# Staying confident as you age

**Dr Sarah White:** I am here with Kellie-Ann Jolly, who is the Head of Partnerships and Engagement at Jean Hailes for Women's Health. Thank you so much for joining us, Kellie.

**Kellie-Ann Jolly:** Thank you for having me.

**Dr Sarah White:** Now, you have been the CEO of an organisation, you're a health professional, you have chaired, or you chair several organisations and boards and things like that. So we wanted to talk to you about confidence, because we know that confidence is really important as we age, particularly in healthcare. So why are we talking about this topic? Why is confidence important?

**Kellie-Ann Jolly:** I think everyone's different, but sometimes, particularly as you get older, a lot of things are going through, it's a transition period. You might be retiring, your kids might be getting older and moving off into, perhaps don't need you as much. You might be thinking through, 'What's next in my life?' You might be grieving for loved ones or friends. So it is a real transition period, and sometimes we can start to lose our self-worth and start to lose our confidence a little bit. So it's really important that we continue to think about this, because we always want to be able to have that sense of control and be able to be heard. And I think this is a really important time to think about it.

**Dr Sarah White:** And I've heard you talk about confidence as being something that's important to make sure that our own needs are met. Is that what you mean in terms of looking after yourself, or something like that?

**Kellie-Ann Jolly:** Yeah, it is, because, and I think as we age too, we realise that the only one who's really going to be advocating for us is us, and we actually know more about ourselves than others. So it's really important that we continue to think about this and to be able to communicate what we want, what we need, and to be able to ask questions, essentially, so that we are able to continue to live and to be healthy as we get older.

**Dr Sarah White:** Now, some people are naturally more confident than others, and I've seen you in front of, speaking in front of very big crowds. I've seen you literally at the Gala Balls and things speaking to crowds, and, are you a naturally confident person?

**Kellie-Ann Jolly:** No, I'm actually not. I'm not a naturally confident person.

**Dr Sarah White:** Which is actually really surprising.

**Kellie-Ann Jolly:** I'm very much of the 'you fake it until you make it' type. I think with confidence there are some people who are naturally confident, and always have been, and others that aren't, and you don't have to always feel confident to act confidently. So sometimes it's about body language, sometimes it's about breathing. Sometimes it's just about being prepared, and you might need to just think things through beforehand to be organised and prepared, that might help you feel a bit more confident.

**Dr Sarah White:** So share your tips for acting more confident.

**Kellie-Ann Jolly:** Just more broadly?

**Dr Sarah White:** Yeah.

**Kellie-Ann Jolly:** Being prepared and planning. Whatever it is that I'm going to do, whether it's presenting at a conference, whether it's talking at a meeting, just being able to think through beforehand what it is that you want to say, how clearly you can articulate and communicate that. So I think that's something that I do. The other thing is just to breathe beforehand, and just breathe, and think about body language, because often body language can give you away. So if you're slumping, if you're apologising before you say something and say, 'I'm sorry, but—'

**Dr Sarah White:** We're all guilty of that sometimes, I know that's a habit I had to get myself out of. We tend to do it as women sometimes, don't we? We start our sentences with, 'Oh sorry, but—'

**Kellie-Ann Jolly:** Absolutely, all the time. And so you really have to be careful that you're not saying that, because you shouldn't be apologising for the fact you're saying something. And you really do see this, I think, more in the healthcare space, too. Often we feel that we are taking up too much time of our doctor or our health professional, we kind of apologise for the fact we're even asking questions of them. So I think that's one thing that we really do need to be aware of.

**Dr Sarah White:** So these are really great tips. If you're going into the doctor, you are worried or you've had an experience before that you might be dismissed, and I think, sadly, for older women, that is often an experience that they have. So you are preparing for the consultation, taking notes if you need to so that you really stick on track to what you want to ask them about. You are communicating very confidently, even if you don't feel confident, you're saying, 'This is the issue.' Your body language, got your power stance, shoulders back.

