

15 Midlife — a time for empowerment

*Shift the focus from meeting
other's needs to meeting
your own*



Midlife is a time when, if we have not already done so, we should learn to take as good care of ourselves as we do of others. We can do many things to help keep our minds and bodies in smooth running order before problems arise. We need not wait until we are sick to invest energy in ourselves and our bodies. We can start by simply devoting a bit more time to being in touch with ourselves, what we need, how we are feeling. We can re-think the habits that affect our health and make decisions about changing our lifestyle. The focus of this chapter is on applying the characteristics of balance that have been presented throughout *You Count, Calories Don't* to the passage through midlife and menopause.

The word menopause means different things to different women. For some, menopause is a process that begins at midlife and lasts for the rest of their lives. Other women think of menopause as the signs, such as hot flashes and night sweats, that they experience around age 50 as their hormonal levels drop. Actually, the word menopause refers to the end of all menstrual bleeding. While most women go through menopause between the ages of 48 and 52, some women stop menstruating as young as their late 30s or early forties, while others continue to menstruate into their mid-50s.

For most women, the process that leads up to menopause happens gradually, triggered by a slowdown in the function of their ovaries. This process begins 4 to 6 years before the last menstrual period and continues for several years after. During this time, there is a decrease in the estrogen production from the ovaries, finally dropping to such low levels that the periods become irregular and finally stop entirely. For some women this change to a new hormone level is easy and uneventful. For many women, however, the change comes at a time when other events going on in their lives combined with the physical signs of menopause lead to unhealthy levels of stress.

The social and cultural factors occurring before, during, and after menopause may be quite stressful. Menopause can be a time when children leave home

and move away, major career changes are made, and marriage ends in divorce or starts anew. Often the caring for older parents or a disabled family member falls on the shoulders of the 45+ woman. It should be no surprise that these issues have been found to have a much bigger impact on the mental and physical health of women than the hormone changes of menopause do.

Since many of these changes are unavoidable and out of our control, the extra weight which most women naturally gain at menopause may cause women to attempt to exert control over their bodies by dieting to lose weight. We seem to forget that genetic factors play an important role in body shape, and that this weight has been shown to help protect women's bones from thinning too fast and lessens other signs of menopause such as hot flashes. We also seem to forget that dieting leads to increased levels of stress, and a return to food and weight preoccupation.

At this point in time it becomes particularly important that women understand the unrealistic pressure society puts on women to be ultra-thin. Women need to learn to appreciate and accept their body as it is and not strive for some unrealistic goal. To create healthier alternatives and counter social pressure to be thin, we can learn to celebrate our diversity and love our bodies. In doing so, we hold the power to push public consciousness. There is not a moment to lose. Our daughters are counting on us.

The transferable characteristics of balance—the qualities that sustain a nondiet life-style also facilitate the passage through menopause.

During the hectic early years of adulthood we may have completed our education, started families, raised children, and established a job or career. This can leave little time for our own needs. The changes of midlife encourage us to take stock of our lives and remind us to take care of ourselves physically and emotionally. The following application of the characteristics of balance that have been presented throughout *You Count, Calories Don't* to the passage through menopause will help you stay healthy at

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midlife and beyond.

Balance (and the peace and harmony this state implies) is a lifelong search that evolves with changing life circumstances. What's interesting is that the personal qualities that you acquire throughout your life journey power the small action steps that will enable you to move from one goal to another. Acquiring each one of these qualities is not a goal unto itself. The naming of the quality enables you to see "what you are made "of and how that strength can create your personal action plan for change. As you recognize that you already have one or more of the qualities for balance you'll be encouraged to look for the new ones to put into your personal repertoire. Each action suggestion that arises from the identification of the personal quality is transferable to life circumstances involving the need for change. Sustaining your nondiet life-style, developing your own business, nurturing the growth of your children or encountering the realities of midlife changes are all examples of these kinds of life circumstances. As you read through the steps, claim your personal description. For example, if you are one of those remarkable people who can plan systematically, look at what you will be able to gain from applying that quality to your personal midlife issues. Put up a mirror to past behavior and discover that you do have the "right stuff" to move forward in acceptance of midlife changes.

