during that time I, such a difficult time and so I was going to through really the worst bit oh pff, I'm going to go to the doctors and I got HRT, and within a week I've my life back. And so much so that I was on it for ten years, and I was very reluctant to, to come off it. But actually menopause for me lasted about fourteen years,

HELEN

really?

NORA

yeah

HELEN

and what was coming off HRT like?

MERCIE

Umm, I was very worried about it and I did tail it off, and I, I did get a few hot flushes but they weren't as bad as previously and gradually they've tailed off.

HELEN

hmm

NORA

But I was very concerned about it

VIOLET

of course,

NORA

there's no way I wanted to go through

HELEN

no no

NORA

again

HELEN

no and, and,

VIOLET

(addressed to both NORA and HELEN)

so you feel yourself again now?

NORA

YES, well what's left of m,

(laughing so her last words become unintelligible)

HELEN

I've tried to manage my Thyroxin levels with the GP, who doesn't know that much about it. I got quite a lot of help from that GP though, they really tried to, (in breath pause) support me, in juggling,

so we juggle my meds,

we don't stick to a a same dose

I've heard there's a great triaging service which is um,

a kind of a personalised HRT service and all,

this Doctor sits down and goes all the risks and he says that

everything's up to you,

They can do this little thing for that symptom, and this little

thing for that symptom,

and it's really like,

it's a one-shot thing,

you go there and then they advise your GP and then you go back and

then they,

anyway I think I'm right off the question.

Sorry, what was the question?

VIOLET and NORA:

(trying to help her)

Umm?

HELEN

But then I, the Thyroxin, I ended up having to have too much of it, and it pushes you in the same dark place as not having enough of it.

MERCIE

and there are different issues, there's like an extra fibroid-al kind of issue for black women in particular um (pause) so

VIOLET

It sort of helped that I knew what it was, I think that's what with me,

I'm the sort of person that,

if I know what something is,

I can deal with it, if I don't know,

I'm, I get worse,

I told the doctor now I know what it is,

I feel I can deal with it better,

cos I can put things into place cos I ate better, started doing supplements,

I started doing yoga,

I started calming down and relaxing, so all of that made a big difference,

NORA

Particularly for people living longer and healthier lives and

VIOLET

exactly

NORA

And all of that its just that,
its going to happen to everybody and most people don't know it
exists or what it is

VIOLET

Or they think you can will it away,

NORA

(laughs)

Like you said mind over matter,

VIOLET

Absolutely I couldn't believe

MERCIE

(strong observation)

And I think that a lot of us think that

(Lighting change)

SCENE 6 Problems and solutions

HELEN

(quietly)

umm, I just feel like I'm hardly keeping my head above water, I feel like I'm drowning the whole time, and it wouldn't, be so bad, if I worked in a loving, kindly workplace, but I, I don't...

(She takes a deep breath)

VIOLET

um so um a lot of this came out of, cos I had some issues myself with the menopause that I was unhappy with,

MERCIE

mm

VIOLET

and I was unhappy with kind of knowledge and information, so that was one of my reasons, what I had a keen interest in

MERCIE:

(overlapping)

mm

VIOLET

the menopause group as well,
(in breath)

NORA

I think the real value of the work that the support group are doing, is the contact, the human contact, and sharing of experiences, um and feelings, and acknowledgement of feelings.

VIOLET

oh yes,

NORA

that's really good and we've also put a lot of information out

(Pause)

Guidance and an infographic.

MERCIE

um, a couple of times when we first started, it got mentioned in meetings where there were both men and women present, and there was a little bit of a (pause) frisson,

HELEN

yeah?

MERCIE

shall we say, passed through the room,

NORA
(chuckles)

MERCIE
like tumbleweed

HELEN
so what is?

VIOLET
the business there is a solid business case,

HELEN
when you say business case what do you mean?

VIOLET
forty-three per cent of our staff demographic aged between forty and sixty-five are potentially affected of the whole workforce,

HELEN
wo-ow, That **is** nearly half isn't it?

MERCIE
yeah, and the, the programme er was it yeah the Tonight programme said that was it one in four? Yeah, one in four women who are experiencing difficult symptoms have thought about leaving their jobs

NORA
it's a lot of relief because I think the trouble, with the menopause, people really feel that 'I'm the only person in the world that's ever going through this'

HELEN
Really?

VIOLET
and that's the business case so, that would be some of the things we want to highlight, let's, let's get all of the managers trained in the menopause,

NORA
and I did hear some comments from people saying "why, why are we doing guidance on menopause?"

HELEN
from men or or women?

VIOLET
I never, never heard a negative problem thing from, from a man, only ever heard it from women,
(breath)
Sometimes, sometimes they, sometimes can feel a bit threatened by putting stuff out about the menopause, I think it, I can understand why,

NORA

you don't want to be "poor poor woman"
she's got the issues now let's treat her differently,

VIOLET

this person's said 'Oo but it's personal, you just go through with
it,
get,
you know just get on with it,
Pause

But I just found it hard to sit in a long meeting,
so I would say to my manager, do you mind if I leave early?
Or do you mind if I don't go to that meeting cos it's a really long
one?

MERCIE

and I was really reorganising what I was doing,
I was working a lot more from home,
I was just trying everything to try and keep my panic levels down, I
was doing CBT as well to try and sort of

VIOLET

so everything to manage it, because I just felt this fear, this
anxiety and I didn't know what was causing this fear and anxiety,
you know, it wasn't like I was having any issues, or money or
anything like that, but, just, just unexplained you know, so,

NORA

mm

MERCIE

and then obviously all the other symptoms, the dizziness and the
other bits and pieces,

HELEN

and was **your** line manager understanding?
when you?

MERCIE

He was great,
I couldn't fault him at all,
he was really really easy about it and very you know,
just like said
'do what you have to do, if you need to go away for your treatment
or whatever, do what you have to do, if you don't want to come in
today, that's fine just let me know and what you're doing'
and you know he was really easy,
and I think that's what made it so much better for me,

VIOLET

I was having dizzy symptoms,
so all of these other things that were happening to me the last
couple of years,
made me understand, this is what this is about,

and I just thought this is outrageous,
I'm an educated woman

NORA

yeah, yeah, yeah

VIOLET

I'm not a s, I'm not a dummy, but I literally had to Google to find
out what was going on,

HELEN

yeah

VIOLET

with all these symptoms

MERCIE

yes

VIOLET

cos nobody knew, so, I thought this is so sad, that I'm this person
I don't know anything. If I don't know anything, there are thousands
out there who don't know anything either
(laughing)

NORA

It was really frightening it was frightening, that's what I think
gets to people, if you don't have these symptoms before, because you
sort of think to yourself, (breath) how do I keep my livelihood, how
do I keep this?

MERCIE

its like you lose all your confidence,
I and you know I was really like panicking

VIOLET

and I thought, you know if I'm feeling this bad,
how do I get past this and I think you've always got to take the
longer picture,

(breath)

now I know I have to take the long, things don't last for ever and
you do know you get past the worst and that's what I learnt
profoundly that as bad as it is now,

(breathy)

it won't last for ever,
you know you will get past this,

HELEN

and do you feel better now?

VIOLET

certainly yeah, ten times more better than I did,
(laughs)

definitely a lot better, because I,
I can feel the symptoms are more manageable
hot flushes,

the only thing that's getting me now I've got
finally I'm getting hot flushes,

(they all laugh)

HELEN

Did you get a fact sheet?

VIOLET

you might as well just Google it.

MERCIE

Googling it, yeah

Exactly, yeah you might as well just google it

NORA

I think the real value of the work that we are doing, is the
contact, the human contact,
and sharing of I experiences,
um and feelings,
and acknowledgement of feelings and um its bought up a few other
things around um body image,
the fact that there are lot of post-menopausal women er,
who actually have started to develop eating disorders,

(pause)

Um, yeah and they may actually have young daughters who are in their
prime

MERCIE

mm

NORA

you know, we all know what teenage girls can be like about their
mo-others, so at the point where they're very vulnerable um they may
be, you know experiencing all these really conflicting emotions,
I mean it brings up ageism, stereotyping

MERCIE

yes, it does,

NORA

You won't find any of that on the internet,
Can't find that on a fact sheet

(Lighting change.)

SCENE 7 What I need

NORA

I think it's understanding what it does to some women's minds, and how fragile that makes one

MERCIE

mmm

NORA

feel and that it doesn't necessarily come out as fragility, it might come out so what people might see in the workplace, see if I'm feeling very overwhelmed, it's a bit like if you have a kid with ADD or like autistic spectrum, it's that kind of utter frustration, and though it might be like,

(MERCIE drops something- it makes a noise)

NORA

banging around or huffing, or like next time the computer goes wrong or the photocopier doesn't work,

(breath)

or have horrible loads of spreadsheets to do and it isn't working cos its clunky, they always buy the cut down versions of stuff doesn't work half the time,

VIOLET

(coughs)

NORA

so then I can't cope with it very well, either, and I'd be tearful or super-frustrated or

(breath)

or really agitated, as if somebody's trying to tell you something, and then its so hard to to retain any of that, that remembering, people would be yaddering on, verbally,

(breath)

you wouldn't do that to somebody with dyslexia,

HELEN

no, no

NORA

(overlapping HELEN)

or autistic spectrum, you'd know you were going to drive them into a frenzy, understanding that and understanding what it is to work

(in breath)

when that place is full of people,

MERCIE

yeah yeah,

NORA

it's humming. It's buzzing, it's just so, so awful,
(loud breath)

MERCIE

"I thought it was just me"
"I thought I was going mad"

NORA

I think, I think that knowing it exists is probably the best,
cos the fact is I don't think that a lot of people even know it
exists, what it is

VIOLET

this is true

NORA

yeh, but also when we can,
we did some, we had something back from the curriculum on social
care. If they'd mention it at all,
it was like a paragraph

VIOLET

Yeah like a tiny little

MERCIE

oh yes, yes,

NORA

and if you're teaching young people about periods and

VIOLET

Sex

NORA

contraception and the rest

MERCIE

yes

NORA

HIV

MERCIE

why are we not teaching them about the

VIOLET

Exactly

MERCIE

about the

NORA

Menopause

(Pause)

what we're hearing time and time again, in the support group, is that women are saying

NORA

'my GP won't help me at all with this, until I haven't bled for a year',
and that's so wrong,
that's so wrong,

VIOLET

(very firmly)

I do think we need to get more help from doctors, that I really do believe firmly, because I do feel that a lot of doctors, probably know about three sentences about the menopause and that worries me slightly because I remember the years before the, you know,

I didn't know anything about peri-menopause, I didn't know the stages, so my doctor never said to me when I went to the doctor at forty-two, and said I'm really having problems sleeping, it was like you know "you must be stressed" or you know, Peri-menopausal was not even on the, the list she didn't even talk about it, so she didn't mention that option, then when I said I had headaches, "oh that must be because of something else", then when I had dizziness, "that must be because of your ears", so you know, so it seems to me that doctors have very limited knowledge and that's what worries me slightly is that you go to your doctor and have a lot of faith and say they will help you, but they don't really know much themselves,

(Slight Pause)

so unless you're Googling it or you've got somebody who knows, you don't know.

So having more knowledge I think from the medical profession would be really, really good. Have teaching in schools and having you know, younger people being aware of it is also I think, having it more available here, so people know.

So I think just having that knowledge out there at a basic level,

NORA

and the work we're doing um,
but it's just really good to be in the forefront of bringing about change,

MERCIE

we're a bit more considerate of each other than we were before.

(Lighting change)

SCENE 8 Meltdown

(NORA, MERCIE and VIOLET begin to pack their things away very quietly, Props go back into the boxes as at the start of the scene, boxes and chairs are moved to the sides.)

NORA

Um,
(pause)
how do you feel now?

HELEN

Honestly?
(she makes a sudden cackle sound with hand gesture)
\$\$ \$\$

NORA

Huh?

