



Take on Board Podcast – Episode 372

Transcript – Take on Board event: Empowering boards through menopause

Hello, and welcome to the Take on Board podcast. I'm your host, Helga Svendsen. I know that being on a board can be an incredibly valuable, interesting, and exciting experience. Yet, it can also be lonely, challenging, and let's face it, pretty hard. So here at Take on Board, I'll bring you weekly tips, tricks, and advice to help navigate your way onto your first board, your next board, or to build your governance wisdom.

Now, on with the show.

Hi, folks. Before we dive on into the episode today, I just wanted to give you some context about what it's all about. So you'll know that about a month ago I recorded an interview with Sarah Gray about managing menopause and perimenopause in the boardroom. So what you are about to hear is the event that we held with Sarah, where people from the Take on Board community got to ask their questions.

You will get to hear just some excerpts from that event. I hope you enjoy it. There were some amazing questions asked and some excellent tips. For me, walnuts in the boardroom. That's what I'm gonna take in the future. Get rid of the Mentos and take some good nuts and seeds. Anyway, you will get to hear all of that in just a moment.

I hope you enjoy it and if you'd like to come to Take on Board events in the future, just send us an email and we will make sure you are on the list to find out. All righty, let's hear from me and from Sarah and from the Take on Board community about their questions and their reflections. On with the show.

Welcome to this Take on Board event with Sarah next to me. I would like to start by acknowledging the traditional custodians of the land on which we meet. For me, I am on the unceded lands of the Wurundjeri people of the Kulin Nation, and I pay my respects to Elders past and present. I acknowledge their continuing connection to land, waters, skies, culture and Country.

I support Voice, Treaty and Truth for Aboriginal and Torres Strait Islander peoples here in Australia, and I encourage others in the Take on Board community to do the same. Folks, with that, let's kick off the event. The majority of the conversation today is Q&A with Sarah, so that will be in there as well.

All righty, the first question is from Hayley's group. It's around boards having a specific menopause policy. Cindy, can I ask you to briefly introduce yourself and ask this question?

Absolutely. Hi, everyone. Cindy Madeley. Technically not on a board, but I am the Mayor of Wellington Shire, so I—

That's a board.

I guess I am a chair of a board and seeking board positions, trying to work out my pathway out of local government, if that's the way it goes. So I think that specific question was around: should there be a specific policy for boards to have around menopause? Is there something that the chair could do to make things a little bit more, I guess, inclusive or approachable?

Thank you so much, Cindy. Sarah, what are your thoughts?

Yeah. It's a really common question, and I sort of have to think of it in two areas too, because the organisation may also need a policy too. So some places have policies for the board, some have just for the organisation, some have for both. Very few have for both, actually.

And I'm sort of torn on the policy piece. Like, I do think a policy is, I think we spoke about it on the podcast, Helga, it's like a continuum in my view. You can put a policy in place, but without having all that underlying stuff happening in reality, the policy's just gonna sit on the shelf and not do anything.

So when I usually work with organisations, we start from a bottom-up approach and we say, "Okay, let's assess both the organisation and the board, and the awareness, and is it on the agenda? Is the discussion about women's health, perimenopause and menopause even on the agenda?" And we start with education and awareness as a baseline.

So we do education sessions with the business, with the board, with the chair to explain what actually is perimenopause and menopause, what are some of the real impacts on careers. Like, what do the stats tell us about women leaving the workforce, not putting up their hands, and how are they feeling silently experiencing these symptoms but still going about their usual business?

So we start there, and then we slowly start to build in things from that. And then we usually get to the ones that do it well. I find the policy then gets put together once everybody's on board and already sort of demonstrating, and those cultures are already sort of embedded throughout the board and the organisation.

I think the chair has a role to play, but I also think everybody on the board has a role to play here too. So, you know, the chair could put menopause on the agenda and actually ask people at the session or individually about their experience. But it can be really hard to kind of just openly start a meeting and say, "Let's talk about menopause today," because it's sort of a bit left of centre.

So what I usually recommend is if you do education sessions with the board, one of the education sessions that you could table for your next calendar of education events is learning a bit about what is perimenopause. Just from a physiological level, obviously knowing what's going on, but more from what actually are the impacts to a woman's career, and how does it actually impact them?

And we went into that a bit more on the podcast, but it's things about doubting your capability, thinking that you're not seeing things clearly, thinking that you're less efficient than you probably actually are. And then allowing people to identify if you are having women that are withdrawing, not putting their hands up, quieter than they usually would be, you know, tap them on the shoulder and have a conversation and just ask, "Is everything okay?"