**Kellie-Ann Jolly:** Chin up.

**Dr Sarah White:** Chin up.

**Kellie-Ann Jolly:** And making eye contact is really important

**Dr Sarah White:** Right, and you're not apologising, you are there to get the services you're paying for, right?

**Kellie-Ann Jolly:** Absolutely spot on. And I think with the preparation, particularly when you're going to, if we're talking about doctors or a health professional, really beforehand, thinking through, well, what is it that I really want to come out with here? What are the questions I really need answered? And just put them all down on a bit of paper, or whatever way, it doesn't matter if it's on your phone, on a paper, whatever way works for you. Go in with that, because sometimes we, well, most of us will forget. We get in there and we come out and we think, 'I should have asked that question.' Put it down as your cheat sheet, have it all there, and be able to, again, particularly with a GP, is to be able to talk about your own experiences, your own feelings, what you're experiencing, what you're feeling. Because that's something, the GP can't know what you are feeling and what you're experiencing if you're not able to communicate that.

So the more that you can take that in and be prepared, even if you read it, whatever works. Have a few little phrases up your sleeve that you can sort of say, 'Look, I don't understand.' If they're giving you information, 'I don't understand that. Can you please explain that in another way?' I had this example just the other week where I was at a specialist, and, very kind, he was giving me all the information in a very fast pace and in a very complex way about medication. I need to take it this much, on this day, every two weeks I need to change it, and I was just totally lost. So I had to say, 'Can you please slow down? I didn't get all that. Can you write it down for me? And is there any information you can give me to take away that I can have?' So those sorts of things.

**Dr Sarah White:** Now, a lot of people, though, feel uncomfortable saying that to a doctor, or to anyone, but certainly there's that power balance thing when you go and see a doctor. No matter how lovely your doctor is, there can often feel like that power imbalance. So how do you overcome that in your mind? How did you go, 'No, that's it. Just pause.'

**Kellie-Ann Jolly:** I think because for me, and I know it can be different for many people, particularly those who are perhaps having some issues with English, potentially, are new to the country, don't understand the system and not feeling confident and comfortable to be able to do that. And that's where perhaps a support person or someone you trust, you can take with you, who might be able to help you, not only with language, but also be able to listen to what's being said, and you can then discuss that with the person afterwards. Because often just going in yourself, you can't take it all in if you're not writing it down. It's sometimes great to have a support person. But how do you do that? I think it's just constantly coming back to, I want to be able to stay healthy, I want to be able to get a result here. How am I going to be able to do that if I don't understand, myself?

So just constantly keep asking those questions. It's supposed to be a team here. The relationship should be a team, not one and the other. So I think, continually, and the more you, I think confidence gains the more you do it. So even if you can just put it out there, courageous, have that courageous one question, and then realise, okay, that wasn't too hard.

**Dr Sarah White:** So what do you mean by a courageous one question?

**Kellie-Ann Jolly:** Well for instance, if you are being talked at or you are being told things—

**Dr Sarah White:** Lectured to.

**Kellie-Ann Jolly:** Lectured to is a very good way of putting it. If you're being lectured to or talked at about something and you're thinking, 'Oh, I really don't, I need to say something.' Just one question, even if you've got it written down, and you say, 'Help me understand this better. Can you help me to understand this better? Can you tell me this another way cos I don't understand it?' Whatever that one question is that you feel comfortable or that you think you can ask, if you can ask that one, and then you recognise it's not too hard, and it's okay, I didn't get the sort of funny backlash that I thought I might've got, or disregard.

**Dr Sarah White:** Cos in reality, you won't get a backlash, right? I mean, you can be worried about offending, but actually doctors, they're there because they're wanting to help people.

**Kellie-Ann Jolly:** Exactly right.

**Dr Sarah White:** And they're not going to get angry. And if they do—

**Kellie-Ann Jolly:** And they're human and, you're right, and they want to help. I think it's very hard for a GP to second guess if we are not able to ask those questions. So I think we both have to work together in that way.

**Dr Sarah White:** And certainly the buzzword, probably a bad way of saying it, certainly a key word that's always discussed is that sort of 'shared decision making'. And that's, I think keeping in mind when you go to see the doctor, right? We're actually supposed to be sharing the decision making, the doctor's giving me information on the medicine if you like. I'm giving information on my situation and how things are affecting me, and together we come to a decision or a discussion.

**Kellie-Ann Jolly:** Yeah, just like you might be having a conversation with a friend or somebody else. If you treat it that way, it's a very similar kind of relationship. It should be a relationship. So yeah, I absolutely agree with that. I mean I think it's with, yeah, because we do want to be able to come out feeling like we've been heard, we've been listened to, and informed enough. The other thing, of course, we are also considering what's being said to us, and whether it's a diagnosis or tests or medication, in the context of something that's a lot bigger in our life. So we should be asking things like, 'Well, how much is this going to cost?' 'Is there a priority here?' 'How urgent is these tests?' 'Can I do this one at a time or do I have to have them all done together?'