HELEN

(cackle sound with hand gesture)
\$\$ \$\$
like one of those, one of those 'orrible creatures that

NORA

Ha!

HELEN

with the ears, and the fur,

NORA

oh, you mean, the

HELEN

\$\$ \$\$
(She makes the cackle sound and hand gesture again, it makes her laugh. NORA, VIOLET and MERCIE are all beginning to laugh, following her lead. HELEN continues to talk as if doing a monologue- there are only slight pauses for a breath where the others speak.)

HELEN

what are they called? I can't remember, what they're

NORA

the trolls?

HELEN

they're called, not a troll but

VIOLET

like a shrek?

HELEN

the ones in before, they were like a furby thing, pointy and pointy little teeth, I think feel when I'm not well,

MERCIE

ogre?

HELEN

going round like a little, they're sort of, troll-like, I don't know, they were in some Spielberg film or something, but they're like these nasty little

NORA

oh, like gremlins,

HELEN

trolls, like a gremlin-kind of thing, but furry

NORA

yeah (laughing gently)

HELEN

oh, I don't know what they're called, they had a name, but (long pause) like like one of those but, like and I just need to be like soothed, and petted or something, (laughing)

ALL

mm (laughing)

(pause)

HELEN

no not really, I would just like people to think more about the mental disaggregation, the mood, the deep grief, and distress, that kind of makes everything really hard, to find solid ground again, and the length of time it goes on for some people and I know it's only some people,

(pause)

and that the disability side of it, I know that's a real hot potato, but I would say nine years is well in excess of two years, which is the normal disability thing that they talk about, umm so yeah, and not just humourous, cos, most of the stuff that's out there artistically is humourous,

NORA

(quietly)

mmm

HELEN

and I can understand, we do have a laugh as well,
people tell horrendous stories and funny stories,

ALL

mmm

HELEN

but it's not all funny ha ha,
it's just not,
it trivialises it to some degree,
it's a tragedy,

(pause)

with funny moments,
there's not all that many funny moments, some in the sense of
solidarity, and the relief of being able to share, some of the
tragedy with somebody else,

NORA

mmm

HELEN

(pause)

it's not that funny,
a lot of the stuff that goes on,
(long pause)

yeah.

(She breathes deeply)

HELEN

I don't know,
I just don't know
I feel very alone
I think I need some help

HERMES

Well, you can always ask the
(gestures towards the 'cave' door)
you know the Furious women
(begins to walk across the stage to the door)

HELEN

(getting annoyed)

But they're awful- scary, terrifying

HERMES

No, not really, that's just what we say-
they're probably alright- There just aren't as many as there used to
be,

(joking around)

I'll do my best Clytemnestra's ghost for you
 (opens the 'cave' door pulls the same face as
 before, then goes through the door, leaving it
 open, slight smoke haze from open door.)

(Lighting change)
 EPILOGUE

HELEN
 (really crossly)
 But that's just like, I just keeping trying and I can't fucking fix
 it and that makes me so angry I can hardly breathe
 (she's out of breath and takes a huge in breath.
 This is echoed by the flash mob in the audience.)

FLASH MOB
 (taking a huge in breath as they stand up)

HELEN
 What the?
 (HELEN watches as the Flash Mob comes onto stage)
 (Lighting change to coloured front footlights,
 throwing multiple coloured shadows on the back
 screen)

HELEN
 What the?
 (Sfx Rewind music, it's the intro to the flash mob
 dance track- Bad Reputation by Joan Jett.)
 (As the dance starts, the mid-life women actresses
 join. The dance includes incorporates elements of
 Greek folk dance, menopausal tropes, warrior poses
 and flossing. During the last part of the dance,
 the CYW join in to do the flossing, finally HERMES
 joins the end of the dance. It has become a riotous
 celebration)

HELEN
 It might be hard, but I can survive this. There will be a way.
 (blackout.)

Appendix K: All Interviews- responses to question no.6.

Appendix K 1: Table of responses to question no.6 by interviewee- transcripts & general summaries. All interviews.

Key: IPAI- Interpretative Phenomenological Analysis Interview, PEI- Photo Elicitation interview.

Question 6 : Which debates around the menopause do you think important? Would like to see staged?		responsibilities		emerging themes	
#	interview comment #	comment	medical	workplace	society
		<p>IPAI-A: general summary - See Appendix C for full transcript</p> <p>Employee assistance programme counselling... and when I was very ill with the menopause... that thing of crying all the time... I was quite a senior manager ... this cognitive processing melt down... not being able to remember anything... I don't like to just do my job, I like to be involved in lots of different things... I'm in the queer group, um, um, I'm a carer, I've got various disabilities... and I personally perceive the menopause as a disability for people who get it like me, not for everybody, some people love it...since I joined a woman's network, I have been banging on... you should do something for the menopause...it's just like a joke for people...every two months, as a lunchtime bitesize training of half an hour... space afterwards to talk... I suggested having a support group, quarterly... we make it a business case... we put it as STRETCH objectives or personal development ... every month...a thing with the menopause... sometimes, we have a speaker... women speak about their different knowledge... survival strategies and things that they've found, that help them personally... they sit there with their little fans on the desk, and nobody mentions anything... we poster all the time, everywhere on the fridges... it's quite a strong solidarity and sisterhood... just you feel sane... why the hell isn't this more dealt with... difficulties between colleagues, quite often those end up as grievances, or disciplinary or competence proceedings, capability issues, disability issues...where somebody lost their job, they did act out badly, but there was no compassionate response... making reasonable adjustments and stuff... very acrimonious when people feel unfairly treated... probably costs which we haven't worked out... So we would like to see all of the managers trained and we would like it to be mandatory training...we'd like to look at GPs because what we're hearing... in the support group, is that women are saying 'my GP won't help me at all with this, until I haven't bled for a year... at least I had a GP that knew that she didn't know enough about it... it took me four years, to get tested...It's the worst thing that's ever happened to me, it's worse than my father dying...it's so protracted, it's ruined my life...it helped, me to take action and to feel I was reaching out to people...trying to get the drugs right... I try talking to my friends but a lot of my friends are not having the same experience, or some of them are coming to it later... they weren't very supportive before... my friend...I think that experience of being hounded out of her thirty years teaching job was horrendous for her.</p>			
1	IPAI-A: 1	I think it's understanding what it does to some women's minds, and how fragile that makes one feel and that it doesn't necessarily come out as fragility, it might come out so what people might see in the workplace, see if I'm feeling very overwhelmed, it's a bit like if you have a kid with ADD or like autistic spectrum, it's that kind of utter frustration, and though it might be like, (noise) banging around or huffing, or like next time the computer goes wrong or the photocopier doesn't work, (breath) or have horrible loads of spreadsheets to do and it isn't working cos its clunky, they always buy the cut down versions of stuff doesn't work half the time, so then I can't cope with it very well, either, and I'd be tearful or super-frustrated or (breath)		workplace	
2	IPAI-A: 2	or really agitated, as if somebody's trying to tell you something, and then its so hard to retain any of that, that remembering, people would be yaddering on, verbally, you wouldn't do that to somebody with dyslexia, or autistic spectrum, you'd know you were going to drive them into a frenzy, understanding that		workplace	

		and understanding what it is to work in (breath) we're nice and empty today, but when that place is full of people, it's humming. It's buzzing, it's just so awful, (breath) its almost as if I were to stage it, in my mind it's like when I saw that thing about the dog, Curious Incident of the Dog and they had all the lights and swirling, that's how it is it's like an assault on the senses, stuff swirling around, stuff coming at you in different ways, like a war zone, like bombs and stuff, (pause breath) I feel like that edge of adrenalin a lot of the time, and that's really horrible and sometimes I like take myself somewhere really quiet to work,				
3	IPAI-A: 3	but there's a lot of stuff you have to do with other people as well, so it's very difficult... and I think, that people can easily scapegoat people in the workplace, or go, oh she's miserable or she's a nasty person, you know whatever,		workplace		
4	IPAI-A: 4	and (pause) just having that kindness to each other, so I try to do things that are about being kind to people, being supportive to other colleagues...		workplace		
5	IPAI-A: 5	I won't be driven from this job, that's my thing, it's like I can walk to this job andand I will be able to move when I'm more well... I keep looking out for what might be a nice job to move, and I haven't not found it yet, but I'm sure I will,		workplace		
6	IPAI-A: 6	I deliberately choose to come in when it's quiet, sometimes, we have flexi-working and flexi working has really helped us, as a workplace, we can work from home if we want, depends on your manager, but you can work from home if you want or you can work at ten o'clock at night here in the building, there's twenty-four hour building, you can come in at five in the morning, if you can't sleep you can come in, and you can do work from home, for it can be done (in breath) those kinds of things you know, or if you've had a sleepless night, you know then you can work at, sometimes I have got up and worked, you know I can't, wake at 2.30 whatever, I'll just come in, and do that work then, um and its really helpful to because then you, you know sometimes you're awake, cos you're worried about things, but other times you're awake, cos you're wakeful, it's the body doing stuff. Or if you need to sleep in the day cos you've been up worrying about something, and then you can work at night, and it's really great, and that is a good thing, that they've done, they didn't do it for, the menopause, but single best thing that they've done to help people self-manage.				
7	IPAI-A: 7	No, not really, I would just like people to think more about the mental disaggregation, the mood, the deep grief, and distress, that kind of makes everything really hard, to find solid ground again,		workplace		
8	IPAI-A: 8					everything really hard

9	IPAI-A: 9	and the length of time it goes on for some people and I know it's only some people, and that the disability side of it, I know that's a real hot potato, but I would say nine years is well in excess of two years, which is the normal disability thing that they talk about, umm so yeah.	medical		
10	IPAI-A: 10	and don't just make it humorous, cos, most of the stuff that's out there artistically is humorous, and I can understand, we do have a laugh in the support group as well, but it's not all funny ha ha, it's just not, it trivialises it to some degree, it's a tragedy, (pause) with funny moments, there's not all that many funny moments, some in the sense of solidarity, and the relief of being able to share, some of the tragedy with somebody else, (pause) it's not that funny, a lot of the stuff that goes on, (long pause)			culture
<p>IPAI-B: general summary - See Appendix C for full transcript</p> <p>I'm an advanced public Health Practitioner, mental health, first aid trainer, and chair of the staff mental health and wellbeing group, the essence of my role is to look after staff well-being. Network groups have been running for a few years now... lots of cross-overs, between the various groups... colleague came to me in my capacity as a mental health first aider... went to her GP and er, those issues were actually down to the menopause... just understanding what those feelings of anxiety and panic were around that" and actually it was found that these women were pretty much peri- menopausal and really not expecting the things that were happening to them, both physically and mentally...bite-size presentations are open for both men and women, support sessions are only available to women... the demographic of our staff... sixty-five per cent, women there's been a huge under-estimation of the symptoms of the peri-menopause, which can go on for years and can have a huge effect on the lives of working women....when we first started, it got mentioned in meetings where there were both men and women present, and there was a little bit of a frisson... you know, people have got used to seeing posters up, to remove stigma around mental ill health... just be as open and robust as possible, and to sort of be factual and informative, the only negative response that we had have been from some women... why are you making such a fuss?... women not knowing the symptoms, not understanding what's happening to them, so that's both physically and mentally... my mother would be, never admit to having periods... and so you've got nothing handed down...our mothers were less likely to be in or at work...the effect on women in senior posts er is that they can feel very undermined... our presentation really focusses on, on the business case so... the demographic of our staff and sixty-five per cent women, forty-three per cent between forty and sixty- One in four women who are experiencing difficult symptoms have thought about leaving their jobs. So if we take one in every four even in our workforce, that's about three hundred people... its productivity... We've got a senior sponsor, the council's view... they are very keen to promote their reputation...it's just really good to be in the forefront of bringing about change... I have had access to contacts in all London councils...ask what they're doing, a couple came back and said that 'we've done a fact sheet'...the fact sheet approach...is no more informative than sur, Googling it...the real value of the work that we are doing, is the contact...sharing of 'I experiences...and acknowledgement of feelings... bought up a few other things around um body image... lot of post-menopausal women... started to develop eating disorders, ...ageism, stereotyping .You won't find any of that on the internet... we have got written resources...we've got an intranet page...I do lots of training and presentations and things, and I was finding...if I was struck down by hot flush... I just couldn't carry on, speaking...after four years...got HRT, and within a week I've my life back...I was on it for ten years, menopause for me lasted about fourteen years</p>					
11	IPAI-B:1	I think, I think that it exists is probably the best, cos the fact is I don't think that a lot of people even know that it exists, what it is yeh,			discuss