It's a kind of personal thing too, right? I'm very happy to talk about perimenopause and menopause, but not everybody wants to put their hand up as well and say that they're experiencing it. So I think even if you don't want to talk about it, if you hear others talking about it, you can think, "Oh, actually, I'm not alone in this experience."

I think I heard someone earlier say, you know, at the start, what did you learn from the breakout groups? Well, that there's other people experiencing it too. I can tell you now, if you're in your early 40s plus, you're experiencing something to some degree, so you're certainly not alone. So yeah, probably just putting it on the agenda with the chair, but then as individual board members, you can ask questions, you can support each other, you can buddy up.

So there's a range of things that you can do as well. I don't know if that answers the question specifically. I think policies—Menopause Friendly Australia are coming in and doing policies for organisations and boards. They're few and far between at the moment because, I tell you now, we think people know about this, but every day I do presentations on this topic and people don't even know what perimenopause or menopause actually is, so we're pretty far away from that at this point.

Well, it probably hooks nicely, Sarah, to this next question, which also has your name, Hayley, but might be somebody else. I can't... There you are, Hayley. This is the one about managing resistance. Is that you, Hayley, or somebody else?

Yeah, this was mine. So my name is Hayley Williamson. My pronouns are she/her. I work at Safe and Equal, the peak body for family violence services in Victoria, and I'm an Accelerator alumni, but not yet on a board. And yeah, my question is around how would you advise managing resistance for people who think women should just get on with the job?

Yeah. It's common, right? And it's probably an unspoken thing, which I think sort of happens where we just expect everybody just to get on with the job.

So I think, I know I'm gonna say this a lot, but the first thing is getting it on the agenda. Because if we're all just getting on with the job and no one's talking about it, well then nothing's gonna change, right? If we just suffer in silence and don't talk about when we're feeling too hot in the boardroom or if we need a break or if we're going through a challenging time, then we will be expected just to push on with it because nobody will know.

So Hayley, I haven't experienced that resistance when I've actually spoken to somebody about it. So I think as well, we have perceptions, and I'm in perimenopause. I'm sure there's people at different stages on this call. When you're in it, it's really hard sometimes to see clarity as well. So you could be like, "Well, they expect me just to push on here. I'm not feeling well. I'm feeling sort of all in my own head." But does anybody actually even know what you're experiencing?

So it does take a bit of vulnerability for somebody to actually speak up and say, "Do we know that we've got a cohort of women on this board, a cohort of women in our organisation? Everyone here is gonna experience this in some way, stage or form in their life, so we should put it on the agenda."

So I think it does actually take sort of an advocate or somebody who stands up, I find. So usually I'm invited in to speak to boards, organisations, because somebody has said, "Hey, we need to deal with this."

And do you know what? It's often men that are making that phone call because they're hearing about it, they're not sure about it, they want to know how to support the women in their team. So it's probably that. And I know advocacy can be hard because then it can sometimes be like, oh, we're asking for special treatment.

That's the other thing I get, where you feel like, "Well, am I asking to be treated differently?" And you're not. You're not. We're asking to be treated in a way that's fair, and we're experiencing something that the men on our boards won't experience. So andropause happens to men. It's a similar thing.

Roughly less than 10% of men will have symptoms. With perimenopause and menopause, probably about 70% of women will have some degree of symptoms, and probably about 30% of them it will be so hard for them that they may withdraw from work or they may reduce their hours or have other impacts on their life as well.

So we do need special attention in the space, and all I can encourage you to do is advocate for that. It's an individual thing, but I think once you have the conversation one-on-one with a chair or a CEO, it's very hard for them, with those facts in front of their face, not to start thinking about what they can do to improve the experience.

I didn't know there was an andropause. That is amazing to know. I had no idea that even existed. And my goodness, 30% of women need to significantly change their... That's incredible. However, very pleasing that it's mostly the men reaching out saying, "Ah, what do we do about this?" That is really wonderful to hear.

I might just add one thing in, because sometimes I run these sessions and I think, "My gosh, people are gonna finish thinking, 'It's gonna be terrible. I'm gonna want to leave my job. I'm not gonna be able to do anything.'" What I will say is for every symptom that you're experiencing, there is some sort of evidence-based solution for it.