**Dr Sarah White:** That's really good advice actually, because often I think a healthcare professional says, 'Right, well, here's the list of things that you need to get', but if you actually cannot afford to get them all done at once, or you can't even, just, you don't have the time to travel to go and get them all at once, asking for that, that's a really great tip. I hadn't thought of doing that myself.

**Kellie-Ann Jolly:** Because you are living within a context of, a social context, and a financial context that you need to be able to ask that. So it's not just, and no way the GP is going to know that. So unless you ask those sort of questions, that might help you to then go, 'Okay, I can do this, I can do that later, and that's okay. It's not going to compromise.'

**Dr Sarah White:** 'This is the important thing I need to do now, and the other.' Okay. And so that suggests, too, that having a doctor that you're comfortable disclosing some of that context is important, but also the time. Now, time with the doctor is tricky. Should we be booking those longer appointments even though they cost a bit more? Should we be booking those so that we can provide that context as we need to?

**Kellie-Ann Jolly:** Yeah, and I think that's part of the preparation or the thinking through beforehand. Because once you start to look at, 'Oh my gosh, I want to know that, I want to know that, want to know all these things', think, 'Oh yes, I really do need a longer consultation.' Recognising that that may be prohibitive for some, there's a cost, as you had said, there might be an opportunity to look at bulk billing in some cases. But if we can do that, then it takes the stress out of the short consultation and trying to get those things done, from both sides, I think, from the GP and from yourself.

**Dr Sarah White:** Yeah, sure. That's been really helpful in terms of diving into healthcare, because I know that's a bit of a passion and a lot of what you do. What about confidence in terms of changing as we get older? Does it change? And is it always going, is it less? Is it more?

**Kellie-Ann Jolly:** I think it's different for different people. For me personally, I feel I have got more confident as I've got older, or whether I'm just better at portraying that I am.

**Dr Sarah White:** You've faked it so much, you've actually made it, Kellie.

**Kellie-Ann Jolly:** I actually believe I am. But I think it's looking at those things that are going to help you, as you age, feel that you have got some self-worth. And looking at your attributes, and looking at the things that you do well, and thinking, 'Okay, this is who I am and this is what I can do.' So sometimes you might be letting go of some things that have helped you just to keep very confident, feel confident in your life. You need to look at some new things in your life. So whether it's keeping active, keeping connected, trying out new things, so all those sorts of things.

**Dr Sarah White:** That's tricky, for example, for a lot of women when they retire.

**Kellie-Ann Jolly:** It is.

**Dr Sarah White:** Or, as I think you mentioned earlier, when children leave home, perhaps.

**Kellie-Ann Jolly:** Yeah.

**Dr Sarah White:** Your Identity does change, so you have to reconsider your identity.

**Kellie-Ann Jolly:** You do. Yeah. And that's why, I think I mentioned, it's a transition. I didn't say 'transformation'. For some, it may be, but it is a little bit of a transition in your life. So you might need to just think about, 'Okay, well what are the other things that I always wanted to do,' if you can, 'that I can start to do now?' Keep connected with others as much as you can. Get out there and—

**Dr Sarah White:** And that presumably helps build your confidence again, right? You've got that social group around you who are your cheerleaders.

**Kellie-Ann Jolly:** Yeah, yeah, exactly. And I think for me personally too, if I feel physically strong, I feel more mentally strong and more confident too. So I think sometimes, again, it is different. Find the thing for you, there's a range of different things. And it's going to take time, but I think that it's really important, and there is still a level of ageism around, so I think it's even more important for women, particularly, to continue to be able to feel that they're contributing, that they're being listened to, that they're being heard, and that they have a voice and they can continue to contribute.

**Dr Sarah White:** And we can certainly start small with some of the things that we do to build that confidence, so that we're very prepared.