		<p>but also when we can, we did some, we had something back from the curriculum on social care, if they'd mention it at all, it was like a paragraph and if you're teaching young people about periods and sex contraception and the rest, HIV HB: why are we not teaching them about the menopause Exactly</p>			education
12	IPAI-B:2	<p>Um, so I think as well, or as, its that recognition er of the changes in society that will happen between a mother and her daughter and actually having some of that passed down and I don't know whether in other cultures that is either passed down as some kind of wisdom, whether its never mentioned...</p>			discuss
13	IPAI-B:3	<p>Or they think you can will it away, HB: Like you said mind over matter, Absolutely I couldn't believe</p>			attitude
14	IPAI-B:4	<p>Thank you for your interest in our work and we really hope that it's going to make a difference... we hope to spread that work out to, Everything that we do inside is wanted to go outward facing and that is our chief executive's um, kind of take on mission. So that's what we want to do, umm, and we will be inviting a number of those employers to our staff network conference, and obviously we'll be doing something on the menopause. So we really hope to spread that.</p>			
15	IPAI-B:5	<p>Anything else you wanted to say on this subject?</p>		workplace	

IPAI-C: general summary - See Appendix C for full transcript

I'm the HR Policy and Equality manager... November 2016 to set it up as a sub group... of the women's group... I have a big interest obviously in women's and BAME for obvious reasons ... unhappy with kind of knowledge and information... a menopause steering group, which has about 15 members... meets every two months, and that steering group more or less co-ordinates the menopause activity in the council... a bitesize ... and a support group as well ... some intranet pages, some guidance, some facts... It is additional work... people really feel that 'I'm the only person in the world that's ever going through this'..., what we all realise is we're not the only people in the world that are going through this... it's great for sharing knowledge... having those sort of discussions, are so important... I did hear some comments from people saying "why, why are we doing guidance on menopause?" ... this is from women... never heard a negative problem thing from a man... sometimes senior women... can feel a bit threatened by putting stuff out about the menopause... defining somebody by gender... a senior woman who said this to me... she was very adamant that it was a personal issue you just go ahead and deal with it... my boss... he's got a ... wife, who's the same similar sort of age... he didn't really understand some of the issues that can affect women at that age, so I think it's just, knowledge... in HR we deal with a lot of the employment relations issues... and I think we're beginning to realise now that it can contribute to these... a bit more open, and having the guidance ... TUC have done some guidance, and the Royal College of Physicians... making it a bit informational, factual ... but practical more than anything, so people could really use it... we didn't want to make it too medical... it's supportive... we're pretty much pioneers in this... two thirds women to one third men... definitely for managers to, have awareness in management training... a lot of women are managed by male managers... it's just ridiculous that we get to this age, and we haven't got a clue what is really going on... I just felt this fear, this anxiety and I didn't know what was causing this... Agile working... you can work from anywhere... we have the right equipment, we have skype, we have all sorts of things here... if I know what something is, I can deal with it, if I don't know, I get worse... panicking, thinking ... how do I keep my livelihood... how do I get past this... I learnt profoundly that as bad as it is now, it won't last for ever... you will get past this... because our parents don't tell us anything... and people don't tell you how long it lasts either...

16	IPAI-C: 1	I do think we need to get more help from doctors, that I really do believe firmly, because I do feel that a lot of doctors, probably know about three sentences about the menopause and that worries me slightly because I remember the years before the, you know, I didn't know anything about peri-menopause, I didn't know the stages,	medical			
17	IPAI-C: 2	my doctor never said to me when I went to the doctor at forty-two, and said I'm really having problems sleeping, it was like you know you must be stressed or you know, peri-menopausal was not even on the, the list, she didn't even talk about it, so she didn't mention that option, then when I said I had dizziness, oh that must be because of something else, then when I had dizziness, that must be because of your ears, so you know, so it seems to me that doctors have very limited knowledge and that's what worries me slightly is that you go to your doctor and have a lot of faith and say they will help you, but they don't really know much themselves, so unless you're Googling it or you've got somebody who knows you don't know so having more knowledge I think from the medical profession would be really, really good.	medical			
18	IPAI-C: 3	have teaching obviously in schools and having you know, younger people being aware of it ...				discuss
19	IPAI-C: 4	and in the workplace, you know, having it more available here, so people know so I think just having that knowledge out there at a basic level...		workplace		
20	IPAI-C: 5	Especially if you had bad pains, you'd think oh great that means that I'm not going to have all these, so I do think that in schools they need to do considerably more on women's health through life, you know what is your health through life and it's it's a you know, it is a fact of people's lives as is staring periods as is some people having children and so, do it as a round as a whole thing. don't just focus on you know, periods and that's it, you know, so, there's more to life than that.				info
21	IPAI-C: 6	I think this is a really good project, its great to have this out in the open, and have this actually really discussed and out there, as I said the zeitgeist is right now, for women so, and its just something as we said shouldn't be a taboo,				discuss
22	IPAI-C: 7	and shouldn't be that you know, people will have to giggle or whisper or don't talk about it, so we're not in Victorian times, really...		workplace		
23	IPAI-C: 8	or make it a joke that's the other thing is that people tend to laugh about it,		workplace		
24	IPAI-C: 9	oh, it's just something silly, its like if you're going for those symptoms, pretty serious to you, ... yeah, to both you both, impacts the whole family, impacts your colleagues, impacts you know, a wider ripple your children if you have children, its all the same				impact

25	IPAI-C: 10	IPAI-B (in background) we have female important officers (muffled) females working here, They have to stand all day. They have uniforms... very horrible yeah... And they don't have access to breaks, yeah, yeah, Um, yeah so those are all issues	workplace		
26	IPAI-C: 11	yeah, very much yeah, and I say that to people, when they're planning long meetings, it sometimes annoys me when people have meetings that go on for a whole day or six or seven hours, and say you must realise that sitting down for long periods of time can be really traumatic for some people particularly, what if you've got a really heavy period or something going on, you need to have frequent breaks and don't keep people sitting for longer than an hour or an hour and a bit, let them get up and walk around, and take breaks, don't just, I wasn't aware of that myself, until this period of time, but it makes me think how do you plan things when you've got a group together, think about, how people can be comfortable	workplace		
27	IPAI-C: 12	HB: and what about things like temperature? temperature again, I mean we can't do much in this building unfortunately, because temperature is very limited, it is basically controlled and but that's why the agile working is important, and they can have little hand and desk um what-sit fans that you can, So you can put those on your computers but it is limited with temperature, but there is something again we need to be aware of, when we come into rooms like this, can we put blinds down? And try and make it as comfortable as you possibly can for people, but we know we are limited with this building, so, (breath) unfortunately, but yes. (Upbeat) But I think that people are beginning to get that, that message, slowly but surely that is going through so, we're a bit more considerate of each other than we were before,	workplace		
28	IPAI-C: 13	I'm really pleased that we're doing it and I'm glad we're pioneers as well, HB: I think it's that important and I think its...sad that we should be pioneering this now, it is sad isn't it, in this day and age, it needs to come out of the shadows, yeah, really, I mean that's why I'm so pleased with this, cos I think we've got it out of the shadows and we're talking about it so, you know,	workplace		
29	IPAI-C: 14	the intranet page you've pulled down there, sort of a little overview of what we've got here...and we've got this infographic here. ... that came from the one of the yeah, royal society of the physicians,	workplace		
30	IPAI-C: 15		workplace		

		<p>we got a... wall area in our café um which has had various menopause awareness week um and so here we've got about how we produced the guidance so there's a link to the guidance there, and there's case studies... there's some comments about women's experiences we've all contributed to that. Links to lots of resources, um and you've got there's support and that there and then we've got the documents, that support the work that we've been doing... So it's a really good one stop shop for people who don't know anything, to be able to find the things they need</p>		
31	IPAI-C: 16	<p>...cos that was one of the things we really realised with this steering group, was that there wasn't any resources out there, I mean there, you know you have to Google it, if you're sort of, you know out in the big world, and there was definitely nothing internally.</p>	workplace	
32	IPAI-C: 17	<p>There's a few women who've tried to make a business out of it, by selling various supplements. But you know, I don't, that's not what women need. Charge to come in and talk to people, cos most people when they do it want to sell their own supplements and that's what this is about, so, but we wanted to draw as much together, you know as we possibly could.</p>	workplace	selling
33	IPAI-C: 18	<p>I mean its interesting that even the Daily Mail, which I don't particularly read, has loads of articles about the menopause, if you Google, they do a lot of articles about things... yeah because their demographic is what it is, you know IPAI-B: Absolutely, I'm afraid I'm a Daily Mail reader, yeah yeah, you know, some papers definitely go into it, into quite a deep. And in the EYE has had a few articles about that, about the menopause as well,</p>		info
34	IPAI-C: 19	<p>so it is like spot, spot the article about it (sigh)... whenever we get anything new in we, we put it out, Hi: and its you or its the steering group, or? Its sort of any of us, yeah any of us, if we see something, you know that we think is will be of use to others, we try to get it on an intranet page, so people can access it, so, cos we know that this is all about information and sharing, and a lot of people just don't have that information, so er, so that's why we think that this page is great, because it just gives people pointers about what things are out there, where they can go to, (in breath) because even things on there that even your doctors wouldn't know...</p>		
35	IPAI-C: 20	<p>Unfortunately, its really sad to say ... don't you hear some terrible stories, terrible stories, yeah, and some doctors have said don't come to me unless you've stopped bleeding or whatever, that is their argument and you're like, actually but I'm going through all these things, just come to me when I've stopped and its like whats, whats that about, I mean, you, you could be up to ten years before you stop bleeding, I mean its ridiculous, but some doctors are just like that,</p>	workplace	support
36	IPAI-C: 21			medical

37	IPAI-C: 22	you really have to shop around to find a good doctor that is willing to listen to you and take you seriously so,	medical				
38	IPAI-C: 23	IPAI-B: There is something available at CUJH* IPAI-C: what IPAI-A was saying, there's a menopause area there.. yeah, well you see most people don't even know that exists, unfortunately. * Croydon University Hospital	medical				
PEI1: Olivia general summary -'I rush in order to avoid rushing'- but I don't do that so much any more- I like to get involved. Menopause, the physical symptoms are hideous. Its made me feel that my feet are stuck in the ground, glued. Believe in the natural cycle of life and its meant to be doing that. Nearly went on HRT. I had the prescription, I knew I wouldn't take it, but it got to that point... and it softened, (didn't take HRT). And the weight is a bit annoying.							
Date: 5th June 2019		Venue: My house		Time code: 54.19			
39	PEI-1: 1	its one of those things that, you know, you are more or less told about your periods at sort of 13, either your parents tell you or school tells you or your friends tell you, its all going on in that – and because you're surrounded by thirteen fourteen year old girls, its just all consuming, very very similar when you have babies, you tend to be one person's gone another person's gone another person's gone you find groups – what those baby groups are called, and you know, people are in the same situation, I think what happens is once children leave home your- everything is sort of more dispersed, you've got your friends obviously but they might be doing it at different times to you or not even have it, and you can have conversations that are quite private with one or two people, but it is, as far as society goes a bit of an end of the line for women,					support
40	PEI-1: 2	like we were saying you know, you've done what you're meant to do, you're not really that attractive anymore, you're a bit podgy, you're always moaning about some condition and you just talk about smelling of wee and eating cake, you know, its that sort of, we do resort to humour, so we become these humorous, what's that Beryl actress, that artist, Beryl somebody HB: Uh Beryl Cook yeah the big fat ladies, ya know, that is very much representative of once, you are over the hill as it used to be said, and I think Madonna has done something quite well I think for that, although, I'm not keen, to be fair, on fifty odd year old women wondering around the stage in a leotard, but you know she's as artist she's an actress, whatever, fine, who am I to judge, but, I think trying to be younger than you are, trying to cling on to something that's gone. I don't think is a great idea, embrace what's coming through but you don't have to,				culture	
41	PEI-1: 3					culture	confidence