So if you're in this situation and you're feeling like, "I'm not sleeping well, I'm having night sweats, I'm not concentrating well, my moods are changing," please seek help, because it's crazy that you just put up with it anyway. Like, you shouldn't just be sitting in the boardroom feeling hot, or you shouldn't be thinking, "Oh, I've lost the word that I want to say."

You shouldn't feel like that. There are things you can do, so please do seek help.

Thank you, Sarah. That is an excellent shout-out. I think I said at the start I've only just started patches. I am past peri. I'm way on the other side. Just started patches. I'm sleeping through the night, peoples. It's awesome.

Anyway. All righty. Cecilia, your question is up next about probably the other side, but supporting women in the wrong workplace when male bosses don't support women.

Thank you. My name is Cecilia Mphande. I am an educator, high school teacher. However, I work or I give back to my community, A Fluence Iliac. That's a charity.

But the question is related to me now, my normal job. I'm paid. That's teaching. And I've had this experience of now it's like a couple of years and I've served with three different principals or leadership. And now the third leadership, it's like it's not even valuing or showing that they acknowledge that I'm of value. And taking time off, that has just created turbulence on my part so that even though I apply to be part of the leadership or middle leadership, let alone senior leadership, or even supporting me, recommending me to take on leadership positions beyond my school, that's an issue, just to support me.

So I'm not sure. Am I in a wrong place or what should I do?

Sarah can probably deal with the menopause side of that, but maybe not the general leadership side and whether you're in the right place or not. Cecilia, it's gonna be a little hard for us to determine here and now. But anyway, Sarah, I'm gonna throw it to you to work through this as best you can. And maybe the lens I'll put on it is, like, if you're experiencing different things, maybe menopause can magnify an issue that actually is already existing potentially.

Yeah. And I'm not suggesting this is your case, Cecilia. But I know that for myself personally, I did probably put up with a little bit more in my earlier career. And what we do find is as our oestrogen levels drop, we actually start to recalibrate in our brain and sometimes start to care a little bit less about what other people think or feel more comfortable in our own shoes, which is one of the positive things of this phase of life.

So it may be amplifying it. And I guess if you're aspiring to leadership but the boss is not supporting, that was a separate thing to this, I think. It's probably that you're just becoming maybe more aware of that. My question would be: are workplaces creating conditions where women can continue to lead through menopause, or are we accidentally pushing experienced women out?

Because what we're finding, similar in cases like yours, and there's a study that I mentioned in the podcast—it's a UK study, but it was a survey, I should say, of approximately 4,000 women—and we did find women just withdrew from the workplace, either retired early, resigned, or really just stepped back and didn't go for those promotions or those leadership roles, and it happened kind of all in silence.

So all I can suggest for you in your situation, is there anybody else that you can lean upon? Like, does anybody else in the organisation have influence who you can talk to to try and make sure that women are supported? And it might be as simple as, it might not be relevant in your case, but for others it might be as simple as asking, "Hey, can we get some menopause education?"

It's Women's Health Week coming up in a couple of weeks. World Menopause Month coming up and World Menopause Day on the 18th of October. "Hey, we want to focus on health and wellbeing. Can we get a sneak into it?" Because I've got so many presentations I'm doing in those two weeks for all types of organisations where women are reaching out for it, saying, "Oh, it's Women's Health Week. Do you want to talk about menopause?" And it's a good way of getting it on the agenda.

So that might be something to go back with. Hope that helps a little bit. Thanks for the question, Cecilia.

Thanks, Sarah. So Hayley, this is another one from your group about what's one thing a board chair can do. Is that you, Hayley, or somebody else? The practical, I think, is maybe Alecia. Over to you, Alecia. Introduce yourself and ask the question.

Hi, everyone. My name's Alecia Rathbone, and I am currently on one board of an organisation called cohealth in Melbourne. Amazing organisation that does great work for the community.

So we were talking, yeah, obviously with Hayley, writing lots of different questions that were coming out of our group. But we were trying to get down to that practical level as well. So I think when you're going through this and you're thinking about some of the things you just said, Sarah, how do I appear?

You start to get in your head a lot and start to wonder about that, and you're sort of looking for ways that you can potentially manage those things that you're feeling, but also manage, like, the perception that you've got that you think others might have. So we were just wondering if there's any particular things you've seen that work well for people.

Thank you. Yeah. Good question. I will give some tips that I've got, but also, Helga and I spoke about this on the podcast, in that it often is, in the research survey I was talking about, our self-perception sometimes. So do make sure that you're looking at doing reviews, buddying up with a board member, getting feedback from your peers.

