



Women's Health Tasmania

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WINTER 2021

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SUPPORTED BY

**Tasmanian
Government**

WHT receives funding support from the Tasmanian Government through the Department of Health.

In this edition we will uncover and explore topics which are often seen as taboo. As something that is not acceptable to talk about or do in society, a particular culture or religion.

There are many taboos around women's bodies and their experiences. The silence can be isolating and can have a negative effect on women's health and well-being.

So, be warned we won't be shying away from difficult and, for some of you, icky topics. We will shine a light on it all and hopefully get you talking about those topics with the women in your life.

We will look at periods and how the negative messaging we receive and the expectation to keep our experience to ourselves including our needs and any pain, can stop women from seeking help.

On the topic of menstruation, look out for the information inside about upcoming talks to be held at our centre in North Hobart.

Body hair, vaginal discharge, changes to our body after birth, incontinence and the effects of menopause on our body and mind are all discussed within these pages.

As is the topic of consent and how to talk with your partner about what you like to do sexually.

To round things off you will find a review of *Sex, Lies and Question Time*, by Kate Ellis, on women in politics, which has had a flood light shone on it thanks to the brave women speaking up.

So, it's time to turn the page and dive headfirst into previously taboo topics as we turn the spotlight on them and encourage you to keep the conversations going.

Body taboos

Women just aren't taught about their bodies. A lot of women don't know their vagina from their vulva (the vagina is the inner canal inside your body. The vulva is the outer part of the genitals: the clitoris and the labia). So, if you feel like it's hard to talk about things to do with your body, you aren't alone. Here are some of the things women find hard to talk about.



Should I get rid of that hair?

It has been considered taboo in US and British culture (so by inheritance Australian) for women to have hair in their armpits since a Harper's Bazaar marketing campaign in 1915 and it has been considered taboo for us to have hair on our legs since the 1940s. It's strange to consider that for most of human history, and in most cultures, it hasn't.

Our relationship with our body hair is complex one. There are women's concerns about hair on their faces, necks, arms, toes...

Body hair is completely normal. Whether you keep it or get rid of it should be up to you. For a really fun exploration of how women see their body hair, look at this film by Tasmanian filmmaker Rebecca Thomson www.rebeccathomson.com.au/a-hairy-problem

Should I deodorise my vulva?

There are a lot of products out there marketing themselves as 'feminine washes or sprays to reduce odour'. They offer to clean your vagina and make it smell more like a potpourri. They have made women worry about what their vaginas should look and smell like. Don't buy them!

Firstly, remember the difference between your vulva and your vagina (see above). You don't need to wash your vagina. It cleans itself with natural secretions. It also keeps itself healthy. It has a lot of 'good' bacteria which maintain the ideal pH balance.

Using soaps, sprays, gels, even water, to wash inside your vagina can disrupt this natural balance. It can result in bacterial vaginosis, yeast infection, or other irritations and it can affect your vagina's ability to self-clean. So, as they used to say in the 1950s, 'leave it alone!'

But yes, you can wash your vulva. Use warm water, or a mild soap. Wash the area between your vulva and your anus every day, making sure you wash 'front to back' (wash your vulva first, and then your anus). That makes sure you don't spread bacteria from your anus to your vagina (and cause an infection). Make sure you dry yourself thoroughly before dressing – bacteria thrive in moist environments.

And finally, if your vagina smells like a vagina, that's ok!

What is normal vaginal discharge?

It's normal to have vaginal discharge, but not all vaginal discharge is normal. If you're worried about your discharge look at its colour.

Clear, white discharge could be the natural lubrication that your vagina produces, or it could be the result of ovulation. This is just your body doing its work.

Your discharge might be reddish-brown around your period as it has blood in it.

If your discharge is grey, green, or yellow, or if you are experiencing itching, pain, or any other unusual symptoms, talk to your GP.

How do I say, 'I consent to sex'? It sounds ridiculous!

It can feel very hard to talk about what you would like to do sexually, and what you aren't comfortable doing, especially if you are starting a new relationship for the first time, or the first time in a long time. The best tip that educators give young folk about this is don't worry about being cool – be genuine and honest. That's good advice for all ages.

Talking about consent is not a one sentence conversation (Shall I? Oh, please do!). It's a dialogue of questions asked backwards and forwards (Are you ok? What would you like to do? Are you enjoying this?). It requires both partners to listen, and to observe each other (when you get to know your partner some signals about consent might be nonverbal). What could be sexier than talking, listening, and watching? And as someone wise said in the current national debate raging on consent, "if someone says no, that's good. You know exactly what their boundaries are."^{*}

The best thing about having a conversation about consent is that it will make you feel less awkward because you will know what the other person is thinking.

(And if this discussion of consent has raised any issues for you, you can call the Women's Health Information Line on 1800 675 028 or 1800RESPECT)

^{*}It was Yumi Stynes. Yumi has done a wonderful podcast series for the ABC called *Ladies We Need to Talk*. You can find it here www.abc.net.au/radio/programs/ladies-we-need-to-talk. She has also just produced a book for teenagers called *Consent*.