	42 PEI-1: 4	<p>I think the problem is historically the role models are the beige coat, the old lady with the perm, we haven't created our newness yet, and I think that will come but we are the generation to change it for the next one, and the problem is we're sort of treading on, we're not quite sure, ohhh- hang on do we do that? Oh fuck I've just put the big knickers on, well yeah!</p>		culture	
	43 PEI-1: 5	<p>We need the big knickers because the big knickers are really comfortable and everybody I know, my age, wears big knickers, my mum used to wear big knickers and I used to think, hmmm weird, and I look at my kids knickers and I go you must be joking... But you want to be comfortable, the problem when you say that word, it immediately then goes frumpy, flat shoes, we don't do heels you go over on your ankle, it becomes practical it becomes comfortable, it becomes you don't want to be sort of... you know out in your mini skirt and your heels on at three o'clock in the morning in a club, you just don't!</p>			comfort
	44 PEI-1: 6	<p>You know, your priorities change, you change, you want your lunch rather than an evening meal, you want to go to bed earlier, and that's, I don't think that should be seen as a bad thing or an oh my god. It should be revered and respected and wow, you know she's gathering in, you're gathering in, um so I think we've, again,</p>			respect
	45 PEI-1: 7	<p>I think there is a bit of a problem, there's not many really old women that you can go yeah, brilliant, brilliant role models...some actresses, the Dames, a very small group of women... in this country... we'd be putting each other down... Loose Women makes my skin crawl... a gaggle of women, ugh,</p>		culture	
<p>PEI2: Violet general summary- I'm on the brink of it, and our entire senior management team (bar one man) is going through. Practical things, like writing everything down. Ageing gracefully. If you dare to have an opinion you're branded angry. I grew up in an Asian country. Embracing who you are. What you've got to work with. Sons more important than daughters. Being invisible can put you under the radar. Doing my own thing. If you want to break rules, dress very conservatively, you're more likely to break through. Its about what's important to you, what you want to achieve. Mum's menopause -she was in an absolute state, given anti-depressants, so many factors coming together,treated for depression she didn't really have.</p>					
46	PEI-2: 1	<p>I think that it is a positive experience, it's just natural, it's something every woman goes through,</p>			positive

47	PEI-2: 2	I don't understand why it's not represented more, it's not more visible, there's not more information about it.				not visible
48	PEI-2: 3	Um, you know, one of the really interesting thing- I was really shocked, when some of the symptoms started presenting, but I read so widely, and I have a group of friends who are women who are all older than me, but no one said anything!				really shocked
49	PEI-2: 4	Er I was just very lucky that I had someone who sat behind me at work and said 'Right' ... Uh so basically said, uh I think you should think about doing some reading and talked to me about her experience of going through the menopause. So talked to me about um, the mood swings uh, being emotional, um, you know, um for the first time actually being interested in sex in a very kind of transactional way,	workplace			
50	PEI-2: 5	um so I think that was really interesting cos you've just coasted along, you've hit your forties and then suddenly, if you've had very heavy periods, um you've had to manage all of that, suddenly you come to a four year period, when it kind of becomes light, it doesn't really affect you so much, you're skipping along very merrily, you know careers going fine, and then this hits you and you think, What! Is this all you get? Do you only get a four year, you know, window where you're relatively stable and- so it starts all over again.	workplace			
51	PEI-2: 6	But I think now that I've- I think, I've decided, I'm just gonna sit through, I was just gonna experience it all,				experience
52	PEI-2: 7	even though she said 'oh have you thought about HRT?' 'have you gone to your doctor?' ... HB: Did she take HRT? She did, and her daughter started the menopause quite early and her mood swings were so bad that they affected the relationship with the children so she really encouraged her, her daughter to see the doctor and go down the HRT route, but I thought, this is normal and this is natural and everyone's just going to have to put up with it.	medical			
53	PEI-2: 8	And so, I did just do it on my own way... HB: I just wondered what you thought about her intervention in that way at that particular moment? Uh I think it- I think it was really important, because I didn't understand what was going on, it didn't even occur to me I might be going into peri menopause,				support
54	PEI-2: 9	and I think until then, I'm not sure I'd heard the word peri menopause and if I had, it hadn't actually sunk in...				didn't know
55	PEI-2: 10	Anything else you wanted to say on this subject?				one part

<p>PEI3; Emma general summary- Became aware of menopause as I've got older. Mid-thirties? I Role models? look at the Queen, well and truly a pensioner and still working. Mis-diagnosed HRT for 2-3 years, coming off has transformed her. This affected her work-life for 3-4 years. 'to me, its criminal, if this was a new disease, that's fine, but its not, it's something we've been going through... so why is it an issue?' Could I live a life without wine? I'd rather not. For fortieth birthday, learned to strip- Massively empowering, Parcel delivery. Youth is wasted on the young- I've had a phenomenal life.</p>						
56	PEI-3: 1	To the wider world um I think that GPs should be better informed, um just because x is x hormone is higher than it should be - doesn't necessarily mean that you are menopausal, I also think there should be better understanding, as we discussed, um about adverts around tampons etc. That didn't happen in the 1970s started around 1989 ish, so we've started talking about that part of our lives, we need to start talking about this now, it has to be an informed debate, cos we're not stupid, and it has to be a lot more informed than it is	medical			discussion/ debate
57	PEI-3: 2	HRT should not be immediately pushed towards everyone- GPs making money naturally is better, could be harder but better,	medical			sales
58	PEI-3: 3	like dealing with obesity, fitness, look after yourself, you'll still have to look after yourself.				natural
59	PEI-3: 4	No it has been an interesting experience.				self-care
60	PEI-3: 5					
<p>Anything else you wanted to say on</p>						
61						
<p>PEI4; Holly general summary- Menopause isn't discussed enough. isn't represented enough in our society. Half the population go through it. My mum was hot and bothered, didn't seem to know much about it, and she was a nurse. Made me frightened, so I decided to try and read a lot about it, . Stop looking at it as an ending, look at it as its a beginning. night swetas, horrible. Once you're through, much more liberty. I've always been forgetful. Attitudes have to change.</p>						

62	PEI-4: 1	Um, I think, I think, as a society we need to be more open about it, we need to be able to talk about it the way we can talk about puberty. Puberty isn't hidden, particularly, its seen as a positive thing, its seen as, you know, a new start in a, in a, child's life, becoming an adult, and you know, there's a sense of hope and promise from puberty, and I think menopause needs to be spoken about in the same way. Whereas menopause, it's so hard to find anything positive about it in general feeling if you talk to people about it,				discuss
63	PEI-4: 2	for start men never want to talk about it in my experience, even my husband, he'll just go a bit quiet and put his arm round me or something, he doesn't really talk about it... Yeah... we're best friends, we can talk about everything, it's just that if ever I talk about 'Oh god I'm getting a bit foggy-headed again' or you know I get upset cos I can't lose my weight, he'll instead of sort of saying 'well lets find something we can do together', he'll say 'oh, you still look lovely' which is really sweet, but quite retarded, um HB: Does that help? No course not, it's the 'Does my bum look big in this?' question' isn't it.				discuss
64	PEI-4: 3	Yeah I think feel very strongly about the fact that the menopause, is just, for some reason, it has become this- it's no longer the secret it probably was, you know, in the 1960s, 50s, 60s, 70s, but it's still the thing, that it's, 'ohh it's a bit dangerous to go there' or 'oh she's probably upset, move on', and you know, I'm not upset about going into the menopause, I'm not upset about it. What upsets me is, attitudes towards it,				attitudes
65	PEI-4: 4	when it's an opportunity in your life, to find something else, to go somewhere else with it, to do something else- or not even that if you don't want to, you know- take all the HRT you like, dye your hair, stay on a diet, if that's what you want to do, do it!				confidence
66	PEI-4: 5	But it's just, I don't like the way its brushed under the carpet, and I didn't think that by the time that I got to my early fifties it still would be like that, I thought it would be much more of an open thing,				invisible
67	PEI-4: 6	and even found my GP doesn't want to talk about it, yeah, and she's a woman.	medical			
68	PEI-4: 7	Yes yeah, I've requested to be allowed to go to the Chelsea and Westminster menopause clinic, because I want my bloods tested, since I've had this huge operation I've noticed things have changed, and I- I want my bloods tested properly, I want to be able to speak to somebody who is an expert,	medical			
69	PEI-4: 8	not a GP who really doesn't know anything about the menopause, um and I was kind of met with a 'oh but you're nearly there aren't you?' attitude, Why would you? We don't do that anymore, we don't do that anymore', well I know they do, so I'll have ask again...	medical			

		<p>I just read things online and funnily enough, um, I'd read the- online about being referred to the Chelsea and Westminster, and then I um- accidentally caught The One Show and there was an article on the one show saying don't be- don't let your GP tell you that they can't do this because they can, and my GP had also said to me that the NHS no longer do bio-identical HRT, they only do the regular HRT, which I don't want to take, its full of chemicals, and she told me that they no-longer refer people for bio-identical, which is absolute nonsense. If the BBC can research it and tell me on The One Show that they do that, then how come my GP in Wandsworth doesn't know. So little things like that, that's what annoys me, it shouldn't have to be a fight, you know,</p>	medical	online	
70	PEI-4: 9	<p>women of a certain age should be allowed to say to their GP, I'm feeling this, I'm feeling that, is it this? is it that? Who's gonna help me? And you can't, you have to say, I want this, I want this, and you have to keep on, and that's what annoys me...</p>	medical		
71	PEI-4: 10	<p>HB: And they won't let you self-refer? Um Well, no I haven't even asked about that actually, I don't think so, I'm still, um I've been signed off after my fibroid operation, my myomectomy, Um but I can still go back there if I'm feeling that anything is not quite right, and I'm feeling that things are not quite right in here, so I'm going back there first, and maybe they'll just give me an automatic referral, I don't know I'll have to ask them. They are amazing, absolutely amazing- St Georges, (Tooting).</p>	medical		
72	PEI-4: 11	<p>One of the reasons I wanted to talk to you is because I feel so strongly about the attitude that needs to change. Attitude is the most important thing we need to change. One menopausal woman at a time, needs to change the attitude of people around her.</p>	medical		attitudes
73	PEI-4: 12	<p>Anything else you wanted to say on this subject?</p>			
74	PEI-5: 1	<p>PEI 5: Peggy general summary- Big shock- didn't know what it was. Didn't know what it was at first, spoke to the doctor. Hot flushes, night sweats, panic attacks, learning to live with it. Don't know how long it will go on for, now 14 years. Mum died already, she wasn't a talker, didn't share. Went to Doctor, who said 'you're going through the change of life'. 'I could do with a change of life...cos I don't like this one.' Another thing on the list. Mum was a good cleaner, thats where I get it from. I'd talk to my daughter, if she asked me. A mini version of me. Sister says something.. mum would have said it the same way.</p>			
74	PEI-5: 1	<p>Advice, talk to more people, talk to people who you think, how can I put it...? confide in someone. I didn't have that opportunity. So I think if you confide in someone, like, me and you are talking now, it's better. It's like you're coming out, and you're helping other people, ya know,</p>			talk to others