Because if you're thinking, "Oh, I'm sitting in the room, I'm not doing very well, I'm not speaking up, I'm not being clear," but then you ask your colleague and they're like, "Actually, you did a pretty amazing job tonight," that's probably something that helps you a bit. We find it's very self-reflective.

And just to be science-y for a bit, because I'm a scientist, we often think that that brain fog or that forgetfulness or that lack of clarity is us actually developing a subjective cognitive impairment, but we're not.

So I just want to clarify that. You're not... It's not dementia. There's no link between brain fog and dementia, and when women get tested on formal cognitive tests in this period of life, they perform normally. So I'll just put that out there.

Think about getting feedback. Some practical things, though, my poor board chair at Moyne Health Services, I gave him a copy of the book and we talk about this all the time, but they're very open about it.

Things like checking the meeting environment. So I talked about this with Helga. I was on a sports board, and I can't tell you the amount of times I was in a meeting room absolutely sweating because we're in the back of a committee room of a footy club, and there's just no air in there. Not even just for the women. Is the environment okay? Is the length of meeting okay? Is the temperature okay? Are there breaks? Is there water?

One other thing which I've encouraged, particularly with community boards, is sending board papers earlier. If you're really overwhelmed, because you can feel more overwhelmed because of the

changes in hormones as well, and I used to get my board papers for this football board I was on, on a Friday night for a board meeting that was on a Monday night.

I mean, I'm not gonna spend the whole weekend reading these notes, but also it doesn't give me enough time. So don't pressure yourself. Try and give yourself more time to do things.

Creating a confidential route to ask for support. So we did this in one of the boards that I'm on, making it clear that if you're a board member in this room and you're experiencing any difficulties or areas that you'd like to talk about, come and chat to the chair about it. Whether it's health, whether it's the board environment, one-on-one we can talk about it.

So being very open. That will vary depending on the chair, but that's just something that I've seen work well.

And then checking language around performance. So when you're doing, like, board performance reviews, you have to be careful with language. I've heard some, I think I shared this on the podcast, terrible experiences where I've heard outside a boardroom somebody say, "I think she was menopausal."

Well, they're pretty unlucky that I was in the realms of hearing that conversation, because I had a conversation with that person. But when you're giving feedback, being careful that you're not saying to people, "Actually, I think you're lacking confidence. You're not speaking up as much in the boardroom."

Like, being very careful about that, because it actually might be something that they're experiencing. It could be menopause, it could be something outside of that.

The main thing is putting menopause on the governance radar. So asking the CEO, asking the people and culture leaders if they're represented at the board meeting, speaking to the chair.

A question we can ask as curious board members: how are we supporting and retaining people experiencing menopause at an organisational level, and how can we lead that from the top as a board, showing we do that here, and therefore we set the tone for the organisation?

So there's a lot there. Hopefully one or two that you can think about to bring back to your board.

Nicole, I'm gonna come to you next.

Thanks, Helga. Nicole Cowley. I'm the chair of a public school board. You've given such wonderful responses to all the questions that I feel you've probably answered this, but I'll leave it to your discretion if you've got something else to add or a different way to frame a response.

How do we drive the conversations in a board or work environment when we are not the leaders of those, the chair or the CEO, and the leaders are not leading or opening those conversations or discussions of peri or menopause?

Yeah, it's a good question, and you're right. A lot of that stuff, Nicole, can be applied.

But I think as well it's about, don't assume you have to wait for the chair or the CEO or somebody else to start that conversation. Like everyone here, we can lead the change, right? We can start that conversation. You just need one or two people to start that.

I encourage you all to have a look at the Red Cross, I think it's Red Cross Blood Service, I always forget the organisation name. They won an award for their menopause program in the workplace, and they did this by, there was somebody that was obviously sponsoring it from an exec level. But then what they did is they put menopause champions scattered throughout the organisation, and advocates that you could speak to. They had little badges.

They've done a brilliant job. Like, they've done a gold-standard job. And that is a case of somebody in that organisation not waiting for the conversation, but asking for it to be there.

And the way they led that, I spoke to the lady who led it, it's an amazing story. They built it back to that retention risk, performance, succession planning, keeping our workforce engaged. So back to those key people and culture leader KPIs and things the organisation wants to talk about.

So it's not about a woman standing up and saying, "I'm in menopause. We need to talk about it." It's about actually, do we realise 50% of our cohort are probably gonna go through this at some stage and we should support it?