Things I wish someone had told me about postpartum

When they tell the story of the Nativity, they don't tell you that Mary was a martyr to her haemorrhoids. Well, she must have been. Riding a donkey heavily pregnant wasn't going to do her any favours.

That's because our society doesn't really talk about the normal experiences of parenthood and life postpartum.

If women were to talk more freely about these things, here are two things they would probably tell you.

1, even though your post-baby body can be disorientating, experiencing birth is an extraordinary thing. Lots of women say it makes them think 'my body is AMAZING!'

And 2, knowing what to expect in terms of body changes can help you deal with it. Studies have shown that women who feel unprepared for the changes to their physical health after birth are more likely to feel overwhelmed, stressed, anxious or depressed.

Here are some things you might experience as your amazing body readjusts to life after pregnancy.

Brain

Oh, your poor brain. After the birth, your estrogen and progesterone levels drop dramatically. This can give you the 'baby blues' (mood swings, anxiety, sadness, irritability) for a few weeks, or postpartum depression (when these symptoms last longer and interfere with your daily functioning).

In fact, it's possible that you will feel like your mood is all over the place for a couple of months. Be patient, it's your hormones returning to balance.



Weight gain

Weight gain is part of pregnancy. Most women lose weight gradually after the birth.

Loose skin and saggy stomach muscles

The taut pregnant tummy skin becomes soft and floppy after the birth. Whether or not it becomes firm again depends on how stretched your skin was, and your genetics.

Your pelvic floor

This one sounds scary, but don't be alarmed, there is help available. Carrying a baby, labour and delivery, can put a lot of stress on your pelvic floor. After childbirth, some women experience bladder incontinence, some experience fecal (poo) incontinence, and sometimes women may experience a prolapse. (That is when a weakened spot in the vaginal walls allows the bladder, rectum or uterus to drop out of position.) The good news is that you're not alone, and there is an entire profession – pelvic floor physiotherapists – out there who can help you deal with this.

Stretch marks on your stomach, breasts, hips or thighs

Stretch marks aren't harmful. Over time they will fade to white. Some creams claim to remove stretch marks, but there is no evidence these work.

Varicose veins

Oh, so normal during pregnancy but they can cause a lot of discomfort. Usually women get them in the legs, but it is also possible to get them in the vulva (at the vaginal opening). Usually these go away by the time your baby is 3 or 4 months old, but they can take up to a year.

Unfortunately, no one can stop themselves getting varicose veins but you can reduce your chance of getting them while pregnant by being active, avoiding high heels, putting your legs up when you're resting and avoiding wearing anything too tight around your waist or pelvis.

Haemorrhoids

A pain in the bottom. These usually go away soon after you give birth, especially if you're careful to avoid constipation.

Episiotomy and caesarean scars

You might emerge from childbirth with a scar from a caesarean, from an episiotomy or from a perineal tear. These can take some weeks to heal fully and years to fade to white. Some scars need gentle massage for a period after birth to help their healing. And you need to monitor them for pain or discomfort; seek advice if you are experiencing any.

Changes in your breast size

They can get much bigger after the birth because of extra blood flow and milk. This will settle down but your breasts might not go back to the size they were before the birth. They might be bigger. Or smaller.

Changes in your skin

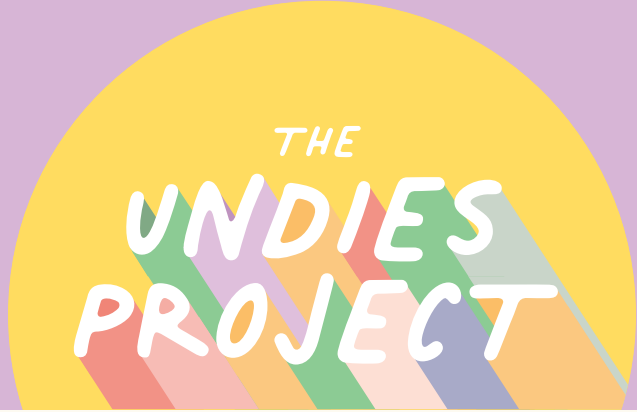
Some women develop dark irregular patches on their face during pregnancy. This is chloasma, 'the mask of pregnancy', and it's thought to be due to the stimulation of pigment-producing cells by female sex hormones. These patches usually fade over the months following birth, but for some women can last several years.

For other women, their moles, birthmarks or freckles can get darker.

Some women develop a dark line down the middle of their stomach, called the 'linea nigra'. Hormonal changes can also make women's nipples go darker. For some, this change is permanent.

Changes to your teeth

They used to say a woman lost a tooth for each baby she had (before modern dental care). Pregnancy can lead to dental problems for some women, including gum disease and tooth decay. Try to visit the dentist while you're pregnant for a check up.



THE UNDIES PROJECT

Changes to your hair, or hair loss, due to changes in hormone levels.

It's normal to lose a lot of hair after giving birth. But it's ok, you've got a lot spare. Rising hormone levels during pregnancy cause you to grow a lot of hair. The hormone levels drop, you lose those locks.

Changes to your eyesight

Hormones again. Women sometimes get blurry vision or dry eyes while they're pregnant. If you're breastfeeding it can continue after the birth. (See an optometrist).