75	PEI-5: 2	<p>as I said everyone don't go through the same stuff, but everyone goes through the menopause- all women go through it, ya know, you don't realise, and it's scary, if you don't know what's happening.</p>			education
76	PEI-5: 3	<p>Like when I didn't and I got to know and I got that advice and it made me feel a bit better not *muffled*. But ya know, it made me feel a lot better, that I weren't the only one, ya know, who was going through this, ya know, and it would be nice if you had somewhere you could talk to about it to someone. Yeah, like a friend, a sister anyone, a family member ya know, someone like close to you.</p>			support
<p>PEI6: Helen 2 general summary- Very current for her, still at the beginning, only 2 years in, there's a whole lot about menopause that is not understood yet, as a society and for medics, generally. Four or five years ago told she was perimenopausal by a nurse, what is that? End of fertility, do I really not want children? Mum said it wasn't a big deal, very practical. Her own fibroid problem- day surgery, very traumatic, then the same procedure a second time, after collapsing at work, menstruation problems- heavy bleeding, low iron levels. They wanted to remove her womb with the fibroid, making another health condition worse. Third consultation recommended another method- two or three final menstruations and then stopped. OK, that's what menopause is, not too bad.</p>					
77	PEI-6: 1	<p>I would say that it is a natural process and we should celebrate it and not look at it as an illness that needs to be treated.</p>	medical		
78	PEI-6: 2	<p>So, um, I have I didn't mention that yet, but there was a time, when every evening at 9:30 pm, I would have a heatwave going over me, Yeah but just like one, I would think okay its 9:30, so I'd sit down and I would be drenched in sw-weat. I went to the um Royal London Hospital for Integrated Medicine where they use homeopathy and I was given something to take at 9.28 (Hi: And did it help?) absolutely um some mixture- I think it contained belladonna, but um, homeopathy is personal right its- it depends on- and just because it worked for me it doesn't mean it would work for someone else</p>	medical		
79	PEI-6: 3	<p>but um, I think um, alternative treatments, or natural medicines can do so much, especially when it comes to the symptoms of menopause, yeah.</p>	medical		

<p>PEI7: Judi general summary- Had blood tests for FSH (Follicle Stimulating Hormone) which began to deteriorate, so therefore knew she was menopausal. Kept being offered HRT, but preferred to try reflexology, progesterone cream, naturopathic remedies- wild yam, agnes castus, seeds, nuts, nettles, menopause cakes, then got sick of it, stopped taking it all and didn't feel any worse. Lost all confidence, gossip at work, mum not a source of information. Work used to be really important when younger, it's all petty stuff. Work is not important really in the grand scheme of things.</p>						
<p>Date: 19th July 2019</p>		<p>Venue: My house.</p>		<p>Time code: 47.13</p>		
80	PEI-7: 1	Um, listen to what the doctors say, but make up your own mind, and -find out as much as you can about options from HRT and do what's best for you, because everybody is different and I've known people that've taken HRT, and, you know, swear by it, and they got on really well with it and um, and that's great but,	medical			
81	PEI-7: 2	you know, the only thing the doctors ever gave me about the menopause was a, a little kind of booklet thing and it was obviously done by the firms that make the HRT pills and its selling it, you know,	medical			selling
82	PEI-7: 3	I had... a day surgery thing one time, when I was having the menopause, and went for the results in the hospital, and the guy who was there - every time I went there was a different doctor and it wasn't the doctor who did the operation, um, he said to me, 'how are you', and 'yeah we have the results and everything's OK' and I was having a conversation with him and I said I was in the menopause, and he said 'you can't be in the menopause', he said 'no, no', I said 'well you know I've done a test and I am' and the nurse checked back the blood test and sure enough they said FSH label, and he said, 'oh what're you doing for that?' and he said 'I've got a woman doctor colleague who's heading, who's that sort of age, and she doesn't want to take HRT so what are you taking?' and you know I thought that was really interesting because... he wrote it all down on a paper towel, you know, I said... you need to read these books so everyone is different	medical			
83	PEI-7: 4	and I think, I know people will think they should do what the doctor says so, that's good for them, then, but I would suggest that they look a bit further afield.	medical			
<p>Anything else you wanted to say on this subject?</p>		<p>I don't think so.</p>				
84						

<p>PEI8: Jane general summary- Not sure about being in the menopause at first, relatively early and therefore needed tests by doctor to confirm. Aware of repeating her mother's menopause experience, putting on her best brave face and trying to minimise the effect on other people. Pressure to conform a form of tyranny. Women constrained, there may be ways of being that... people haven't cottoned onto yet. Missing generation of female football players.</p>					
85	<p>PEI-8: 1</p> <p>So I think I did do some thinking about this before. I don't know if you can describe it as a meta-debate, but to even have a debate, you know that there should be- it should have a higher profile and peoples um experiences and views and feelings surfaced within society and public life... Women's preoccupations get drowned out or you know, or not respected or responded to in the way that they should.</p>				debate
86	<p>PEI-8: 2</p> <p>um, well maybe moving onto my next point, which is that despite you know everything and the efforts of people like Germaine Greer, um the menopause is still viewed in quite a paternalistic and um commercialised way, in that its um you know, how can outside interests exploit the menopause for their own purpose, without women taking control of the whole agenda, um and our interests, what, how would we organise things and what support and provision would we put in place if it was fully within our control? ...</p>				agendas
87	<p>PEI-8: 3</p> <p>I wouldn't just pin it on the medical profession, also some of the complimentary approaches are not necessarily evidence-based, they're a bit fluffy but, some of the things are fairly harmless placebos... Some of the remedies, do they truly make a difference? particularly for the amount of money that people are being asked to pay for them and there is a lot of fashion, what's fashionable as a remedy and who's calling the shots? To my mind vaguely sinister idea of social influencers who might be sort of setting the trend in terms of what's good for the menopause, but actually where's that coming from? who's saying that? I don't engage with social media to that extent... There is an industry founded on the back of women's menopause and does it truly serve their interests... Turns it into, not exactly a commodity but, it's not viewed as an experience that needs to be, women need to find a pathway through in their own way ... but you need these products to navigate your way through, and that might not actually be the case.</p>				products

<p>Anything else you wanted to say on this subject?</p>							
<p>88 PEI-8: 4</p>	<p>I think cultural representations are important because they, you know, encapsulate the experience in a, sort of, satisfactory and rounded way that women can identify with, and that they might- you know, it might sow some seeds of things that they haven't quite sort of you know, coalesced in their minds but it might sort of, it might help those things come out or, you know, talk to each other about what that portrayal meant to them and how they identified with it, um and anything that ensures sort of, renewed focus and attention on women's you know needs and provision and experience, when you know we deserve this because in population terms, Germaine Greer said, we are 17% of the British population, this is the over the fifties females.</p>	<p>culture</p>					
<p>89 PEI-8: 5</p>	<p>Louise Foxcroft said something about menopause being a significant marker in life, and it's a badge that's been earned so let's turn the tables and celebrate it and mark and reject the negativity and the stereotypes,</p>		<p>bias</p>				
<p>90 PEI-8: 6</p>	<p>you talked about missing statues the other thing that always jumps out at me is the missing street names, just walking through from Brockwell Park there was Charles somebody Road and you know, why is it not Janet Naghten or Hilary Baxter? you don't have to have died to have a road named after you.</p>		<p>culture</p>				
<p>91 PEI-8: 7</p>	<p>From Gloria Steinem- moving closer to the true self, so the importance of authenticity, openness, respecting a range of individual meanings around the menopause and in particular seeing independence as a positive choice, why women might prefer to retreat rather than being viewed as cast away or put on the scrap heap or just not really worth valuing as participants in society,</p>				<p>respect</p>		
<p>92 PEI-8: 8</p>	<p>Germaine Greer's chapter heading: Serenity and Power, freeing yourself of the burdens you have unwitting carried up until that point in your life, putting things in their proper place, work, family, being a bit more circumspect, self-pleasing knowing what you like and what you don't like, not having to go along with things if you'd rather not. A bit more self-confidence to express your views on what's what...Self-assurance.</p>						<p>confidence</p>

Appendix K : 2 Comments ordered by group responsibility, first themes emerging

Key: IPAI- Interpretative Phenomenological Analysis interview, PEI- Photo Elicitation interview.

#	interviewee comment	responsibility			themes	#
		workplace	medical	society		
IPAI-A: 10	and don't just make it humorous, cos, most of the stuff that's out there artistically is humorous, and I can understand, we do have a laugh in the support group as well, but it's not all funny ha ha, it's just not, it trivialises it to some degree, it's a tragedy, (pause) with funny moments, there's not all that many funny moments, some in the sense of solidarity, and the relief of being able to share, some of the tragedy with somebody else, (pause) it's not that funny, a lot of the stuff that goes on, like we were saying you know, you've done what you're meant to do, you're not really that attractive anymore, you're a bit podgy, you're always moaning about some condition and you just talk about smelling of wee and eating cake, you know, its that sort of, we do resort to humour, so we become these humorous, what's that Beryl actress, that artist, Beryl somebody HB: Uh Beryl Cook yeah the big fat ladies, ya know, that is very much representative of once, you are over the hill as it used to be said, and I think Madonna has done something quite well I think for that, although, I'm not keen, to be fair, on fifty odd year old women wondering around the stage in a leotard, but you know she's as artist she's an actress, whatever, fine, who am I to judge, but, I think trying to be younger than you are, trying to cling on to something that's gone, I don't think is a great idea, embrace what's coming through but you don't have to,			a-culture	emerging	1
PEI-1: 2	I think the problem is historically the role models are the beige coat, the old lady with the perm, we haven't created our newness yet, and I think that will come but we are the generation to change it for the next one, and the problem is we're sort of treading on, we're not quite sure, ohhh- hang on do we do that? Oh fuck I've just put the big knickers on, well yeah!			a-culture		2
PEI-1: 3	I think there is a bit of a problem, there's not many really old women that you can go yeah, brilliant, brilliant role models...some actresses, the Dames, a very small group of women... in this country... we'd be putting each other down... Loose Women makes my skin crawl... a gaggle of women, ugh,			a-culture	confidence	3
PEI-1: 4	you talked about missing statues the other thing that always jumps out at me is the missing street names, just walking through from Brockwell Park there was Charles somebody Road and you know, why is it not Janet Naghten or Hilary Baxter? you don't have to have died to have a road named after you.			a-culture		4
PEI-8: 6	I think cultural representations are important because they, you know, encapsulate the experience in a, sort of, satisfactory and rounded way that women can identify with, and that they might- you know, it might sow some seeds of things that they haven't quite sort of you know, coalesced in their minds but it might sort of, it might help those things come out or, you know, talk to each other about what that portrayal meant to them and how they identified with it, um and anything that ensures sort of, renewed focus and attention on women's you know needs and provision and experience, when you know we deserve this because in population terms, Germaine Greer said, we are 17% of the British population, this is the over the fifties females.			a-culture		5
PEI-8: 4	I mean its interesting that even the Daily Mail, which I don't particularly read, has loads of articles about the menopause, if you Google, they do a lot of articles about things ... yeah because their demographic is what it is, you know IPAI-B: Absolutely, I'm afraid I'm a Daily Mail reader, yeah... yeah, you know, some papers definitely go into it, into quite a deep. And in the EYE has had a few articles about that, about the menopause as well,			a-culture		6
IPAI-C: 19	I also think there should be better understanding, as we discussed, um about adverts around tampons etc. That didn't happen in the 1970s started around 1989 ish, so we've started talking about that part of our lives, we need to start talking about this now, it has to be an informed debate, cos we're not stupid, and it has to be a lot more informed than it is			a-culture	media	7
PEI-3: 2				b-discuss	debate	8
						9