And I will say as well, there's other spaces this can be relevant to. I'm also doing a lot of work around, you know, women going through IVF and fertility challenges. That's another key cohort. And obviously I'm more tuned into women's health. There'll be men's health, and mental health for men as well is a big one on the radar.

But there's other phases of a woman's life that will impact them. So the IVF fertility journey is that there's lots of different appointments. Your colleagues think, "Oh, that person's always calling in sick, they're never at the desk on time." So it's just about being more aware of what people are experiencing from a health perspective and a life perspective, and being organisations that adapt and support people to retain them and grow.

Hayley, this is another one from your group. What advice for the woman in a first board position?

Cindy Madeley, Mayor of Wellington Shire. So Sarah, I think you've already definitely touched on this, but this question was around, so I'm doing it already, I'm starting to doubt my ability to still be able to do this job, say, in a year or two because I'm having some issues with memory and I'm forgetting people's names.

So the question was around what advice would you give to someone who's going for their first board position but maybe their confidence isn't where it used to be? You've already spoken about women changing how they work, leaving work, things like that. So what advice would you give them? And I know you've already covered it, but I'd be happy to hear more from you.

I'm gonna give Helga a plug. Definitely get support with a community and I don't think I would have been anywhere near as... I wasn't going through perimenopause when I first met Helga, but, like, I wouldn't have been as confident generally to go for a board position had I not done that work and understood what a board actually meant.

Like, I've done the AICD course, but it's not the same. Obviously it's an amazing course, but Helga actually teaches you, like, what is a board all about. You're probably all advocates of Helga, so I'm selling her to the converted.

But go in knowing, understanding what you're actually getting in for to start with, because it's extra work and if you're taking on things that might be draining your mental battery a bit more, maybe timing's not right.

Maybe you need to think about what type of board and are you deeply passionate. So that's a separate thing and Helga can talk more of that. But I think the best thing you can do is buddy up with somebody.

So really good boards typically give you a buddy when you first start. Not all boards do it. I've been lucky that the board that I'm mainly on has given me that.

And just talk to them, ask them questions, find out: how did I go at that meeting? What do you think? And actually, that person even just sitting next to you physically in the boardroom makes you feel a bit more confident. Discuss the board papers with them before.

Now, this is nothing to do with specifically menopause, but if you're feeling like you're forgetting words, you aren't as clear and you're feeling that yourself, Cindy, I think the thing is there that by asking somebody else how did I perform or preparing with somebody else, we over-prepare generally, right?

You sit in that room thinking, "Oh, I really know all those papers. I've got my questions ready," you're already 10 steps ahead of half the people in the room, right? Because you've actually put that work in.

I do just want to say as well, and no individual medical advice, but the really good news is the brain fog and the cognition changes are really temporary, and they are very, very receptive to treatment, whether that's nutrition, supplements, medication, lifestyle.

So they're actually one of the things that are really treatable. So don't just think, "Oh, I've only just got this brain fog and I'm not getting hot sweats, so I'm fine." The cognition side of things is very receptive. It's not just necessarily HRT. That might be an option. There's things you can do around food and other stuff as well.

So yeah, maybe actually ask somebody for help around that if you like.

I think I am not an expert in menopause and perimenopause other than having been through it, but I love Sarah's angle on things about get evidence. Often it's very similar for imposter syndrome more broadly, is that people sometimes feel inadequate.

We're not making the best contribution. I'm not sure if I'm up to it. I'm not sure if everybody else here is performing better than me. Seek evidence. Ask somebody else. Ask your buddy. Ask the board chair. Ask other people what they see your contribution as, and 99% of the time it will be, "No, you're doing fine."

Every now and again there will actually be wrapped up in there some constructive feedback as well, which is awesome to get too. So yeah, seek evidence. Ask people. It's useful in all ways.

All righty, let's... Cathy, I'm gonna come to you next because yours picks up a couple of different questions here, but how do we respect and fulfil our obligations?

Cathy, can I... Oh, there you are. So if you can introduce yourself and ask your question.

Hi, I'm Cathy McAdam. I'm recently retired, not because I am menopausal, but because I'm choosing to move into the next phase of my career. So I've been both a leader within my organisation and I guess heard the whinges from managers of, "Oh, they're taking another mental health day. This person's needing time off," like you referred to before.

But I'm also on a board with a largely female workforce, Alpine Children's Services, and there's workplace things of you have to have a certain number of staff members in the room with the children at all times. So how as a board do we lead our organisation to both fulfil our legislative requirements and safety checks whilst also respecting that people might need a short break or a longer break or some flexibility?