The quality of courage . . .
helps with your acceptance of your changing body size and shape.

KNOW WHAT YOU WANT

Dig deep, find a name for your personal desire, and be definite with that name. Many people think weight loss will bring happiness, self-esteem, self-acceptance, health, energy. Naming these items defines what they truly want — diets and weight loss aren't the route to achieve those desires.

At midlife we have the opportunity to expand our choices, to reach out for new, possibly long delayed experiences, to create lives that reflect our values and desires. The fact that there are large women who seem to truly accept their bodies challenges the conventional assumptions that one cannot possibly "accept oneself" without being slender. One woman tells about the difficulty and value of making the

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effort to accept her body:

“I think it takes courage to go against the norm established by society. I think the effort that goes into dieting and self-abuse over being fat should be converted into frank self-examination. Fat can provide a convenient excuse not to be or do all you want. Deciding to accept yourself as a fat woman frees you to find out who and what else you are. It isn’t easy to reach self-acceptance. Everything in our society is aimed at women being discontented with their bodies. Without the help of supportive friends and/or family and help from the size acceptance movement, it’s very difficult to be objective about our weights. It’s important to do all the things about which you say, ‘I can’t do that until I lose weight.’ You’ll discover that you can do many of them without weight loss. You’ve got to take risks . . . not accepting your body is the craziest form of self-denial I can think of.”¹

And some further comments . . .

“I’m tired of being Sisyphus and rolling the weight-loss boulder up the hill over and over. I’m accepting my body having been the innocent victim of society’s torment. I want to love it, not hate it. I have finally grown to love my body and respect it. What’s changed is a shift from knowing I ‘should’ like it to internalizing that belief and truly believing it. Years of affirmations, therapy, massage, dancing, moving my body, and doing other positive things to improve my self-esteem have helped. I gave up the false belief that I was a victim, not fitting in anywhere. My body is beautiful in its curves, softness, and roundness and has the right to fit in all kinds of spaces. I used to think I didn’t have that right.”¹

*The quality of
integrity . . .*

**provides you with
effective coping
strategies for hot
flashes.**

NETWORK AND GROUP

Broadcast and stand up for your message. Express your true feelings publicly to your family, work or social groups, or in a support group. All of us benefit from an understanding of menopausal changes, and from being able to talk openly about the feelings and experiences that accompany these years.

In folk wisdom and humor, hot flashes are the sign most commonly associated with menopause. Surveys report that anywhere from 47 to 85 percent of women

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will experience hot flashes. Many women never experience hot flashes at all.

For most women, a hot flash or flush can be nothing more than transient sensations of warmth. For others it is “perpetual summer.” Some women report their hot flashes are pleasant. Some women experience waves of heat and drenching sweats, often followed by chills; some experience chills first. Feelings such as tension, anxiety, heart palpitations, and nausea may also accompany hot flashes or may be preceded and be relieved by the hot flash.

Hot flashes can begin when menstrual cycles are still regular or when they are becoming irregular. They typically continue for less than a year after the final menstrual period; however, for some women they persist for 5, 10, or even more years. Generally, the body gradually adjusts to the lower level of estrogen and, for most women, the hot flashes stop or become infrequent.

To take care of ourselves during this period, some medical knowledge certainly helps. But the experience we have accumulated during 50 years of life is equally important. So are the experiences that other women have had and are willing to share with us. Self-help techniques for hot flashes that come from women who have shared their experiences and wisdom include:

- *Keep track* Chart your hot flashes in relationship to your menstrual periods and other events to see if you can find a pattern. The more you know about yourself, the better you’ll be able to manage your hot flashes and the better you will feel.
- *Keep healthy* Some women have found that caffeine, alcohol, sugar, spicy foods, hot soups and hot drinks, and very large meals may trigger hot flashes.
- *Keep moving* Activity relieves hot flashes, stress, and depression, and helps you sleep better.
- *Keep cool* Dress in layers. Clothes made of natural fibers may be more comfortable than those made of synthetic material. When you feel a hot flash starting, take off some clothes. Go to a cooler spot, stand by an open window. Relax, take a few deep breaths. There

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*The quality of
patience . . .*
**enables you to
accept the
natural growing
transitions in
your family.**

is no reason to feel embarrassed.

