

Why She's Not Getting Better: *The Missing Menopause Factor*

An online webinar with
Simona Stokes

Zoom Webinar

6 November 2025, Thursday

Times:

5:00 pm – 8:00 pm, London UK

12:00 pm – 3:00 pm, New York, USA

CPD hours: 3



Location: Online streaming only

(all our webinar tickets now include complimentary access to a video recorded version for 1 year or 3 years, depending on the ticket type)

She came to therapy certain she was “losing it.” Once sharp, funny, and quick with words, she now found herself blanking on names, misplacing files, and lashing out at her partner for reasons she couldn’t explain. Sleep fractured. At work, she’d stare at the screen, trying to remember what she’d sat down to do. Her GP suggested antidepressants. She left the surgery more frightened than before.

It wasn't depression. It wasn't early dementia. It was menopause—hidden in plain sight. And like so many women, she had spent months being treated for the wrong problem.

When Therapy Collides with Menopause

The disruption begins subtly. A long-standing client who’d been making steady progress now feels “off.” Her concentration fractures, irritability spikes beyond familiar patterns, confidence dissolves in ways that shrug off your usual interventions. Anxiety escalates without clear triggers, or mood deteriorates despite genuine therapeutic progress. You adapt your approach, yet the changes fail to take hold. She wonders if therapy has stopped working—or if she has.

What you're witnessing could be menopause operating beneath conscious awareness.



For millions of women, this life transition manifests as far more than hot flushes and night sweats. Hormonal fluctuations systematically amplify anxiety, fragment sleep architecture, erode cognitive clarity, and destabilise emotional regulation—often at the very moment life demands more: aging parents requiring care, career trajectories plateauing, adult children leaving home. Research including the SWAN (Study of Women's Health Across the Nation) shows **nearly 60% of midlife women experience significant mood changes and cognitive symptoms during this transition—yet menopause remains conspicuously absent from most mental health case formulations.**

Why This Matters Now

The clinical cost of missing menopause in our casework is substantial. Clients risk misdiagnosis with treatment-resistant depression or anxiety, their symptoms medicated while the underlying hormonal disruption remains unaddressed. Therapy that overlooks this biological context risks therapeutic stalemate for both practitioner and client — eroding alliance and prolonging distress.

For therapists, the stakes are equally high. Missing menopause doesn't just compromise client outcomes—it erodes your clinical confidence, damages therapeutic alliance, and can leave you questioning your competence with women who should be responding well to treatment.

Neuroendocrinological research increasingly confirms that fluctuating oestrogen and progesterone levels directly influence neurotransmitter systems — serotonin, dopamine, and GABA — meaning menopausal changes can mirror or exacerbate primary psychiatric conditions.

As research streams in neuroendocrinology, CBT, and women's mental health converge, we now possess the tools to position menopause not as peripheral clinical information, but as central to case conceptualisation.

This shift transforms everything — from assessment protocols to treatment planning and psychoeducational frameworks.

From Blind Spot to Clinical Precision

This is where EMBERS®, developed by Counselling Psychologist and CBT therapist SS, transforms clinical practice. Drawing on her dual expertise in psychological therapy and Lifestyle Medicine, Simona has architected a structured yet nuanced menopause-informed psychological framework that integrates menopausal considerations into the therapeutic matrix — from initial assessment through to treatment completion.

Rather than addressing symptom clusters in isolation — hot flashes, anxiety, cognitive disruption — EMBERS® provides a unified conceptual lens. It enables clinicians to formulate with theoretical precision, intervene with evidence-based confidence, and sustain therapeutic engagement through a developmental transition that might otherwise fragment treatment coherence.

Through the EMBERS® methodology, you'll acquire the capacity to translate emerging neuroendocrine research into sophisticated clinical decision-making — ensuring your interventions remain both empirically grounded and phenomenologically attuned to women's lived experience.

The question becomes: how do you make this shift in your practice? How do you move from missing menopause to making it central to your clinical thinking? The EMBERS® framework doesn't just give you theory—it puts actionable, direct-to-practice interventions in your hands.



In This Training, You Will Learn How to:

- **Spot menopause when it's hiding in plain sight** – Recognise the subtle patterns in mood, cognition, and behaviour that point to menopause as a contributing factor, even when it's not obvious.
- **Adapt CBT for the menopausal context** – Discover how to integrate third-wave CBT approaches, such as mindfulness, acceptance, values-based action, and self-compassion, to work effectively with the unique cognitive and emotional shifts that can accompany hormonal changes during menopause.
- **Learn how to support clients in navigating brain fog**, fluctuating mood, anxiety, and changes in self-identity, while fostering psychological flexibility and resilience.
- **Bring the hormone science into the room** – Translate current research on how hormonal changes affect mood and thinking into practical psychoeducation and treatment planning.
- **Work with identity shifts without pathologising** – Help clients navigate changes in self-concept and relationships while distinguishing normal midlife transitions from clinical concerns.
- **Integrate lifestyle factors ethically** – Incorporate sleep, movement, and nutrition considerations to support emotional stability and improve therapeutic outcomes.

What This Training Is Really About

This isn't just about adding menopause to your clinical vocabulary. It's about ensuring that when a woman sits across from you, struggling with changes she can't name, you have the insight to see what others have missed. It's about being the therapist who joins the dots—who replaces months of confusion with a moment of recognition.

Through practical, evidence-based tools grounded in current neuroendocrinology, CBT, and women's mental health research, you'll learn to adapt cognitive and behavioural strategies in ways that address menopause's unique neurobiological, emotional, and psychological impact. These are not abstract concepts—they're techniques you can apply immediately in clinical practice, even with your very next client.

If you've ever watched a client deteriorate despite good therapeutic work, wondered why your best interventions suddenly stopped working, or suspected there was something you were missing but couldn't put your finger on it—this training will give you the missing piece.

6 November, 5–8pm UK time — Join us and ensure menopause is never the invisible factor derailing therapy again.

Places are limited. This November, be the therapist whose clients finally feel seen.

About the speaker

Simona Stokes is a Counselling Psychologist and the Founder of the Menopause CBT Clinic®, an independent psychology practice dedicated to supporting women's psychological wellbeing during perimenopause and menopause. Drawing on over 20 years of experience in the mental health field, Simona created the EMBERS® Menopause CBT Model, a framework that integrates evidence-based psychological principles with the latest research in emotional and mental health.

She is professionally registered and accredited with the HCPC, BPS, and BABCP, and is also a certified Lifestyle Medicine Professional, accredited by the British Society of Lifestyle Medicine (BSLM). Her work brings together psychology, neuroscience, and lifestyle medicine to offer a holistic approach to menopause care.



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