That's a lot of change! What helps you feel good about your body after birth?

1. Take care of yourself with good food and gentle exercise. This is always an important part of life but do it as a new mum because it's good for your mind and body, not to lose weight. And please don't go in for high impact exercise to get your 'pre-baby body' back. Vigorous exercise could actually reduce your pelvic floor strength. Talk to your GP or midwife before starting vigorous exercise after the birth.
2. Be kind to yourself. It's ok and normal that your body has changed. Remind yourself that your body has just produced a human being. You are strong and you are amazing.
3. Be kind to other women. It's great to see women sending each other positive messages about women's bodies in all their diversity.

Look at this website: <https://ashluna.com/#/4thtribodies/> This is a photodocumentary project on women embracing their bodies and parenthood. There are women with stretchmarks, with separated abdominal muscles, women surviving mastectomies and new parenthood. You name it. And check out these Instagram pages: [#4thtribodies](#) – a positive page that includes people of different races, sexualities and abilities – and [#stopcensoringmotherhood](#) – a supportive, positive source of honest information about postpartum and parenting.

We can end period poverty sustainably!

The Undies Project is a project funded by a City of Hobart Urban Sustainability Grant (thank you, City of Hobart!)

In a nutshell, the project gives people who menstruate 5 pairs of reusable period undies from our very generous partner, Modibodi. A round of applause for Australian manufacturer, Modibodi!

To receive the undies you just need:

- to live in the Hobart City Council area
- to have a Health Care Card/ Pension Concession Card

So that's the practical elements of the project – but why is this important? Well, there are two reasons.

First, pads and tampons have a lot of plastic in them (and on them in the form of packaging). A pad is up to 90% plastic and takes anywhere between 500-800 years to biodegrade.¹ Single use tampons and pads end up in landfill.

Secondly, you have to buy single use items over and over. For those of us on a low income, that can present difficulties.

Period poverty is when you can't afford (or have to scrimp on other essentials) to buy menstrual products.

You might have heard the story of the incredible young person, Layla Seen who wrote to the Tasmanian Government to advocate for free menstrual products for Tasmanian school students.

Layla explained something very important: not everyone can afford to buy pads and tampons for every cycle, and this has a big impact on how we live our lives when we are menstruating.

As part of The Undies Project we have asked participants to tell us why they wanted to be involved. The responses are heartfelt. Stories of living with endometriosis and how difficult this can make managing a period, the desire to try reusable options but not being able to afford the initial financial outlay, and some reporting that tampons and pads cause physical discomfort (dryness, itching and just feeling uncomfortable)!

The Undies Project is about making our periods more cost effective, and better for the planet. It's also about providing choice – we need to be empowered to manage our periods in ways that are appropriate for us. Cost shouldn't be a barrier.

At the moment, The Undies Project is just for women in the Hobart City Council area. If you think it's worth taking this project further afield you can make a financial donation. That way we can purchase undies for people in different parts of lutruwita/Tasmania.

For more about The Undies Project or to donate, check out our website.

¹ <https://www.abc.net.au/news/2017-10-27/which-period-product-is-best-for-the-environment/9090658>

“Menstruating isn't a choice and there shouldn't be a big price tag on getting through that time of the month.”

— Sarah, Undies Warrior

A bloody, often painful secret

"If you swim in the ocean with your period, you will attract sharks."

"Girls can hold in their period if they choose to, like pee."

"Your period is the tears of an empty womb."

"There are balloons floating inside you full of blood."

"Periods are blue in colour!"

"Never talk about your period at work, especially in front of male colleagues!"

I asked some friends to share with me what the weirdest things they had been told about periods. Maybe you're thinking 'where on earth do people get these ideas from?' Or maybe you're thinking, 'yes, I have heard that too.'

One friend, a staunch feminist and incredible woman confessed that at 35 she didn't know what a period actually was. She just knew she bled and she hated it.

Let's clear some things up.

A period is when your body sheds the monthly build-up of the lining of your uterus (the uterus is also referred to as 'the womb'). Menstrual blood and tissue flow from your uterus through the small opening in your cervix and pass out of your body through your vagina.

A 'cycle' involves the uterus lining building up over a month. The build-up is the uterus' way of getting ready for pregnancy. If you don't get pregnant, estrogen and progesterone hormone levels fall and when they get low enough this tells your body to "let the lining go!" and voilà: your period.

Ok. So, if it's that simple why is talking about periods difficult? And why do these strange ideas about periods flourish?

Many cultures around the world have menstrual taboos – rules, both spoken and unspoken about the impurity of menstruation. For many cultures, including ours, period blood and the menstruating body is considered "dirty and disgusting".¹

The menstrual taboo in Western culture takes a lot of different forms and has a long history. It's intimately linked with ideas about women being irrational, weak, fallible and impure.

When you ask women, as Pickering and Bennett did in their research with thousands of women,² we see a range of deeply negative experiences around menstruation, and this brings with it a lot of problems for our health and wellbeing.

Let's take just one example. Have you ever hidden the fact you're on your period at work? Have you rocked up to work feeling bloody awful but soldiered on anyway because it's just your period, and you need to get on with it? Have you called in "sick" because you've got your period?