- *Keep talking* Break the taboos against menopause. Stay comfortable by letting people know when you are having a hot flash and reaffirm that it is nothing to be ashamed of. Use positive, not demeaning humor. Tell household members or co-workers what is happening.

Talking with others, sharing our experiences and feelings, acquiring knowledge about how our bodies are changing, and giving each other support eases our “change of life.” A group of women coming together in a menopause support group or workshop to learn from one another in a respectful, informative, and supportive setting, can effectively counteract fears and uncertainties with support and information. By talking with other women we will continue to discover and exchange new self-help methods.²

ENJOY THE PROCESS

Measurements of time are not relevant if continual change and growth is occurring. The journey to lifelong better health is just that. There is no destination in mind, but a continual and maintained state of well-being — personal harmony.

Our bodies change continually throughout life. Our roles and relationships change too. Menopause is one of these changes. While passing through menopause might bring doubt and difficulties, it is a bridge to the second half of life — a potential “Second Adulthood” often ushered in by a flourish of new vitality. Many women report feeling more confident, empowered, involved, and energized than in their earlier years.³

The years that coincide with menopause are years rich with awareness gained through experience. Women arrive at their middle years wiser about the world, people, and themselves. Most now know their strengths and their vulnerabilities, and feel more confident and self-accepting. We are entering our peak years for participating in the workplace and in the community.

The quality of generosity . . .
creates a delegation system to support your short-term memory.



The quality of systematic planning . . .
offers you building blocks for the new habits to combat lack of focus and concentration.

CREATE WIN/WIN SITUATION

Discover how to enable. Understand that you don't need to be perfect or always responsible. A situation that is a barrier to growth may not require change on your part; but an acceptance of the approach and style of the other people in the situation. Be yourself and understand that others will be themselves also!

Taking care of ourselves requires certain life-style decisions: to eat well or not, to exercise or be sedentary, to stop smoking or give up the battle, to delegate or delete routine tasks, or to strive to meet perfectionist standards. We live with many competing pressures, doing the best we can under our own circumstances. We need to have faith in ourselves to be able to live with our compromises.

A perfect tool to combat the short-term memory loss that sometimes accompanies hormonal fluctuations in the premenopausal stage is the art of enabling. Pass it on! We often carry too long a list of to-dos that can be passed on to family members, friends, committee members, or peers at work. A common objection to this passing on of "power and control" is that the delegatee is resistant. Sometimes this occurs because we fail to pass along the secrets to doing the task successfully along with the task. We transfer the task but not the confidence to do the task. When we are generous with what we have learned, others become able to take on some of our responsibilities lessening our memory load.

Another good idea for overload prevention is the one step at a time. Wait until each aspect of a delegated task is being comfortably handled by the new doer before adding new elements. Realize that you need not be all things to all people. Learn how to let go of multi tasks so that you are able to focus on the task at hand.

SET GOALS IN STEPS

This is the tested and true way to meet objectives. A permanent life-style change won't be accomplished overnight. Setting too many enthusiastic expectations will overwhelm — one step at a time.

There are no magic wands or potions for good health, no fountains of youth, no products that cure all ills, no vitamins that prevent all ailments. A wellness program requires effort, planning, and persistence, but it is an investment that pays back with unbelievably high interest. When we feel good we are more likely to exercise, eat well, and take care of ourselves, all of which in turn are likely to make us feel better. Thus we create the Healthy Living Cycle (p55).

Habits are like the backbones of our lives — the firm structures upon which we can rely. It helps not to have to think about every step we take — to have comfortable routines in our lives. But as we grow older, some habits may no longer serve us well. The morning mad rush routine that helped us get ourselves and a whole family off to school and work may no longer be necessary. We may be happier and calmer with 15 minutes of quiet meditation before starting our day. Illness may require us to change from a vigorous exercise program to a more gentle one. Or we may be inspired by new information or changes in our lives to pay better attention to ourselves, to pursue renewed health and vitality by dramatically altering our pattern of health habits.