PEI-4: 1	Um, I think, I think, as a society we need to be more open about it, we need to be able to talk about it the way we can talk about puberty. Puberty isn't hidden, particularly, its seen as a positive thing, its seen as, you know, a new start in a, in a, child's life, becoming an adult, and you know, there's a sense of hope and promise from puberty, and I think menopause needs to be spoken about in the same way. Whereas menopause, it's so hard to find anything positive about it in general feeling if you talk to people about it.	b-discuss				10
PEI-4: 2	for start men never want to talk about it in my experience, even my husband, he'll just go a bit quiet and put his arm round me or something, he doesn't really talk about it... Yeah... we're best friends, we can talk about everything, it's just that if ever I talk about 'Oh god I'm getting a bit foggy-headed again' or you know I get upset cos I can't lose my weight, he'll instead of sort of saying 'well lets find something we can do together', he'll say 'oh, you still look lovely' which is really sweet, but quite retarded, um HB: Does that help? No course not, it's the 'Does my bum look big in this?' question' isn't it.	b-discuss				11
IPAI-B:1	I think, I think that it exists is probably the best, cos the fact is I don't think that a lot of people even know that it exists, what it is yeh,	b-discuss	family			12
IPAI-B:3	Um, so I think as well, or as, its that recognition er of the changes in society that will happen between a mother and her daughter and actually having some of that passed down and I don't know whether in other cultures that is either passed down as some	b-discuss				13
IPAI-C: 6	I think this is a really good project, its great to have this out in the open, and have this actually really discussed and out there, as I said the zeitgeist is right now, for women so, and its just something as we said shouldn't be a taboo,	b-discuss				14
PEI-5: 1	Advice, talk to more people, talk to people who you think, how can I put it...? confide in someone. I didn't have that opportunity. So I think if you confide in someone, like, me and you are talking now, it's better. It's like you're coming out, and you're helping	b-discuss	debate			15
PEI-8: 1	So I think I did do some thinking about this before. I don't know if you can describe it as a meta-debate, but to even have a debate, you know that there should be- it should have a higher profile and peoples um experiences and views and feelings surfaced within society and public life...Women's preoccupations get drowned out or you know, or not respected or responded	b-discussion				16
IPAI-B:4	Or they think you can will it away, HB: Like you said mind over matter, Absolutely I couldn't believe	c-attitudes				17
PEI-4: 3	Yeah I think feel very strongly about the fact that the menopause, is just, for some reason, it has become this- it's no longer the	c-attitudes				18
PEI-4: 12	One of the reasons I wanted to talk to you is because I feel so strongly about the attitude that needs to change. Attitude is the most important thing we need to change. One menopausal woman at a time, needs to change the attitude of people around her.	c-attitudes	g)-commerce			19
PEI-8: 2	um, well maybe moving onto my next point, which is that despite you know everything and the efforts of people like Germaine Greer, um the menopause is still viewed in quite a paternalistic and um commercialised way, in that its um you know, how can outside interests exploit the menopause for their own purpose, without women taking control of the whole agenda, um and our interests, what, how would we organise things and what support and provision would we put in place if it was fully within our control? ...	c-attitudes				20
PEI-8: 5	Louise Foxcroft said something about menopause being a significant marker in life, and it's a badge that's been earned so let's turn the tables and celebrate it and mark and reject the negativity and the stereotypes,	c-attitudes	respect			21
PEI-1: 6	You know, your priorities change, you change, you want your lunch rather than an evening meal, you want to go to bed earlier, and that's, I don't think that should be seen as a bad thing or an oh my god. It should be revered and respected and wow, you	c-attitudes	respect			22
PEI-8: 7	From Gloria Steinem- moving closer to the true self, so the importance of authenticity, openness, respecting a range of individual meanings around the menopause and in particular seeing independence as a positive choice, why women might prefer to retreat rather than being viewed as cast away or put on the scrap heap or just not really worth valuing as participants in society.	c-attitudes				23

IPAI-B:2	but also when we can, we did some, we had something back from the curriculum on social care, if they'd mention it at all, it was like a paragraph and if you're teaching young people about periods and sex contraception and the rest, HIV HB: why are we not teaching them about the menopause Exactly				d-education		24
IPAI-C:5	Especially if you had bad pains, you'd think oh great that means that I'm not going to have all these, so I do think that in schools they need to do considerably more on women's health through life, you know what is your health through life and it's it's a you know, it is a fact of people's lives as is staring periods as is some people having children and so, do it as a round as a whole thing.						25
IPAI-C:3	have teaching obviously in schools and having you know, younger people being aware of it ...				d-education		26
PEI-2:9	and I think until then, I'm not sure I'd heard the word peri menopause and if I had, it hadn't actually sunk in...				d-education		27
PEI-5:2	as I said everyone don't go through the same stuff, but everyone goes through the menopause- all women go through it; ya know, No, not really, I would just like people to think more about the mental disaggregation, the mood, the deep grief, and distress, that kind of makes everything really hard, to find solid ground again,				d-education		28
IPAI-A:8	its one of those things that, you know, you are more or less told about your periods at sort of 13, either your parents tell you or school tells you or your friends tell you, its all going on in that – and because you're surrounded by thirteen fourteen year old girls, its just all consuming, very very similar when you have babies, you tend to be one person's gone another person's gone another person's gone you find groups – what those baby groups are called, and you know, people are in the same situation, I think what happens is once children leave home your- everything is sort of more dispersed, you've got your friends obviously but they might be doing it at different times to you or not even have it, and you can have conversations that are quite private with one or two people, but it is, as far as society goes a bit of an end of the line for women,				e-support		29
PEI-1:1	Um, you know, one of the really interesting things- I was really shocked, when some of the symptoms started presenting, but I read so widely, and I have a group of friends who are women who are all older than me, but no one said anything!				e-support		30
PEI-2:3	And so, I did just do it on my own way... HB: I just wondered what you thought about her intervention in that way at that particular moment? Uh I think it was really important, because I didn't understand what was going on, it didn't even				e-support		31
PEI-2:8	Like when I didn't and I got to know and I got that advice and it made me feel a bit better not *muffled*. But ya know, it made me feel a lot better, that I weren't the only one, ya know, who was going through this, ya know, and it would be nice if you had somewhere you could talk to about it to someone. Yeah, like a friend, a sister anyone, a family member ya know, someone like				e-support		32
PEI-5:3	There's a few women who've tried to make a business out of it, by selling various supplements. But you know, I don't, that's not what women need. Charge to come in and talk to people, cos most people when they do it want to sell their own supplements and that's what this is about, so, but we wanted to draw as much together, you know as we possibly could.				e-support		33
IPAI-C:18	I wouldn't just pin it on the medical profession, also some of the complimentary approaches are not necessarily evidence-based, they're a bit fluffy but, some of the things are fairly harmless placebos... Some of the remedies, do they truly make a difference? particularly for the amount of money that people are being asked to pay for them and there is a lot of fashion, what's fashionable I don't understand why it's not represented more, it's not more visible, there's not more information about it.				f-commerce		34
PEI-8:3	But it's just, I don't like the way its brushed under the carpet, and I didn't think that by the time that I got to my early fifties it still				f-commerce		35
PEI-2:2	oh, it's just something silly, its like if you're going for those symptoms, pretty serious to you, ... yeah, to both you both, impacts the whole family, impacts your colleagues, impacts you know, a wider ripple your children if you have children, its all the same				g-invisible		36
PEI-4:5	but there's a lot of stuff you have to do with other people as well, so it's very difficult... and I think, that people can easily scapegoat people in the workplace, or go, oh she's miserable or she's a nasty person, you know whatever,				g-invisible		37
IPAI-C:9	and shouldn't be that you know, people will have to giggle or whisper or don't talk about it, so we're not in Victorian times, really...				h-impact		38
IPAI-A:4		workplace issue				behaviour - gossip	39
IPAI-C:7		workplace issue				behaviour - gossip	40

IPAI-C: 8	or make it a joke that's the other thing is that people tend to laugh about it,					behaviour - jokes	41
IPAI-A: 2	really agitated, as if somebody's trying to tell you something, and then its so hard to retain any of that; that remembering, people				workplace issue	overwhelming	42
IPAI-C: 10	IPAI-B (in background) we have female important officers (muffled) females working here, They have to stand all day. They have uniforms... very horrible yeah... And they don't have access to breaks, yeah, yeah, Um, yeah so those are all issues				workplace issue	culture- org'zational	43
IPAI-A: 1	I think it's understanding what it does to some women's minds, and how fragile that makes one feel and that it doesn't necessarily come out as fragility, it might come out so what people might see in the workplace, see if I'm feeling very overwhelmed, and understanding what it is to work in (breath) we're nice and empty today, but when that place is full of people, it's humming. it's buzzing, it's just so awful, (breath) its almost as if I were to staging it; in my mind it's like when I saw that thing about the dog. Curious Incident of the Dog and they had all the lights and swirling, that's how it is it's like an assault on the senses, stuff swirling around, stuff coming at you in different ways, like a war zone, like bombs and stuff, (pause breath) I feel like that edge of adrenalin a lot of the time, and that's really horrible and sometimes I like take myself somewhere really quiet to work,				workplace issue	culture- org'zational	44
IPAI-A: 3	um so I think that was really interesting cos you've just coasted along, you've hit your forties and then suddenly, if you've had very heavy periods, um you've had to manage all of that, suddenly you come to a four year period, when it kind of becomes light, it doesn't really affect you so much, you're skipping along very merrily, you know careers going fine, and then this hits you and you think, What! Is this all you get? Do you only get a four year, you know, window where you're relatively stable and- so it starts all over again.				workplace issue	culture- org'zational - environment	45
PEI-2: 5	I won't be driven from this job, that's my thing, it's like I can walk to this job and ...and I will be able to move when I'm more well... I keep looking out for what might be a nice job to move, and I haven't not found it yet, but I'm sure I will,				workplace issue	impact	46
IPAI-A: 6	yeah, very much yeah, and I say that to people, when they're planning long meetings, it sometimes annoys me when people have meetings that go on for a whole day or six or seven hours, and say you must realise that sitting down for long periods of time can when we come into rooms like this, can we put blinds down? And try and make it as comfortable as you possibly can for people, but we know we are limited with this building, so, (breath) unfortunately, but yes. (Upbeat) But I think that people are beginning to get that, that message, slowly but surely that is going through so, we're a bit more considerate of each other than we were				workplace issue	impact	47
IPAI-C: 11	we got a ... wall area in our café um which has had various menopause awareness week um and so here we've got about how we produced the guidance so there's a link to the guidance there, and there's case studies... there's some comments about women's experiences we've all contributed to that. Links to lots of resources, um and you've got there's support and that there and then we've got the documents, that support the work that we've been doing...So it's a really good one stop shop for people who don't				workplace initiative	behaviour org'zational	48
IPAI-C: 13	HB: and what about things like temperature? temperature again, I mean we can't do much in this building unfortunately, because temperature is very limited, it is basically controlled and but that's why the agile working is important, and they can have little hand and desk um what-sit fans that you can, So you can put those on your computers but it is limited with temperature, but there is something again we need to be aware of,				workplace initiative	behaviour org'zational	49
IPAI-C: 16	I deliberately choose to come in when it's quiet, sometimes, we have flexi-working and flexi working has really helped us, as a workplace, we can work from home if we want, depends on your manager, but you can work from home if you want or you can work at ten o'clock at night here in the building, there's twenty-four hour building, you can come in at five in the morning, if you can't sleep you can come in, and you can do work from home, for it can be done (in breath) those kinds of things you know, or if				workplace initiative	environment	50
IPAI-C: 12	I'm really pleased that we're doing it and I'm glad we're pioneers as well, HB: I think it's that important and I think its...sad that we should be pioneering this now, it is sad isn't it, in this day and age, it needs to come out of the shadows, yeah, really, I mean that's why I'm so pleased with this, cos I think we've got it out of the shadows and we're talking about it so, you know,				workplace initiative	environment	51
IPAI-A: 7					workplace initiative	culture org'zational - flexibility	52
IPAI-C: 14					workplace initiative	discussion	53