**Kellie-Ann Jolly:** Yes, and I mean even, I was just reflecting the other day when we were talking about, if you're not feeling as confident going to your GP, for instance, and saying things. Try it when you go to the shops, and you've got a salesperson who's speaking at you about 'you must have that new whatever it is, and you must have it because it looks wonderful on you' or whatever, push, push, push, push, push. And then you, a moment of lack of confidence to actually speak up, you go, 'Okay.' You take it, you walk out the door and you think, 'Why did I do that? I didn't really need that.' So I think that some of those, but you wanted to say no, but you didn't, on that very, so—

**Dr Sarah White:** You have to practise a little.

**Kellie-Ann Jolly:** You've got to practise a little bit. With the tradesman, the plumber who comes to the house, who wants to do XYZ, and you're going, 'I don't want XYZ, but I'm going to have it anyway, I haven't said anything.' So there's ways you can start to practise that and then you get better at it.

**Dr Sarah White:** Kellie, do you think women find it more difficult to be confident when they're advocating for themselves, rather than maybe an elderly parent or a partner or a child? It sometimes feels like if it's someone else you're talking about, you can actually be a much stronger advocate for them. Do you think we, sometimes as women, because we're stepping back a little bit, we could perhaps pretend we are advocating for someone else, but it's really for us? Does that make sense?

**Kellie-Ann Jolly:** Yes. And I think that's a really good way of looking at it, because I absolutely agree. I think all, pretty much throughout women's lives, they're always thinking about other people. They're always caring about other people, they're very heavily invested, whether it's their parents, their kids, or whether it's friends or their partners. So they are always doing that. And so it's really hard then to be able to then think, 'Put yourself first', and to be advocating for yourself. I think that that is a really good idea, to actually almost play the part of someone, and I'm 'whoever', and I'm advocating on behalf of them, and not think about it as yourself. It might be a really good strategy to give you the confidence to be able to do that, because I think that most women would definitely be out there advocating for or asking questions if it relates to their children, or their partner, or their parents, if they're looking after. And that's what women do, all those areas. So yeah, great tip.

**Dr Sarah White:** Kellie-Ann, if you had one tip for women as they get older that's going to help them build their confidence, what would it be?

**Kellie-Ann Jolly:** I think the importance of the kind of conversation you have with yourself. So it's a bit of self-talk, for want of a better term. So before you approach something or a situation or an event, or if you're about to go into your GP, it's what you're telling yourself beforehand. So start to be more positive about the whole piece. So talk about, 'Okay, you can do this, you can do this, it's easy.' So it's that constant.

**Dr Sarah White:** 'You're prepared, you planned.'

**Kellie-Ann Jolly:** Yes, 'I'm prepared, I'm planned. What is there to be—'

**Dr Sarah White:** 'I know exactly what I'm asking.'

**Kellie-Ann Jolly:** All of that. 'I can do this. I'm okay.' So I think it's, because often we do the opposite. We are going, 'Oh my gosh, if I go in there, what are they going to think if I ask all these questions, I'm going to take up their time, they're going to think I'm silly.'

**Dr Sarah White:** 'They're going to think I don't know what I'm asking about.'

**Kellie-Ann Jolly:** All of that. 'I'm being difficult.' Whatever. Whatever the situation is, we immediately go to that. And I think women do that far more.

**Dr Sarah White:** And we do that across all aspects of life, really, too often, don't we? I mean, I know, in terms of self-talk, I absolutely use that professionally too. 'Okay, you got this, it's okay, go for it' kind of thing. That's what we have to take as we age because we're getting a lot of negative, I guess, things coming at us too. Or when you look at popular culture and how it represents older women, it's not always flattering. So that self-talk is helping to minimise the external environment to some extent.

**Kellie-Ann Jolly:** Yeah, and I think it just also just helps you to be in the right kind of mindset as you approach the situation. Because if you go into the situation in that negative or you're thinking negatively about it all, all the things, all the deficits about what might that person think of you, what you are yourself, immediately you're not walking into a, with a confident attitude.

**Dr Sarah White:** You're actually undermining your own confidence, right?

**Kellie-Ann Jolly:** Undermining your own confidence. You walk in, probably not even realising it, a little bit slouched, a little bit looking down. You're not necessarily eye contact. So all those things then are all linked. So the more you can have that sort of self-talk, and you just do it to yourself, you can do it in the mirror if you want, whatever works for you. That just, I think the whole experience then is going to be more positive.

**Dr Sarah White:** Alright, Kellie, thank you so much for your insights as Head of Partnerships and Engagement at Jean Hailes for Women's Health, and for an incredible, kind of, time and career that you've experienced. And I can't believe that you've faked it til you've made it because you made it, lady. Thank you.

**Kellie-Ann Jolly:** Thank you very much, Sarah.

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