A “clean slate” approach may be your style of change, and can be very helpful when you’re ready. A gradual approach may be more successful for many of us. You may want to begin with a single change. Identify the roots of the problem. Ask yourself these questions:

- When did I first establish the habit?
- What need did it serve then?
- What need does it serve now?
- Can other habits provide more satisfaction?

Become aware of your real needs — for example, when you reach for a cigarette or coffee, you may be looking for a relaxing break or sociability. Fulfill them directly and in healthier ways.

Make changes in small, manageable steps. Many habits interact, so changing one may help you change others that are harder to break. For example, if you are trying to quit smoking, drink milk, fruit or

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The quality of honest analysis . . .
assists you with your hormone replacement therapy decision.

vegetable juice, or herbal tea instead of coffee to break the coffee-and-cigarette association.

No matter which approach you choose, take on changing a habit when you feel strong and have no other major issues pressing on you. But watch out for procrastination. When you feel overwhelmed, call a friend, change environments, if possible, or vary your activity. Get support from others to help you in your new behavior. Form a partnership with a friend to support each other's new habits.

LEARN FROM SETBACKS

Today's hindsight is tomorrow's foresight. Periods of binge eating, dieting, back to the scale, etc. are to be expected when embarking on a change. If you have been doing these things for years, it's unrealistic to think habits can disappear overnight. The key is to analyze what set off the incident and try a different approach next time. Be gentle to yourself.

This may be a time in your life when you first need to make a decision whether or not to go on medication, that is, whether or not to take hormone replacement therapy. If you decide to do so, the process involved will be one of experimentation to find the right combination and amount that is right for your body. The first thing you take may not relieve your symptoms, or if it does, you need to weigh out the facts to determine if it is safe to remain on it on a long term basis. There will be pros and cons to the decision and the benefits need to outweigh the risks of the decision.

You're already acquiring the ability to tune into hunger and fullness. You can draw on this skill for this situation as you learn to tune into the signals your body is giving you about the level of medication that is working for you. Also, the decision you make may only be for a short term in the initial stages of hormonal fluctuations until you find a new balance. Your symptoms, how you feel, and the risk/benefits will be your guide. Be honest with yourself in how you feel. Be careful not to think you feel the symptoms because you know that these are the symptoms of this stage of life. Pay attention to what you really feel, not what people may tell you that you

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will probably feel.

Allow yourself to learn from setbacks. If your choice of medication doesn't work the first time around, be willing to persevere and try again. If your symptoms are manageable, your choice may be no medication. Determine if your symptoms relate to your hormone level or just the busy midlife stage of life you are in. Make adjustments in your life-style to accommodate some of these facets of the new you and then see if the symptoms remain or go away.

Be honest with yourself . . . part of the old you may be going away and the process of grieving during a time of loss is quite normal. Recall the universal pattern of the grieving process:

1) denial, 2) anger, 3) bargaining/negotiating, 4) depression, and 5) acceptance. Recognize which stage you are in and work through each stage on your own time schedule until you arrive at acceptance. Are you denying that you are getting older? Does it bother you or make you angry? Are you re-assessing your life situation? Are you trying to find ways to get back those younger years? Does it depress you? Or have you arrived at the point where you are ok with it; the point where you will openly find information that can help you feel better and make the best of your health and genetic predisposition to disease?

Weigh out the facts, be realistic, take off those rose colored glasses and do a frank examination of what is right for you. You already may have worked through this process in acceptance of changes in your body; now apply them to midlife and the changes you may need to make. One of your decisions is whether or not to take hormone replacement therapy. And do realize that whatever you decide is not written in stone; you can always return to doing what is most natural for you.

*The quality of
perseverance . . .*

**supports you
through the
unfamiliar
episodes of
memory lapse or
fuzziness—it will**

HANG IN THERE WITH AN OPEN MIND

Just the right time will emerge. Think of a growing child — they have their own internal state of readiness. A time to crawl, a time to walk, a time to read, a time to be independent in other ways. Review your own progress.