IPAI-C: 4	and in the workplace, you know, having it more available here, so people know so I think just having that knowledge out there at a basic level...	workplace initiative			education	54
IPAI-C: 17	...cos that was one of the things we really realised with this steering group, was that there wasn't any resources out there, I mean there, you know you have to Google it, if you're sort of, you know out in the big world, and there was definitely nothing internally.	workplace initiative			finding resources	55
IPAI-C: 15	the intranet page you've pulled down there, sort of a little overview of what we've got here...and we've got this infographic here, ... that came from the one of the yeah, royal society of the physicians,	workplace initiative			intranet pages	56
IPAI-A: 5	and (pause) just having that kindness to each other, so I try to do things that are about being kind to people, being supportive to other colleagues...	workplace initiative			supporting others	57
IPAI-C: 20	so it is like spot, spot the article about it (sigh)...whenever we get anything new in we, we put it out, H: and its you or it's the steering group, or? Its sort of any of us, yeah any of us, if we see something, you know that we think is will be of use to others, we try to get it on an intranet page, so people can access it, so, cos we know that this is all about information and sharing, and a lot of people just don't have that information, so er, so that's why we think that this page is great, because it just gives people pointers about what things are out there, where they can go to, (in breath) because even things on there that even your doctors Er I was just very lucky that I had someone who sat behind me at work and said 'Right' ... Uh so basically said, uh I think you should think about doing some reading and talked to me about her experience of going through the menopause. So talked to me about uhm, the mood swings uh, being emotional, um, you know, um for the first time actually being interested in sex in a very kind of transactional way,	workplace initiative			supporting others	58
PEI-2: 4	Thank you for your interest in our work and we really hope that it's going to make a difference... we hope to spread that work out to, Everything that we do inside is wanted to go outward facing and that is our chief executive's um, kind of take on mission. So that's what we want to do, umm, and we will be inviting a number of those employers to our staff network conference, and obviously we'll be doing something on the menopause. So we really hope to spread that.	workplace initiative			support from colleague	59
IPAI-B: 5	Unfortunately, its really sad to say... don't you hear some terrible stories, terrible stories, yeah, and some doctors have said don't come to me unless you've stopped bleeding or whatever, that is their argument and you're like, actually but I'm going through all these things, just come to me when I've stopped and its like whats, whats that about, I mean, you, you could be up to ten years before you stop bleeding, I mean its ridiculous, but some doctors are just like that,	workplace mission			visibility	60
IPAI-C: 21	and even found my GP doesn't want to talk about it, yeah, and she's a woman.		medical	c-attitudes	GPs	61
PEI-4: 6	a GP who really doesn't know anything about the menopause, um and I was kind of met with a 'oh but you're nearly there aren't you? attitude, Why would you? We don't do that anymore, we don't do that anymore', well I know they do, so I'll have ask again		medical	c-attitudes	GPs	62
PEI-4: 8	you really have to shop around to find a good doctor that is willing to listen to you and take you seriously so,		medical	c-attitudes	GPs	63
IPAI-C: 22	my doctor never said to me when I went to the doctor at forty-two, and said I'm really having problems sleeping, it was like you		medical	c-attitudes	GPs-not all good	64
IPAI-C: 2	'To the wider world um I think that GPs should be better informed, um just because x is x hormone is higher than it should be-		medical	e-education	GPs	65
PEI-3: 1	doesn't necessarily mean that you are menopausal, um		medical	e-education	GPs	66

PEI-7: 3	I had... a day surgery thing one time, when I was having the menopause, and went for the results in the hospital, and the guy who was there - every time I went there was a different doctor and it wasn't the doctor who did the operation, um, he said to me, 'how are you', and 'yeah we have the results and everything's OK' and I was having a conversation with him and I said 'I was in the menopause, and he said 'you can't be in the menopause', he said 'no, no', I said 'well you know I've done a test and I am' and the nurse checked back the blood test and sure enough they said FSH label, and he said, 'oh what're you doing for that?' and he said 'I've got a woman doctor colleague who's heading, who's that sort of age, and she doesn't want to take HRT so what are you taking?' and you know I thought that was really interesting because... he wrote it all down on a paper towel, you know, I said...you need to read these books, so everyone is different.		medical	e-education	GPs assumptions	67
IPAI-C: 1	I do think we need to get more help from doctors, that I really do believe firmly, because I do feel that a lot of doctors, probably know about three sentences about the menopause and that worries me slightly because I remember the years before the, you know, I didn't know anything about peri-menopause, I didn't know the stages,		medical	d-support	GPs	68
PEI-4: 10	women of a certain age should be allowed to say to their GP, I'm feeling this, I'm feeling that, is it this? is it that? Who's gonna help me? And you can't, you have to say, I want this, I want this, and you have to keep on, and that's what annoys me...		medical	d-support	GPs	69
PEI-3: 3	HRT should not be immediately pushed towards everyone- GPs making money		medical	g-commerce	GPs /HRT	70
PEI-7: 2	you know, the only thing the doctors ever gave me about the menopause was a, a little kind of booklet thing and it was obviously done by the firms that make the HRT pills and its selling it, you know,		medical	g-commerce	GPs /HRT	71
PEI-4: 9	... I just read things online and funnily enough, um, I'd read the- online about being referred to the Chelsea and Westminster, and then I um- accidentally caught The One Show and there was an article on the one show saying don't be- don't let your GP tell you and I think, I know people will think they should do what the doctor says so, that's good for them, then, but I would suggest that they look a bit further afield.		medical		contradicted by TV media	72
PEI-7: 4	Yes yeah, I've requested to be allowed to go to the Chelsea and Westminster menopause clinic, because I want my bloods tested, since I've had this huge operation I've noticed things have changed, and I- I want my bloods tested properly, I want to be able to even though she said 'oh have you thought about HRT?' 'have you gone to your doctor?'... HB: Did she take HRT? She did, and her daughter started the menopause quite early and her mood swings were so bad that they affected the relationship with the children so she really encouraged her, her daughter to see the doctor and go down the HRT route, but I thought, this is normal		medical		only one part of your	73
PEI-4: 7	Um, listen to what the doctors say, but make up your own mind, and -find out as much as you can about options from HRT and do what's best for you, because everybody is different and I've known people that've taken HRT, and, you know, swear by it, and they got on really well with it and um, and that's great but,		medical		GPs/referral gatekeepers	74
PEI-2: 7	IPAI-B: There is something available at CUH* IPAI-C: what IPAI-A was saying, there's a menopause area there.. yeah, well you see most people don't even know that exists, unfortunately. * Croydon University Hospital		medical		GPs /HRT- expectation/ chose natural	75
PEI-7: 1	HB: And they won't let you self-refer? Um Well, no I haven't even asked about that actually, I don't think so, I'm still, um I've been signed off after my fibroid operation, my myomectomy. Um but I can still go back there if I'm feeling that anything is not quite but um, I think um, alternative treatments, or natural medicines can do so much, especially when it comes to the symptoms of menopause, yeah..		medical		GPs advice- do your own research	76
IPAI-C: 23	So, um, I have I didn't mention that yet, but there was a time, when every evening at 9:30 pm, I would have a heatwave going over me, Yeah but just like one, I would think okay its 9:30, so I'd sit down and I would be drenched in sw-weat. I went to the um Royal		medical		Hospital clinic	77
PEI-4: 11			medical		experience- amazing	78
PEI-6: 3			medical		alt tr'tments / natural med	79
PEI-6: 2			medical		hospital- non- medical	80

IPAI-A: 9	and the length of time it goes on for some people and I know it's only some people, and that the disability side of it, I know that's a real hot potato, but I would say nine years is well in excess of two years, which is the normal disability thing that they talk about, umm so yeah,				disabling impact	81
PEI-2: 6	But I think now that I've- I think, I've decided, I'm just gonna sit through, I was just gonna experience it all,		medical	natural	experience it all	82
PEI-3: 4	naturally is better, could be harder but better,			natural	harder but	83
PEI-2: 1	I think that it is a positive experience, it's just natural, it's something every woman goes through,			natural	positive	84
PEI-6: 1	I would say that it is a natural process and we should celebrate it and not look at it as an illness that needs to be treated.			natural	not an illness	85
PEI-8: 8	Germaine Greer's chapter headings: Serenity and Power, freeing yourself of the burdens you have unwittingly carried up until that point in your life, putting things in their proper place, work, family, being a bit more circumspect, self-pleasing knowing what you like and what you don't like, not having to go along with things if you'd rather not. A bit more self-confidence to express your views on what's what. Self-assurance				confidence circumspect	86
PEI-4: 4	when it's an opportunity in your life, to find something else, to go somewhere else with it, to do something else- or not even that if you don't want to, you know- take all the HRT you like, dye your hair, stay on a diet, if that's what you want to do, do it!				opportunity	87
PEI-1: 5	We need the big knickers because the big knickers are really comfortable and everybody I know, my age, wears big knickers, my mum used to wear big knickers and I used to think, hmm weird, and I look at my kids knickers and I go you must be joking... But you want to be comfortable, the problem when you say that word, it immediately then goes frumpy, flat shoes, we don't do heels you go over on your ankle, it becomes practical it becomes comfortable, it becomes you don't want to be sort of... you know out in your mini skirt and your heels on at three o'clock in the morning in a club. you just don't!				practical not frumpy	88
PEI-3: 5	like dealing with obesity, fitness, look after yourself, you'll still have to look after yourself.			self-care		89
PEI-2: 10	Uh I think, that its interwoven in so many different strands of your life, it isn't just about one thing, um, but I think um, we're going through menopause, as well as all the going through all the other things, so it's just one part of what we're trying to cope				one part	90
PEI-3	No it has been an interesting experience.					91
PEI-7	I don't think so.					92

APPENDIX K : 3 Table of comments from interviews ordered by i) group responsibility & ii) themes

Key: IPAI- Interpretative Phenomenological Analysis interview; PEI- Photo Elicitation interview. Red text denotes possible slogans to use in the scenography.

workplace issues	22	
behaviour	1	IPAI-A: 4
	2	IPAI-C: 7
	3	IPAI-C: 8
	4	IPAI-A: 2
culture- org'zational	5	IPAI-C: 10
	6	IPAI-A: 1
	7	IPAI-A: 3
impact- professional	8	PEI-2: 5
	9	IPAI-A: 6
initiatives	1	
behaviour		IPAI-C: 11
org'zational	2	IPAI-C: 13
culture	3	IPAI-C: 16
environment	4	IPAI-C: 12
culture	5	
org'zational		IPAI-A: 7
discussion	6	IPAI-C: 14

I think, that people can easily scapegoat people in the workplace, or go, oh she's miserable or she's a nasty person, you know

people will have to giggle or whisper or don't talk about it, so we're not in Victorian times,

the other thing is that people tend to laugh about it,

its so hard to retain any of that, that remembering, people would be yaddering on, verbally

female important officers (muffled) females working here, They have to stand all day. They have uniforms... very horrible yeah... And they don't have access to breaks, yeah,

I think it's understanding what it does to some women's minds, and how fragile that makes one feel and that it doesn't necessarily come out as fragility... next time the computer goes wrong or the photocopier doesn't work, (breath) or have horrible loads of spreadsheets to do and it isn't working cos its clunky, they always buy the cut down versions of stuff doesn't work half the time, so then I can't cope with it very well, either,

but when that place is full of people, it's humming. It's buzzing... it's like an assault on the senses, stuff swirling around, stuff coming at you in different ways, like a war zone, like bombs and stuff, (pause breath) I feel like that edge of adrenalin a lot of the time, and that's really horrible and sometimes I like take myself somewhere really quiet to work,

you've hit your forties and then suddenly, if you've had very heavy periods, um you've had to manage all of that, suddenly you come to a four year period, when it kind of becomes light, it doesn't really affect you so much, you're skipping along very merrily, you know careers going fine, and then this hits you and you think, What! Is this all you get? Do you only get a four year, you know, window where you're relatively stable

I won't be driven from this job, that's my thing,

when people have meetings that go on for a whole day or six or seven hours, and say you must realise that sitting down for long periods of time can be really traumatic for some people particularly... you need to have frequent breaks and don't keep people sitting for longer than an hour or an hour and a bit, let them get up and walk around, and take breaks... think about, how people can be comfortable,

when we come into rooms like this, can we put blinds down? And try and make it as comfortable as you possibly can for people, but we know we are limited with this building... we're a bit more considerate of each other than we were before,

we got a... wall area in our café um which has had various menopause awareness week... we've got about how we produced the guidance so there's a link to the guidance there, and there's case studies...

