



MENOPAUSE: a HOT TOPIC

Menopause can have an impact on childcare providers as individuals and on their businesses – so it’s important to normalise discussions around it and seek support.

Menopause is a natural part of ageing that all women will experience. But there are still taboos surrounding this life stage, and many don’t feel comfortable discussing it.

An estimated 13 million women in the UK are living with the menopause. Three in four will experience symptoms, with one in four finding them “debilitating, severely affecting their quality of life”, according to Diane Danzebrink, a therapist and wellbeing consultant, and the founder of Menopause Support and #MakeMenopauseMatter campaign.

Women experiencing at least one problematic menopausal symptom are 43 per cent more likely to have left their jobs by age 55 than those experiencing no severe symptoms – and research by Bupa shows that 900,000 women experiencing the menopause have left work.

Perimenopause is when hormone levels begin to fluctuate and symptoms may appear (often in the early to mid-40s), while

menopause is 12 consecutive months without a period. It usually occurs between the ages of 45 and 55, but around one in 100 women experience it before 40. As well as hot flushes and night sweats, symptoms can include low mood, anxiety, poor sleep, fatigue, aches and pains, heart palpitations, dry, itchy skin, bladder problems and vaginal dryness, says Diane.

PACEY members have reported dealing with symptoms is “especially difficult when working in a physically and mentally demanding job like early education and childcare,” says Rose Porter, PACEY Marketing Executive.

In PACEY’s recent survey of early years and childcare practitioners, many respondents highlighted menopause and perimenopause as having a negative impact on their mental health and wellbeing. They

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in her late 40s, and says fatigue and “brain fog” forced her to cut back on her hours. “I was just so tired.”

Tackling the taboo

By having conversations about menopause, childcare providers can help tackle the taboo. Rose says: “We often hear from PACEY members that being open and honest with others can make a big difference – whether that’s advocating for themselves and seeking help from a healthcare professional, or talking openly to the families using their provision.”

“We should be able to talk about menopause,” says Amanda. “While I would find it too personal to discuss my symptoms with parents, and the children I care for are too young to understand, I find it helpful to share my experiences with friends, some of whom are also having symptoms.”

reported psychological symptoms such as anxiety, low self-esteem, depression, trouble concentrating and difficulty controlling mood and emotions while at work.

“There’s still a negative perception around menopause, with many

practitioners telling us they cannot speak openly about what they are going through,” says Rose. “Some take time off work to ‘hide’ the symptoms from the families who use their provision, with some even considering giving up work due to long-lasting symptoms.”

Amanda Calloway, childminder and owner of Cheeky Rascalz in north-east Wales, first experienced symptoms



Case study: “Listen to your body”

Lyndsey Stanton, childminder and owner of Lyndsey’s House, Southampton, says...

I started early menopause five years ago, aged 44, when my periods became erratic and I began to suffer migraines.

The migraines leave me feeling incredibly tired, which is difficult when you’re a childminder, which requires a lot of energy.

I’m open with parents about the menopause – I let them know it wears me out. I’m not ashamed of it – it’s part of who I am.

I’ve gone down an alternative route. I visit a homeopath and take starflower oil daily.

My advice is to listen to your body, don’t ignore the signs and see your GP. Talking about menopause helps to normalise it. And be open to different ways of managing it.

Whether providers feel comfortable talking about menopause to families will depend on the individual, their relationship with parents, and the setting, says Diane. “For sole traders, it’s about what you feel is appropriate. And with children, they may be too young to understand about menopause, but it’s still important to reassure them that there’s nothing to worry about when, say, you’re having a hot flush.”

Childcare providers have an opportunity to promote awareness and understanding of the menopause, Diane says. “The workplace is a great place to start these conversations. They could offer awareness training for teams as part of their wellbeing, diversity and inclusion programmes,” she adds.

Managing the menopause


“HRT [hormone replacement therapy] is the most effective treatment for menopause – and there is now less of a shortage,” says Diane. “It’s about having the right medication at the right dose.”

“Since my GP prescribed HRT, I’ve been feeling much better,” says Amanda. “It took a while to get the right dosage, but the night sweats have stopped and I can sleep normally again.”

For those who are unable to take HRT or who may prefer more natural treatments, there are alternatives such as red clover, starflower oil and off-the-shelf menopause-specific supplements.

Women can also share their experiences and concerns in support groups. “I belong to menopause social media

groups – it’s comforting to talk to others with the same symptoms,” says Amanda.

To anyone living with the menopause, Diane advises: “Educate and inform yourself as much as you can. With the right information, guidance and support, you can get help. There’s no need to suffer in silence.” 

Further resources

- Menopause Support: menopausesupport.co.uk
- The British Menopause Society: thebms.org.uk
- National Institute for Health and Care Excellence: Menopause: Diagnosis and Management nice.org.uk/guidance/ng23
- Women’s Health Concern: womens-health-concern.org