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Realize that short-term memory loss will improve in time. Hanging in there and simplifying one's life and tasks will enable you to ride out the waves and minimize frustration. In other words, if you find that it's hard to hold everything in your head and the thought is gone as quick as you got it, then pick up a helpful habit of keeping lists and notes and relish in those check marks that indicate a job is done. Write down everything, even the little things that you used to be able to keep in your head. This new method will help you to slide through those memory lapses with ease.

Hang in there with an open mind. There are 2 ways we can respond to what we are doing: point out what's wrong and how it should be righted, or affirm what has already been accomplished and point out what else can be done and why. Why do we so reflexively choose the former? The "diet mentality" believes that we need to be hounded to change, to be hammered with rights and wrongs. In the Healthy Living Cycle (as illustrated on p55), we reward ourselves for every step, and encourage ourselves to relinquish our own whip and appreciate ourselves.

The quality of conversation. . .
educates you
about your
osteoporosis risk.

PACE YOURSELF AND GO WITH THE FLOW

Focus or tunnel vision? Watch the road signs. When trying out a new physical activity, pace yourself to work at a level that is leaving you energized, not exhausted. Be careful of going into an activity too full force and then conking out. Relax and feel the enjoyment of the activity.

Chapter 3 discussed the benefits to our physical and emotional health that walking provides. At midlife other benefits of walking, such as an opportunity for socializing, conversation, exploration, and meditation, take on increasing importance.

With a lot of exercise, we know it's good for us so we force ourselves to go out, then can't wait to get home. But with walking, we can listen to self-improvement tapes, learn a language, sightsee with friends, including the family. Now that we know we needn't overdo to get worthwhile results, we can look forward to our walks.⁴

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One way to enhance the relaxing effects of a walk is to walk mindfully. Walking can lure you into a general state of awareness — a kind of moving meditation. Mindful walking allows you to live in the moment, to notice and enjoy things, whether it's your own breathing or a hummingbird feeding at a flower. By listening to nature, we are also reconnecting with ourselves. On a mindful walk, you don't concentrate on the finish line, but on every step along the way.⁵

Weight-bearing activities such as walking, jogging, and dancing not only provide a relaxing detour from your everyday routine, they play an important role in reducing the risk of osteoporosis. Osteoporosis is an issue closely associated with menopause because of the role that estrogen appears to play in protecting bone strength in women. A slow loss of bone density is a natural part of aging in women and men. In women, however, loss of bone density speeds up during the 5 to 6 years immediately following menopause then slows again to the same rate as for men of that age.

In North America one woman in 4 over age 65 is affected by osteoporosis. The effects of osteoporosis can be painful and serious. Bones anywhere in the body can break, but the most common are the hip bones, wrist, and spine.

At this time there is no way to be sure who will develop osteoporosis, but certain factors are known to increase risk. The more risk factors that you have, the more likely you are to develop osteoporosis after menopause. Risk factors for osteoporosis include:

- *Genetic factors* If your mother or sister has osteoporosis you have an increased risk of developing it. Caucasian women, especially those who are fair skinned, small boned, and from a northern European ancestry are also at greater risk.
- *Nutritional factors* Our bodies use calcium for bone formation but calcium has other functions as well. When calcium levels in the blood are not high enough to carry out these functions, the body takes it from bone. An eating pattern low in calcium increases the risk for osteoporosis. In some studies, heavy intake of alcohol and caffeine has been



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associated with decreased bone mass.

- *Low body weight* Some body fat is necessary for the production of estrogen — the predominant type of estrogen in post menopausal women — which seems to provide some protection to bone density. Estrogen starts as a hormone substance produced in the adrenal glands and is converted into estrone in the fatty tissue of our bodies.

- *Smoking* Cigarette smoking slows estrogen production and reduces the protection against osteoporosis. As well, women who smoke tend to have an earlier menopause than those who don't smoke. Studies have shown that menopause tends to occur one or 2 years earlier, on average, in women who smoke. The earlier that menopause occurs, the greater length of time a woman will spend without the protection of high estrogen levels.