I mean we can't do much in this building unfortunately, because temperature is very limited, it is basically controlled and but that's why the agile working is important, and they can have little hand and desk um what-sit fans that you can,

I deliberately choose to come in when it's quiet, sometimes, we have flexi-working and flexi working has really helped us, as a workplace... and it's really great, and that is a good thing, that they've done, they didn't do it for, the menopause, but single best thing that they've done to help people self-manage.

I mean that's why I'm so pleased with this, cos I think we've got it out of the shadows and we're talking about it so, you know,

education	7	IPAI-C: 4	in the workplace, you know, having it more available here, so people know... having that knowledge out there at a basic level
finding resources	8	IPAI-C: 17	one of the things we really realised with this steering group, was that there wasn't any resources out there, I mean there, you know you have to Google it,
intranet pages	9	IPAI-C: 15	the intranet page... sort of a little overview of what we've got here...and we've got this infographic here
support/ colleague	10	PEI-2: 4	I was just very lucky that I had someone who sat behind me at work and said 'Right'... Uh so basically said, uh I think you should think about doing some reading and talked to me about her experience of going through the menopause.
support/ pers	11	IPAI-A: 5	just having that kindness to each other, so I try to do things that are about being kind to people, being supportive to other colleagues
support/ group	12	IPAI-C: 20	if we see something, you know that we think is will be of use to others, we try to get it on an intranet page...cos we know that this is all about information and sharing, and a lot of people just don't have that information,
support/ mission	13	IPAI-B:5	Thank you for your interest in our work and we really hope that it's going to make a difference
medical care	25		
GPs attitudes (c)	1	IPAI-C: 21	Unfortunately, its really sad to say... you hear some terrible stories... and some doctors have said don't come to me unless you've stopped bleeding... I mean, you, you could be up to ten years before you stop bleeding... its ridiculous, but some doctors are just like that,
	2	PEI-4: 6	my GP doesn't want to talk about it, yeah, and she's a woman.
	3	PEI-4: 8	a GP who really doesn't know anything about the menopause
	4	IPAI-C: 22	you really have to shop around to find a good doctor that is willing to listen to you and take you seriously
education (d)	1	IPAI-A: 9	the length of time it goes on for some people ...I would say nine years is well in excess of two years, which is the normal disability thing
	2	IPAI-C: 2	it seems to me that doctors have very limited knowledge and that's what worries me slightly is that you go to your doctor and have a lot of faith and say they will help you, but they don't really know much themselves,
	3	PEI-3: 1	I think that GPs should be better informed
			I said I was in the menopause, and he said 'you can't be in the menopause', and the nurse checked back the blood test and sure enough they said FSH label, and he said, 'oh what're you doing for that?... 'I've got a woman doctor college who's heading, who's that sort of age, and she doesn't want to take HRT so what are you taking?'
	4	PEI-7: 3	I do think we need to get more help from doctors, that I really do believe firmly, because I do feel that a lot of doctors, probably know about three sentences about the menopause
support (e)	1	IPAI-C: 1	women of a certain age should be allowed to say to their GP, I'm feeling this, I'm feeling that, is it this? is it that? Who's gonna help me? And you can't, you have to say, I want this, I want this, and you have to keep on, and that's what annoys me...
commerce (g)	1	PEI-3: 3	HRT should not be immediately pushed towards everyone- GPs making money
	2	PEI-7: 2	the only thing the doctors ever gave me about the menopause was a, a little kind of booklet thing and it was obviously done by the firms that make the HRT pills and its selling it, you know,
GP advice contradicted	1	PEI-4: 9	If the BBC can research it and tell me on The One Show that they do that, then how come my GP in Wandsworth doesn't know... it shouldn't have to be a fight,,
	2	PEI-7: 4	people will think they should do what the doctor says so, that's good for them, I suggest that they look a bit further afield.

GP gatekeepers	1	PEI-4: 7	I want to be able to speak to somebody who is an expert, she said 'oh have you thought about HRT?' 'have you gone to your doctor?' ... really encouraged her daughter to see the doctor and go down the HRT route
	2	PEI-2: 7	
Non GP clinics	1	IPAI-C: 23	there's a menopause area there.. yeah, well you see most people don't even know that exists, unfortunately.
	2	PEI-4: 11	I can still go back there if I'm feeling that anything is not quite right, ...so I'm going back there first... They are amazing, absolutely amazing
alternatives	1	PEI-6: 2	homeopathy is personal right its- it depends on- and just because it worked for me it doesn't mean it would work for someone else
	2	PEI-6: 3	alternative treatments, or natural medicines can do so much, especially when it comes to the symptoms of menopause,
natural	1	PEI-3: 4	naturally is better, could be harder but better,
	2	PEI-6: 1	it is a natural process and we should celebrate it and not look at it as an illness that needs to be treated.
best for you	1	PEI-7: 1	listen to what the doctors say, but make up your own mind ...and do what's best for you,
experience it	1	PEI-2: 6	I'm just gonna sit through, I was just gonna experience it all,
self-care	1	PEI-3: 5	you'll still have to look after yourself.
society	43		
a) cultural representation	1		most of the stuff that's out there artistically is humorous... but it's not all funny ha ha, it's just not, it trivialises it to some degree, it's a tragedy with funny moments, there's not all that many funny moments, some in the sense of solidarity, and the relief of being able to share, some of the tragedy with somebody else
		IPAI-A: 10	
			you know, you've done what you're meant to do, you're not really that attractive anymore, you're a bit podgy, you're always moaning about some condition and you just talk about smelling of wee and eating cake, you know, its that sort of, we do resort to humour ... Beryl Cook yeah the big fat ladies, ya know, that is very much representative of once you are over the hill as it used to be said
	2	PEI-1: 2	Madonna has done something quite well... I'm not keen, to be fair, on fifty odd year old women wondering around the stage in a leotard... who am I to judge, but, I think trying to be younger than you are, trying to cling on to something that's gone, I don't think is a great idea, embrace what's coming through but you don't have to,
	3	PEI-1: 3	
	4	PEI-1: 4	I think the problem is historically the role models are the beige coat, the old lady with the perm, we haven't created our newness yet,
	5	PEI-1: 7	I think there is a bit of a problem, there's not many really old women that you can go yeah, brilliant, brilliant role models...
			cultural representations are important because they encapsulate the experience... might sow some seeds of things that they haven't coalesced in their minds but it might help those things come out...we deserve this because in population terms ... we are 17% of the British population, this is the over the fifties females
	6	PEI-8: 4	
	7	PEI-8: 6	you talked about missing statues the other thing that always jumps out at me is the missing street names,
			its interesting that even the Daily Mail, which I don't particularly read, has loads of articles about the menopause... yeah because their demographic is what it is, you know
	8	IPAI-C: 19	
b) discussion	1	PEI-3: 2	I also think there should be better understanding... we need to start talking about this now, it has to be an informed debate, cos we're not stupid,
			I think, as a society we need to be more open about it, menopause... Puberty isn't hidden, particularly, its seen as a positive thing... Whereas menopause...it's so hard to find anything positive about it
	2	PEI-4: 1	
	3	PEI-4: 2	men never want to talk about it in my experience, even my husband ... he doesn't really talk about it
	4	IPAI-B:1	I think that it exists is probably the best, cos the fact is I don't think that a lot of people even know that it exists,

	5	IPAI-B:3	recognition of the changes in society that will happen between a mother and her daughter and actually having some of that passed down
	6	IPAI-C: 6	the zeitgeist is right now for women, and it shouldn't be a taboo,
	7	PEI-5: 1	I think if you confide in someone, it's better, and you're helping other people
	8	PEI-8: 1	I don't know if you can describe it as a meta-debate, but to even have a debate, you know that there should be- Women's preoccupations get drowned out or you know, or not respected or responded to in the way that they should.
c) attitudes	1	IPAI-B:4	they think you can will it away,
	2	PEI-4: 3	I'm not upset about going into the menopause. What upsets me is, attitudes towards it, when it's an opportunity in your life, to find something else
	3	PEI-4: 12	Attitude is the most important thing we need to change. One menopausal woman at a time, needs to change the attitude of people around her.
	4	PEI-8: 2	menopause is still viewed in quite a paternalistic and commercialised way ...outside interests exploit the menopause for their own purpose, without women taking control of the whole agenda,
	5	PEI-8: 5	it's a badge that's been earned so let's turn the tables and celebrate it and mark and reject the negativity and the stereotypes,
	6	PEI-1: 6	I don't think that should be seen as a bad thing or an oh my god. It should be revered and respected and wow, you know she's gathering in,
	7	PEI-8: 7	seeing independence as a positive choice, why women might prefer to retreat rather than being viewed as cast away or put on the scrap heap or just not really worth valuing as participants in society,
d) education	1	IPAI-B:2	we had something back from the curriculum on social care, if they'd mention it at all, it was like a paragraph and if you're teaching young people about periods and sex contraception and the rest
	2	IPAI-C: 5	in schools they need to do considerably more on women's health through life
	3	IPAI-C: 3	having... younger people being aware of it ...
	4	PEI-2: 9	I'm not sure I'd heard the word peri menopause and if I had, it hadn't actually sunk in...
	5	PEI-5: 2	everyone don't go through the same stuff, but...all women go through it, ya know, you don't realise, and it's scary, if you don't know what happening.
e) support	1	IPAI-A: 8	I would just like people to think more about... the mood, the deep grief, and distress, that kind of makes everything really hard,
	2	PEI-1: 1	everything is sort of more dispersed, you've got your friends obviously but they might be doing it at different times to you or not even have it, and you can have conversations that are quite private with one or two people, but it is, as far as society goes a bit of an end of the line for women,
	3	PEI-2: 3	I was really shocked, when some of the symptoms started presenting, and I have a group of friends who are women who are all older than me, but no one said anything!
	4	PEI-2: 8	HB: wondered what you thought about her intervention in that way at that particular moment? Uh I think it- I think it was really important, because I didn't understand what was going on. it didn't even occur to me I might be going into peri menopause.
f) self-confidence	5	PEI-5: 3	it made me feel a lot better, that I weren't the only one, ya know, who was going through this, ya know, and it would be nice if you had somewhere you could talk to about it to someone.
	1	PEI-1: 5	you want to be comfortable...it becomes practical

	2	PEI-8: 8	putting things in their proper place, work, family...self-pleasing knowing what you like and what you don't like, not having to go along with things if you'd rather not....Self-assurance.
	3	PEI-4: 4	when it's an opportunity in your life, to find something else, to go somewhere else with it, to do something else- or not even that if you don't want to...take all the HRT you like, dye your hair, stay on a diet, if that's what you want to do, do it!
g) commercial interests	1	IPAI-C: 18	There's a few women who've tried to make a business out of it, by selling various supplements. But you know, that's not what women need.
	2	PEI-8: 3	Some of the remedies, do they truly make a difference? particularly for the amount of money that people are being asked to pay for them ...There is an industry founded on the back of women's menopause and does it truly serve their interests... Turns it into, not exactly a commodity but, it's not viewed as an experience that needs to be, women need to find a pathway through in their own way...
h) impact	1	IPAI-C: 9	its like if you're going for those symptoms, pretty serious to you, ... yeah, to both you both, impacts the whole family, impacts your colleagues, impacts you know, a wider ripple
	2	PEI-2: 10	just one part of what we're trying to cope with
i) invisible	1	PEI-2: 2	I don't understand why it's not represented more, it's not more visible , there's not more information about it.
	2	PEI-4: 5	I don't like the way its brushed under the carpet, and I didn't think that by the time that I got to my early fifties it still would be like that,
j) positive experience	1	PEI-2: 1	it is a positive experience, it's just natural, it's something every woman goes through,