The cultural norms underneath these decisions are very silencing: don't talk about your period. Hide your period. Shoulder the cost, pain, and inconvenience of your period on your own.

Often these ideas are ones given to us as young people, maybe at our very first period.

As we learn about menstruation through the negative lens of the menstrual taboo we are more likely to ignore or be ignorant of what a healthy period is for us.

In Australia, one in 1 in 9 (11%) women born in 1973–78 were estimated to have been diagnosed with endometriosis by age 40–44.³



One of the very common stories from women who are diagnosed with endometriosis is that they lived for years believing that crippling pain of their period was normal. But it's not, and women exchanging information about their periods, and doctors asking questions about menstruation, are ways of alerting women to what their period might be telling them about their body.

The menstrual taboo functions to stop women talking about their period, their pain and their needs. It stops our doctors, families and communities from listening to us.

Does it have to be this way?

"A taboo will live or die by the number of people who obey it, and its strength and resilience depends on its popular understanding and broad social agreement."⁴ Currently, our tacit social agreement is to remain silent about our periods and what the experience is bringing us.

Recently, I spoke to a group of women who are incarcerated. I told them research shows that you have a better period experience if you have a positive understanding of your period and if you can have people around you who support you when you are on your period.⁵

One woman looked at me with a frown. "So, what? You're saying we should all get together to talk about our periods?"

Exactly.

1 Olivia Willis, Breaking the menstrual taboo: Why period stigma still holds women back, (2017). <https://www.abc.net.au/news/health/2017-09-30/menstrual-cycle-taboo-holds-women-back/8996526>

2 Karen Pickering and Jane Bennett. *About Bloody Time*. (2019). Page 91.

3 AIHW, *Endometriosis in Australia: Prevalence and hospitalisations* (August 2019). <https://www.aihw.gov.au/reports/chronic-disease/endometriosis-prevalence-and-hospitalisations/summary>

4 Karen Pickering and Jane Bennett. *About Bloody Time*. (2019). Page 91.

5 Royal Women's Hospital, *Healthy Periods*. <https://www.thewomens.org.au/health-information/periods/healthy-periods>

I laughed so much I wet my pants....

If you are fortunate to live a long life, you are likely to experience incontinence for two extended periods – when you were a baby and in aging. Some people also experience it at times of ill health or during and after pregnancy.

Incontinence is not likely to be a happy experience, but there are things you can do to minimise what many see as the ultimate indignity.

What is incontinence?

Incontinence is the accidental or involuntary loss of urine (wee) from the bladder or involuntary bowel movements. It can be occasional, perhaps due to energetic laughing, coughing or sneezing or it can be a regular occurrence that you will wish to seek treatment and support for.

Urinary incontinence

Urinary incontinence can occur when you can't control the urge to wee, when your bladder retains some urine and leaks small amounts over time or you are unable to access a toilet in time due to physical or cognitive inability. The most well-known incontinence is bed-wetting by children but it is important to know that not every child grows out of this and it can be an ongoing issue for teens. As we enter our senior years, it is not uncommon to wake frequently in the night with a need to pass urine. Depending on your physical ability and access to a toilet, this can be a difficult urge to manage.

Faecal incontinence

Soiling your undies and excessive farting can result from childbirth, radiation therapy, surgery, aging, bowel disease, poor diet, excessive straining... and the list goes on. Like urinary incontinence it can be occasional, but it is important that if it happens often that you seek expert advice to find the underlying cause and to help you manage. The Bristol Stool Chart is an exciting way to monitor your poos because how they look can tell you a lot about how your body deals with your diet and lifestyle.

Healthy bladder and bowels

Signs of a healthy bladder are that you know you need to go to the toilet and have time to get there and your bladder empties completely. Urinating between 4 to 6 times a day is common, as is once or twice at night. Normal bowel movements can be daily or every second or third day.

You can help both your bladder and your bowels by eating a good diet with plenty of fibre, drinking plenty of fluids, mostly water (1 ½ to 2 litres each day) and exercising (e.g. walking briskly for 30 minutes every day). (Yes, seems like these three things are good for nearly everything, but really, they are.) Oh, and limit alcohol, caffeine, fizzy drinks and sports drinks. Yes, of course.

There are special exercises you can do to help both your bladder and bowels: pelvic floor muscle exercises. These are the muscles that the brain activates to keep urine and faeces (poo) in until you are ready. Once you are confident you know how to activate your pelvic floor, the exercises can be done anywhere. They're great to do while you're on that 30-minute walk! One method of exercises creates a slow "Mexican" wave ascending your vagina and anus. Now that's worth trying even if you are not incontinent!

Getting help

You are not alone if you suffer from incontinence. About 1 in 4 Australians experience some form of incontinence. Because risk factors include pregnancy and menopause, women are more likely than men to be incontinent. Not surprisingly, incontinence can affect intimate relationships. Dealing with leaks or a catheter during sex can feel embarrassing or annoying.