- *Inactive life-style and little exercise* At all ages exercise increases bone mass. If you are physically active you will have greater bone density and muscle mass than if you remain sedentary. Exercise affects bone by straining the muscles which support the skeleton. The muscles in turn put stress on the bones. Like a see-saw, muscle pulls on bone and bone resists. This resistance strengthens the bone. Without this kind of regular exercise, osteoporosis is more likely to develop.

Estrogen therapy will prevent rapid loss of bone density at menopause. Women with many risk factors for osteoporosis may want to use estrogen therapy to help prevent osteoporosis. Remember that when you stop the estrogen you will then lose bone density quickly for a time. Compare the risks and benefits of long-term estrogen use to decide what is best for you. You may find it helpful to discuss your own risk factors with a dietitian, physician, nurse practitioner, or public health nurse.

The quality of flexibility . . .
lifts a depression
with an
overcoming
approach to
roadblocks.

AVOID ALL OR NOTHING THINKING

Options are always available. Remember how that old diet thinking went — “either I will eat ‘perfectly’ and faithfully follow my diet or I will not be on it at all.” Realize you’re human and perfection in eating or any other life activity is not a realistic goal.

A friend and colleague was recently struggling with her decision to leave the dietetics profession and return to school to train for a new career. As the time for her course to begin grew closer, it seemed that more and more life events were occurring that threatened to overwhelm her. She was undergoing a course of radiation therapy for breast cancer that would overlap the starting of the course by 5 weeks, her mother was scheduled for surgery 6 weeks into the course, she had 2 teenage children who required her physical and psychological presence, and her husband was very busy with his work and hobby life. My friend considered delaying returning to school until the following year, but soon realized that she could, in fact, move ahead in her career aspirations this year by letting go of the idea that she had to be a “perfect” student.

She could still attend classes most days, would be able to do well enough on the assignments and tests, and would still graduate with a recognized credential even though she was not a “perfect” student. Recognizing when you need to let go of unrealistic standards in order to get to where you really want to go can be a lesson well learned in midlife.

There is a popular belief that women become prone to depression at menopause but research shows that depression and anxiety are no more common in women at menopause than in any other group.⁶ A few women do describe occasional, inexplicable emotional changes at this time. It appears that a combination of hormone changes and life events may be the cause.

Some women report temporary mood swings, irritability, or a “cotton head” feeling during the premenopausal stage when hormone levels are fluctuating and readjusting. This will likely pass when cycling ends. As well, sleeping patterns often change at midlife. If your sleep is interrupted by night sweats, hot flashes, or wakefulness, make time to rest during the day.

While the middle years have the potential for growth and enhancement, statistically many significant losses,

YOU COUNT,
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DON'T

The quality of regularity . . .
inspires you to start the premenopausal care routine that is an investment in your future body.

The quality of good listening . . .
offers you the potential for close friendship and support.

such as an illness of our own or a loved one, job loss or change, widowhood, or death of others close to us, may cluster in the years between 45 and 59.

We may find ourselves feeling resentful about some of our roles. Our anger may surprise us and those around us but it can often be a healthy recognition of a situation that needs changing for our emotional well-being. It is more helpful to recognize these issues and to talk about them than simply to blame our hormones.

CONSISTENCY

Remember who won the race between the tortoise and the hare. Focus on small, gradual changes maintaining regularity and consistency in the approach. Making too drastic changes (i.e. cottage cheese syndrome on p129) can lead to abandonment of your new life-style.

Many people concern themselves with retirement planning and act to ensure financial security in later years. Yet in our culture it is not yet habitual to plan carefully for a “savings account” of health and fitness— to act as if “investing” in one’s future body.

People who are consistently, permanently inspired to care for themselves have the conviction that the body is precious and worth their investment. You don’t treat precious things badly, only things you don’t think are valuable. If you are deeply in touch with how precious you are, you won’t want to mistreat the package you come in either. If you value yourself and the body you come in, looking after your physical, emotional, and spiritual needs is an instinctive course of action.