Yeah. That's a good question. I'm not sure I have a great answer for that one. But, I mean, obviously you've gotta... I can't tell you not to fulfil your legislative responsibility. I do a lot of work in compliance, so I'm straight away thinking, "Yeah, you've got to do that."

But it's not about, like, people having breaks every 10 minutes or every half an hour or like that.

What I more mean, and I'm not sure, Cathy, if this helps, but I'll talk from experience here. If I'm in a meeting and I have a hot flush, because I get the joy of having hot flushes, you can't think of anything else but wanting to just get out of that room for a couple of minutes, just reset yourself, and then just come back.

So it's just asking for a short comfort break. If you can just say, "I'm now gonna ask for a short comfort break." Like, it just goes... If you had to go to the toilet, you actually just need to leave that room because I've tried to not leave the room, and you can actually visibly see sweat coming down my face.

Like, that's how intense they can get, and even your clothes can get sort of... I'm not painting a nice picture here, but it happens, right? I'm treating it now and it's not as bad. But I think it's about just feeling like you don't have to be absolutely suffering there.

Like, would you want anyone else on your board or fellow colleagues sitting in a room where they were so intensely uncomfortable that they actually couldn't communicate?

And it's not unlike if you had a bad headache, if you had a sudden bout of diarrhoea. I'm happy to talk about anything in health. Like, it's just like that, just having the permission to say, "If you need a break, you can take one."

So in those situations, I'm not sure what you would do with the legislative requirements, but I think it's more about being open about that, and you just need one or two people to be really open board members and say, "Hey, I need a comfort break."

And if your chair or board member says, "Well, like, you can't do that," well, I don't know. I'd question where you are. But, yeah, I don't know if that helps. It's more about just treat yourself with kindness. Like, if you're not in a good space, you can take a break. I think that's okay.

I think I was thinking about how do we steer our organisation and ensure that we've got enough employees on a particular shift to ensure that we can allow that for our employees.

So I was trying to think of, you know, as a board director, I'm providing that strategy and governance. Yeah. I guess it's around then policies in the organisation.

But then maybe it does all come back, Cathy, to the first thing I said, education and awareness, because maybe they have no idea that there could be some people in the room that are experiencing symptoms where they need a break, and they're being forced to stay in a room for a certain period of time to do a job because of those requirements.

I think it starts with education because I think many people don't even know that this is a thing. Maybe. I'm not sure. Sorry, I'm not sure I was very helpful with your question.

And I think, if I can, I think your reminder, Sarah, that sometimes those brief breaks, it's just like going to the toilet.

So we don't say to staff, like, if we are governing childcare centres or if we are governing hospitals or whatever, where there are ratios, right, for the number of workers to whoever is being cared for, we don't say that they can't go to the toilet. So it's ensuring that there is enough staff basically around that.

So I think you can probably do both. So I love that reminder that it's a bit like going to the toilet. And, you know, again, for younger women, for pregnant women, they go to the toilet way more often. So I think we can balance both of those things.

I hope we can balance both of those things within some of the current requirements and maybe some increased awareness that it's okay to just take that break.

I mean, in the olden days, this doesn't happen quite so much now, but in the olden days, the number of people out the front having a smoko, and that was always accepted. So if you can go outside for a smoke—not that that's the case now. Well, actually some people still do, but it's not quite the same.

So, you know, if people can make a break for smokos, if people can make a break for going to the toilet, then you can also take a break, a five-minute comfort break to just breathe and recentre, and that should hopefully, if it's in terms of ratios and legislative requirements and all those sorts of things, they should already be in place because people already go to the toilet.

I would hope. But maybe that, yeah, for boards to consider ensuring that there are enough staff and resources to ensure that people can take their comfort breaks, whatever that may look like.

So we've got a question here around advocating. I think you've touched on this already, Sarah, but advocating for more support. But actually, it says women are sabotaging their careers, and maybe that's back to that evidence part as well. Not self-sabotaging before you get to the point, but... Yeah,

is there anything you can add on that, I guess, around advocating for support so that we don't self-sabotage?

I guess I'm gonna go back to my original thing around education and design workplaces where that's... I get that you're probably thinking, "Oh, how do we start with the education?"

Advocacy starts with education because if you start advocating for a menopause policy in a board environment where the board chair or people on the board have no idea what it actually means—like some people think, why is there a person coming to our...