Incontinence specialist nurses and physios can help you get the exercises right and they can advise on changes to your diet and lifestyle that can help. You see can a private specialist without a referral, but you

will need a GP's referral for a public specialist. Usually, incontinence takes only 3-5 visits over the course of 3-6 months to fix. Very common. Very treatable

There is a National Continence Helpline and pharmacists can advise if your medications are increasing your symptoms. There are also continence products such as pads and washable continence pants that can help you get out and about and give you confidence while you are recovering.

Routine and planning can also be a big help. When you head out, make sure you know where the public toilets are. And remember, whether it affects yourself or someone you care for, we're all likely to experience it so let's support each other.



References and resources

The Continence Foundation of Australia provides lots of resources and advice: <https://www.continence.org.au/>

The National Public Toilet Map allows you to locate, save your favourites and add toilets to a map. You can find it here: <https://toiletmap.gov.au/>

Take a look at your next poo and compare it to the Bristol Stool Chart: <https://www.continence.org.au/bristol-stool-chart>

And for younger readers, take a look at Go Against the Flow: <https://www.goagainsttheflow.org.au/>

The pausing of the monthlies

If you are experiencing the joy of going red from the neck up as a hot flush overtakes your body and, like Superman, find you are looking for a telephone booth* to strip off some clothes, don't panic.

Or you might be changing your PJs and bed linen regularly as you "sleep" in a sweat hot enough for mussels to cook in your belly button.

It might not feel normal, but everyone who menstruates and lives long enough will get to experience something like this.

Menopause. Got to love it because it will be coming to you sometime soon. But what exactly is it and do you need to do anything special to get through it?

Peri – meno – post

Menopause is when your periods stop completely, with the time leading up to this known as perimenopause ("meno" means "month" and "peri" means "about/around/near"). A year after your last period you are in post-menopause, which you can enjoy for the rest of your life.

Perimenopause usually starts when a person is in their forties and can last from 1 to 10 years, with the average being about 5 years. But, just like any "normal", there are many variations on this, including spontaneous menopause (see Newsletter Summer 2020). The first thing you are likely to notice is irregular periods or changes in blood flow.

With the winding down of the ovaries comes fluctuations in the sex hormones oestrogen and progesterone. It is the change in these hormones that cause most of the symptoms, including vaginal dryness and vaginal pain during intercourse, mood changes, weight gain, dry/itchy/crawly skin, hot flushes, night sweats and sleep disturbance. This is the time to grab hold of your inner super powers and celebrate just how powerful your body is.

Reducing symptoms

It can help, also, to see your GP or health worker to talk through your symptoms and how to minimise negative experiences. For example, alcohol, sugar and caffeine can be triggers for hot flushes so decreasing your intake of these can help. Eating healthy food and increasing exercise can help reduce weight gain and improve low moods. For some people, hormone replacement treatment may be helpful. There are also many herbal and alternative remedies – just check they work for you as their cost can accumulate.

The changes in sex hormones can also increase a person's risk of serious mental ill health so it is important to seek help if you are feeling vulnerable: increased paranoia and hostility are two possibilities. The reduction in sex hormones can also lead to increased risk of osteoporosis, metabolic syndrome and cardiovascular disease during post-menopause. Got symptoms? See a health professional.

Not all menopause is the same

While every person's experience of menopause is likely to be different, there are also differences due to culture and gender. Some cultures embrace aging and research has found that women in such cultures experience fewer negative symptoms of menopause. Menopause can bring economic advantages (no need to purchase menstruation products) and religious freedoms (with menstruation seen as "polluting" by some religions).

There has been very little research into the menopause experience of Indigenous Australians. While it is known Indigenous Australians seek help for menopause at a lower rate than others, their risk of significant side effects is likely to be higher due to a range of poorer health risk factors. Menopause is likely to be yet another part of Australia's health system that is failing the Indigenous population.

Trans and non-binary people can experience menopausal symptoms caused by their hormone treatment. People undergoing fertility treatment or suffering diseases that affect their hormones can also have menopausal symptoms.

If you are able to, embrace your menopause. It is the coming of wisdom in some cultures. Why not make it so in ours? Be open about it if you can. Make sure you name it up at work if you are worried it is affecting your work performance. Talk to your partner about how you feel and what you both need: separate bedrooms may help you survive. Very civilised. Menopause is not a taboo; it is a sign that you are likely older, wiser, a bit drier and perhaps a bit more impatient. But you've earned this position.

*For those under 30, a telephone booth was a small cubicle on the side of a road in which you could put coins or a phone card to make a phone call. Coins used to be part of our monetary system and could be used to purchase goods and services.

For further information

<https://www.thewomens.org.au/health-information/menopause-information/managing-menopause>

<https://www.jeanhailes.org.au/news/perimenopause-how-to-manage-the-change-before-the-change>

<https://www.healthdirect.gov.au/perimenopause>

And for a wonderful expression of menopause in the Trans community watch Menopausal Gentleman <https://sites.dlib.nyu.edu/hidvl/tlg1jx4s>



Menstrual Cycles Talks with Monica Francia

Monica Francia is a Naturopath, Nutritionist and Herbalist currently practicing at Goulds Natural Medicine.

She has a special interest in menstrual health and is a Trained Teacher in Natural Fertility. She believes in Herbal and Natural medicine being accessible for all.

She co-ordinates the Herbalists Without Borders Chapter in Hobart, who operate a free clinic once per month.

Thursday May 27, 2021 5.30 – 6.30pm Menstrual Cycle Health

A talk designed for all menstruating folk to get a better understanding of their hormones and their cycles. This talk will increase your body and cycle awareness as well as provide simple tips for healthier hormones. This will include dietary changes and food as medicine as well as simple and safe nutritional supplements and herbal medicine. If you haven't used natural medicines before, this is a great introduction, but experienced folks are also welcome.

Thursday June 3, 2021 5.30 – 6.30pm Perimenopause and Menopause

This talk discusses the symptoms that can come up during perimenopause and menopause to help you to understand what is going on in your body (knowledge is power!). We will discuss simple and safe dietary, herbal and nutritional changes that can make a big impact on your experience of this transition time.

Thursday June 10, 2021 5.30 – 6.30pm Painful and heavy periods

This talk will go into the specifics of painful periods and heavy menstrual bleeding. If you experience painful and/or heavy menstrual bleeds, this is a great talk for you. We will discuss what could be the underlying cause behind these difficult symptoms and what you can do to try and improve them. This will include making changes to your diet and using herbal and nutritional medicine. We will discuss conditions such as Fibroids, Endometriosis and Adenomyosis, which can often be the cause of these symptoms.

Thursday June 17, 2021 5.30 – 6.30pm Poly cystic Ovary Syndrome (PCOS)

Have you been diagnosed with PCOS, or do you think you may have PCOS? This talk will go through what PCOS is, what causes it, how it is diagnosed and how it can be addressed by making changes to your diet and lifestyle. We will also discuss some nutrients and herbs that can help to improve symptoms of PCOS.



WOMEN'S HEALTH TASMANIA FREE CLOTHES

25 Lefroy St, Mon - Wed, 9.15am - 12.30pm

The Swap Rack is Back

She's Out There

[www.womenshealthtas.org.au/
podcasts/shes-out-there](http://www.womenshealthtas.org.au/podcasts/shes-out-there)



Women's Health Tasmania

BREAST CANCER SUPPORT GROUP

3RD TUESDAY OF THE MONTH
11.45AM - 1.15PM

For more information call Women's Health Tas on 6231 3212



**FREE COMMUNITY
HERBAL MEDICINE CLINIC**



First Friday of every month 9am - 12pm

Multicultural Hub
65 Hopkins Street, Moonah

Herbalists Without Borders recognises many global citizens lack access to health and wellness due to economic and other barriers. HWB firmly believes health is a human right, not a privilege.

This volunteer run community clinic is staffed by qualified naturopaths who practice herbal medicine. Each appointment offers the opportunity to access high quality, individualised, herbal and nutritional medicine to support your health needs.

To find out more or to make a booking please contact Hobart Herbalists Without Borders via email at **hobart.hwb@gmail.com**.

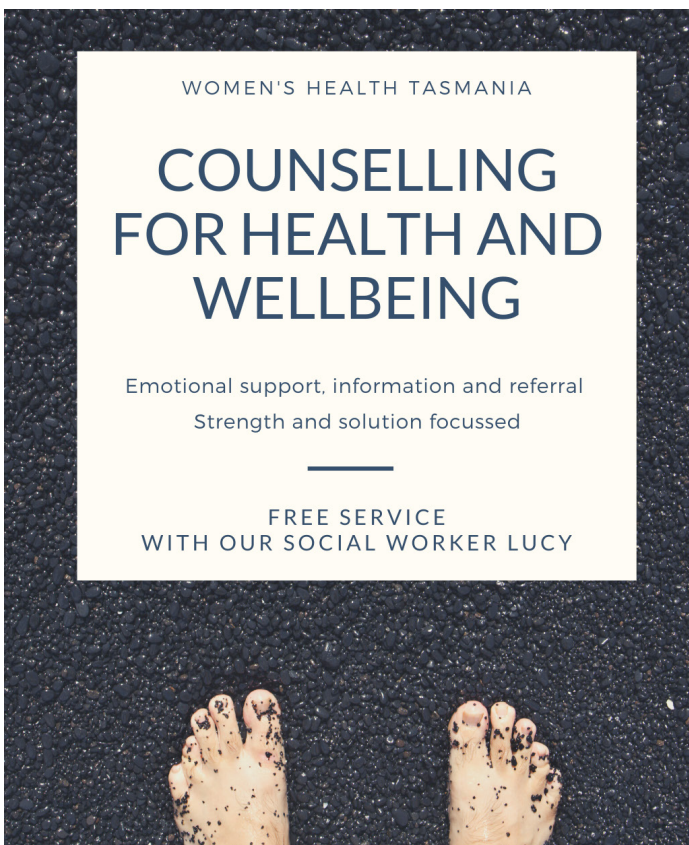
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BOOK REVIEW

Sex, Lies and Question Time by Kate Ellis

This is not a book for the heavy hearted. Nor is it a book for those who want to sit quietly and think. If you read this book, it will enrage you. You will find yourself reading excerpts to strangers on the bus. But it is also funny. And it is moving.