I'm going to a big water organisation next week to do a talk, and I already saw someone locally, I live in a small country town, who said, "Why are you coming to talk about menopause? Like, why do we need to learn about menopause?" Like, they were even that far away from it.

So I think how we can advocate is firstly make people aware of what it is and why it's relevant in a workplace context.

And it's not just because we might be a bit moody. It's not just because, you know, it's hot flushes which get all the attention. It's actually because of the impact on our cognitive ability from our own perception, and it's mainly that cognition issue, low mood, maybe the physical symptoms like the hot flushes.

Overwhelm is a really common one where you start to... There are areas of the brain that manage executive functions, so planning, thinking, making decisions, things you have to do every day that can be impacted.

So it's about letting people know, actually, this is what we're talking about. And then from there, you can actually start to practically ask for things to be put in place to try and support women and make it an environment where it's spoken about.

And one experience I have is doing some presentations to people working in a retail setting, and we had a group of, like, 50 or 60 retail managers of quite big retail stores. Got up, did my presentation, and everyone was, like, a bit quiet.

And then I said, "Oh, does anyone want to share any experiences?" And one lovely lady put her hand up and said, "Yeah, I want to share an experience of how I've made this a real open conversation in the store I work in."

And she said, "I'm experiencing menopause, so I decided to tell everybody else that I'm experiencing it, explain the symptoms." And then within about a day, 20 or 30 other team members had come up to her and said, "We're experiencing it too."

And it's a bit of a joke. They have some of their meetings in the freezer of the retail setting when they're having hot flushes. They're like, "You'll know where to find the manager because she'll be in the freezer aisle cooling down."

So it just takes one person to start one conversation to get the ball rolling.

And the sabotaging is... You know, I get that. I encourage you to look at that research paper. Maybe we can send the link out, Helga, from Dr Louise Newson around women in the workforce. It actually gives some practical tips as well about what you can do beyond what I've spoken about today. So maybe we can share that, which might be helpful as well.

Definitely. We can include that in the email follow-up as well. And for folks that are listening to this afterwards, because this will be a podcast as well, if you're listening afterwards, it'll be in the show notes to this episode.

So Cathy, we're back to you. Great question, because we haven't touched... You're so right. We haven't talked about this at all. So Cathy, reintroduce yourself and ask this question.

Sure. I'm Cathy McAdam. I'm a retired paediatrician, but on the board of Alpine Children's Services and the Bright P-12 School Council.

You haven't talked much about food and nutrition yet. I was wondering whether you could talk a little bit about healthy foods or advice particularly for menopausal women.

Absolutely. Nutrition interventions have, like, a really big impact, more so than what you might think.

And when I often suggest that women change their dietary patterns or go after their gut health, eat more protein, eat more fibre, they think, "What is she going on about? I just want to go straight to the HRT or the supplements."

But actually it builds that foundation and even those other things that are layering up will work better if you've got a more solid nutrition foundation.

So in the interest of time, because we can't go through everything, the best way I think to provide dietary advice is through dietary patterns.

So it's hard to say to somebody, add this much protein, add this much fibre. Don't eat this, eat that. So, really simple, the Mediterranean dietary pattern. It's so well researched, and you've heard this too, Cathy, across different cohorts in the world. Really great for cognition, for heart health, for reducing inflammation.

So great for every area of your body, and actually has in it the principles of what we really need to lean into at this life stage.

So we need to be looking at, okay, are we eating enough protein, and is that evenly distributed across the day? That's for our muscle health and our bone health, but actually that helps our metabolic health, and our metabolic health actually impacts the way that our brain works.

So as simple as making sure we have good-quality protein at each meal. So the Mediterranean diet focuses on high omega-3 fish. They love nuts, they love beans, legumes, a little bit of red meat, so it ticks those boxes.

And then the fibre piece, so, like, your gut actually helps to metabolise a lot of your oestrogen, right? And helps to balance it out. So eating healthy foods for your gut, which is healthy plant foods. It's dairy foods for your brain.

If you just want to remove all the confusion, because it's really confusing, and choose a dietary pattern that's gonna hit all the boxes, that's the one that I would suggest having a look into. Very easy to follow, also very delicious.

And I see your question there is what would you eat before and during a board meeting? Really great question.

So you want to eat something before the board meeting. Like, I've got a meeting tonight, 5:00 till 7:30, and it'll go over, and I know that my dinner's in the middle of that.

I'm very structured with how I eat. I will eat something before that board meeting because I know that if I'm hungry I'm not gonna focus properly.