What publishing magic happened, to have Kate Ellis release this book just as Canberra exploded with revelations about the treatment of women? It obviously wasn't planned this way; the book is filled with interviews and detail, it hasn't been rushed. But it completely occupies the space surrounding the question we're all asking; what is it like for women to sit or work in Parliament? The Sydney Morning Herald described this book as 'damned zeitgeisty', meaning completely appropriate to this moment in time. And it is.

Kate Ellis was 27 when she was elected to Parliament, and only 30 when Kevin Rudd appointed her Minister for Youth and Sport. She was the youngest ever Federal minister. She was serious about social policy. She spent precious time and energy responding to rumours that someone briefed the media about: office love triangles, that she 'vajazzled' for parliamentary events (got diamante glued to her pubic mound).

Sex, Lies and Question Time is partly an essay and partly a memoir. Ellis tells us about her own experiences and shares information from interviews she conducted with a broad range of colleagues from across the parties, including former PM Julia Gillard, Julie Bishop, Natasha Stott Despoja, Tanya Plibersek, Linda Burney, Sarah Hanson-Young, Penny Wong, Pauline Hanson, Jenny Macklin, Sussan Ley and others.

She dissects the misogyny which affects women's political careers. The book covers the mundane irritations of women's working lives

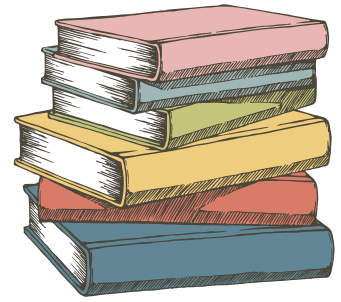
(men taking women's ideas and getting the credit for them; men carefully 'mansplaining' information to female colleagues; inequitable and sexist standards of dress and behaviour etc). But it also gives fascinating insights into some of the most misogynistic parliamentary behaviour, which is not recorded in Hansard, or caught on cameras.

It explains how sexual rumours are created, launched and spread to destroy careers. Ellis says, "in the majority of cases sexual gossip is saved for use on women, I suspect because that's who it inflicts the most damage upon".

It shows how the rumours are used to 'slut shame'. Sexist slurs and sexual innuendo are yelled out across the floor of the Parliament or quietly briefed to journalists. The most infamous recent examples of these being Senator David Leyonhjelm's comments to Senator Sarah Hansen-Young, which came at the end of a year of harassment across the Senate floor. Senator Hansen-Young told Ellis,

"There had been a number of incidents where I had been on my feet asking questions in question time and the yelling would start. People shouting rumours of who I've done this or that with. People yelling men's names across the chamber. Men they are alleging that I had slept with...It was like a game these blokes were playing with just the most intense level of scorn. And I hated it."

Hansen-Young sued Leyonhjelm and won, but other women's careers have been destroyed. Ellis tells the story of Labor MP Emma Husar, whose career was ended by an unchecked BuzzFeed article containing a number of sexual allegations including that 'she had performed a 'Sharon Stone move'



as per the movie *Basic Instinct* and uncrossed her legs to reveal her vulva to fellow MP Jason Clare as he was sitting on his office floor playing with his toddler son.' The fact that the story was denied by both Emma Husar and Jason Clare didn't matter.

I'm sure you will be as disturbed as I was to read that these attacks are not just launched by opposition parties, but also by competitive colleagues within their own parties.

Why does this book matter? Because it does. It matters that the Australian Parliament reflects the diversity of the Australian community – and it matters that the voices of the diverse community are treated with respect and their contribution valued. For that to happen, it needs to change. As Kate Ellis says, it's not a simple matter of telling the women politicians to work together because that doesn't address the fact that the Parliament itself is conflictual and aggressive in its processes.

Read this book, because the women MPs' voices will empower you. They are angry, clever and informed. They will also convince you that being a woman who represents her community is challenging, interesting and ultimately worth it. Or maybe you know how good this book is already? As I reached to take this book off the bookshelf an arm reached over my shoulder and took the copy behind the one, I'd picked up. And then another woman reached over my other shoulder and picked up a third copy. The book wasn't jumping off the bookshelf; it doesn't have legs. But I can see where the expression comes from. Hurry and get a copy now... or borrow it from the WHT library.

What's on at Women's Health Tasmania?

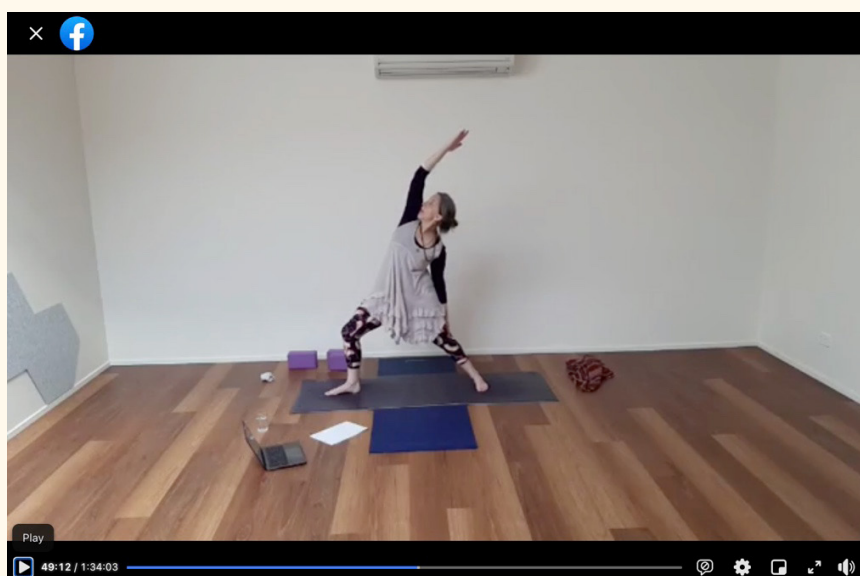
| Monday | Tuesday | Wednesday | Thursday | Friday |
|---|---|---|---|--------|
| Telehealth and face to face counselling <ul style="list-style-type: none"> • Pregnancy Choices • Emotional Health 6231 3212 | Telehealth and face to face counselling <ul style="list-style-type: none"> • Pregnancy Choices • Emotional Health 6231 3212 | Telehealth and face to face counselling <ul style="list-style-type: none"> • Pregnancy Choices • Emotional Health 6231 3212 | Telehealth and face to face counselling <ul style="list-style-type: none"> • Pregnancy Choices • Emotional Health 6231 3212 | Closed |
| Health Information Line: 1800 675 028 | Health Information Line: 1800 675 028 | Health Information Line: 1800 675 028 | Health Information Line: 1800 675 028 | Closed |

Online classes:

| | | | | |
|--|--|--|---|--------|
| 9:30am–10:30am Tai Chi with Wendy Live-streamed on Facebook and (Max 6 participants @ WHT) To book a place call: 6231 3212 | 10:00am–11:00am Weights with Wendy Live-streamed on Facebook | 11:00am–12:30pm Yoga with Jen Live-streamed on Facebook and (Max 4 participants @ WHT) To book a place call: 6231 3212 | 11:00am Meditation with Valerie Live-streamed on Facebook | Closed |
|--|--|--|---|--------|

Classes at the centre:

| | | | | |
|--|--|---|---|---|
| 11:00am–12:00pm Tai Chi with Wendy (Max 12 participants) To book a place call: 6231 3212 | 10:30am–11:30am Meditation with Jean (Max 12 participants) To book a place call: 6231 3212 | 9:30am–10:45am Yoga with Jen (Max 6 participants) To book a place call: 6231 3212 | 10:00am–11:00am Meditation with Valerie (Max 12 participants) To book a place call: 6231 3212 | 10:00am–2:00pm Waste to Wonderful A textile sharing project for women from refugee and migrant communities. Childcare provided. To learn more call: 6231 3212 |
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Online classes

We are offering some of our regular classes live on our Facebook page from Monday to Thursday, see our activities page for details.

If you are not a fan of Facebook but would like to have access to recordings of our online classes on YouTube please sign up to our e-News to receive links each fortnight: womenshealthtas.org.au/enews

Some apps for you

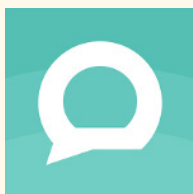
Are you familiar with apps? (these are the software programs, or applications you can download onto a mobile phone, PC or tablet.)

The Queensland University of Technology's E-Mental Health in Practice group has recommended some of its top picks for mental health apps. We've tried them out here and sometimes recommend the relevant ones to counselling clients too. You might like to check them out.



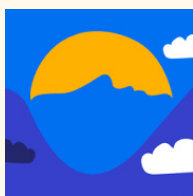
Smiling Mind

This free mindfulness app offers a huge range of guided mindfulness meditations and short exercises. It includes programs aimed at adults, young people and kids as young as three years old. It has been developed in Australia and you can choose if you want to hear the meditations in a male or female voice.



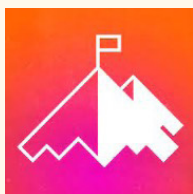
Daybreak

This app offers support if you want to change your relationship with alcohol by cutting back or quitting. The app has been developed by Hello Sunday Morning and is free for Australian residents. (The Australian Government is paying for it.)



Beyond Now

This free app helps you create a step-by-step safety plan for times when you are feeling overwhelmed and having thoughts of suicide. It has been developed by Beyond Blue and there is also an online version if you don't have a smartphone.



MoodMission

A free app to help you overcome feelings of anxiety and depression by suggesting simple, evidence-based coping strategies.

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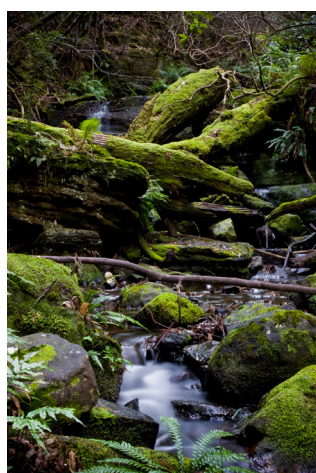
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Valerie on 0405 329 687

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Women's Walking Group

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