So you want to eat a snack, and I call it a Peri Healthy Snack, but you can call it whatever you like, and you want to build that snack with key features. So you want to make sure the snack's got some form of protein.

Is it some yoghurt? Is it some nuts? Is it some milk? Is it a coffee? Is it something that's got a bit of protein in there that's gonna actually keep you a bit full in the meeting so you're not thinking about food?

But also you need to give your brain energy. Our brain is 2% of our body weight but uses 20% of our daily energy requirements.

So you need to make sure you have energy for your brain, so no fasting before a board meeting. Can you have a handful of walnuts? They look like a little brain because they support the brain with the alpha-linolenic acid that's in them. Can you have a bit of yoghurt with some nuts and some berries and some colour?

So some healthy fats as well to keep your brain functioning through that meeting.

So I like to build the snack with... And I can maybe share it with you, Helga. It's in my book, but I'll show you the little Peri Healthy Snack Builder that I've got, and you can build that snack before the meeting.

And then during the meeting, having nuts, having seeds. The poor Moyne Health Services, they bring out the lollies for the board meeting, and I just be like, "I've also got some nuts and seeds for people who want some brain health during the meeting."

So can you have some healthier things than those little Mentos in the board meeting? Can you have some nuts and seeds in the middle of the room or make sure people get a break to have something to eat?

And hydration. So if you're not hydrated, you're not giving your body the ability to absorb all the nutrients too.

So I can go on, but I might give a few little things and maybe some recipes, Helga, that you can share, which might be some practical ways of doing it, yeah.

That would be awesome, Sarah.

Again, we will send some things out with the follow-up email to all of you that are here, and if you're listening afterwards, folks, have a look in the show notes. It'll all be on. If you're listening to this while you're out walking, which is how I listen to podcasts, just go to the website afterwards and all the links will be there.

That would be awesome, Sarah. It's also, if I could link it back to, I think, possibly the first question that was asked, what is one practical thing? Get rid of the Mentos and have some good protein snacks in the room.

I chaired a meeting yesterday. Oh, I can't tell you the number of Mentos I ate. I don't normally do it, but they're just sitting there in front of you.

And we also, total side note, we have this thing, we've only just introduced it, where if somebody is not clear about what's being said, whether it's executive or the board, you wave the Mentos. It's our little signal in the boardroom that you're not clear, and I was indicating that to a number of people, not that they weren't clear, but just because I'm chairing, reminding people that that's our signal.

And every time I picked one up to wave it around, I'd shove it in my gob. What I should have had—I love the little walnuts one. Thank you. The little brains. I need to eat some little brains to help feed my brain.

Oh, Sarah, thank you. We're gonna finish the questions on that note because I think it is an awesome one as part of advice to people and your absolutely beautiful area of expertise.

Thank you for being such a superstar in this space, for coming on the podcast initially to answer some questions, for answering all of the questions here and now. Well, almost all of the questions. We might come back to some of them afterwards. And for being such an incredible advocate and wealth of information.

Sarah, give us a plug for your book as well.

It's Not You, It's Perimenopause. So all the nutrition stuff is in there, and the stuff that I'm gonna give you will be excerpts from the book so you can have a look at the recipes and things like that. It tells you how to build a healthy meal.

And the reason I wrote it was not to become a millionaire, because you don't become a millionaire writing a book. It was because I get these questions all day every day, and I really wanted it to be something easy that you could follow.

But also follow along on social media. Lots of free stuff there as well.

Sarah, thank you. You are an absolute superstar. Thank you so much for joining us here today, for doing the podcast, for joining us today, for answering all of our questions.

We'll see you around the Take on Board community sometime soon. Thanks, folks. Ciao.

So that's a wrap for the Take on Board podcast today. Thank you for being here and for being part of the community. I do this podcast because I love bringing good women and gender diverse peoples together.

So I invite you to join us over in the Take on Board Facebook group, an active group that helps, supports and cheer squads each other. Just search Take on Board in Facebook to find us.

Or you might like to let me know your email address, and you'll then have the Take on Board Times and the Take on Board Community Digest delivered straight to your inbox. You'll also get advance notice of events and programs so you can meet others in the community.

Finally, I'd really love it if you could do some of the podcast things. Share this podcast with someone you know who you think might get some value from it. Subscribe if you haven't already, either on podcast or over on YouTube, and I also love it when people rate and review.

Thanks again for being part of the Take on Board community.

Now go and put these tips, tricks and advice into action so you can be your best in the boardroom.

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