We live in a society that values the quick fix and the slick package. However, as with financial investing, little can be done to suddenly turn a meager investment into instant fortune. Health and fitness — like savings accounts — are built consistently, not suddenly. And it’s consistent self-care, not money, that represents investment in your body.

OPEN TO COMPLAINTS AND CRITICISMS

Don’t make the mistake of assuming that you know what will be said; active listening is full of surprises.

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No one should be without a friend. There are all sorts of opportunities at work (paid or volunteer), in educational settings, in social situations linked to work or club membership. Why, given all these opportunities, do some women still feel friendless? Part of it may be the low level of self-esteem that follows from being housebound. Some of it is sheer lack of experience in nurturing friendship. Some of it comes from a misplaced reticence about “personal matters.”

Comments and perceived criticism of your size or your chosen way to better health may be received when you have a nondiet life-style. Pay attention to the detail of these kinds of remarks. Recognize that remarks about your personal appearance are actually rude and unacceptable. If a person close to you is critical, you have an opportunity to re-educate them about your new health goals.

It is difficult to become intimate with a woman who avoids self-disclosure. It is impossible to complain about one’s own husband to a woman who admits no flaw in her own, to express outrage about one’s children to a woman who appears to have perfect offspring, to mutter about the ceaseless demands of an aging parent to a woman who is a Florence Nightingale. Perhaps such women feel that to admit to a problem would be to lower themselves in the eyes of others. Frankly, I find such attitudes a barrier to friendship. How wonderful to have a woman friend who makes no judgement calls, who allows you to unload all the anger, disappointment, and spite, and who is never surprised to find that after all the anguish, you’ve forgiven and forgotten by the following day.⁷

Menopause gives us an opportunity to strengthen old friendships or to forge new ones — friendships that will stand us in good stead in the years to come when many of the men in our lives will have passed on.

*The quality of
assertiveness . . .
combats sleepless-
ness and anxiety
as you learn to say
“yes” to you.*

PRIORITIZE AND BE PREPARED TO SAY NO

Often the “no” to others is the “yes” to you. The influence of the diet industry and the cultural icon of thinness is still very

strong. You will be challenged in the art of assertiveness as you present an alternative to diet and weight loss. Your priority is health. Realize that learning to say “no” will build in the “pause” which will keep your life-style in balance.

Sally, a HUGS participant in rural Canada, wrote in her journal:

“I am the mother of 2 boys, aged 10 and 7 years, have been married 13 years to Bob, and have been a public health nurse since 1980. I work full-time with a 45-minute commute. Bob has in the past 4 years been attempting to adapt to not farming. He began farming at 14 years when his dad was dying of cancer (quit school) but recently due to changes in agriculture has become a partsman at a farm equipment dealership. He is at times very sad and bitter. I have no physical activity due to no time — very busy with full-time job, commute, and unhappy man who still misses farming deeply. We eat meals at the table and are learning the purposes of food but the message from media and peers is strong. The kids sit in front of the TV too much — while I try to catch up with life.”

In responding to her journal, I congratulated her for taking the time to stop, look back, pay attention to her needs, and attempt to make some positive changes to make her life more enjoyable and made the following points in my response to her: “You seem to be rushed so frequently and that may be due to your difficult and demanding schedule and your role as a mother, wife, commuter, public health nurse, and provider of meals, laundry, cleanliness of house, etc. etc. etc. No wonder you are tired many times. On top of that, living with perfectionism is very very hard. Have you ever tried to talk to your husband about women’s roles in the 90s, sharing tasks at home, how hard it is to fit in all your chores, workload, and still somehow squeeze in time for yourself? If Bob is feeling sad about his transition in work from farming to working at a dealership and you are feeling sad and frustrated because there is too much to do and too little time, one way to relieve the burden of sadness is to help each other out. When a person is able to help someone in need, it makes

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*The quality of
resourcefulness . . .*
**breaks down the
barriers to change.**

both the receiver of the need and giver feel better . . . the receiver because she/he relieves some type of pressure from the individual; the giver because they are helping someone out. How about using the assertive technique in Chapter 12? How about saying to Bob, I know you feel that I need to be preparing all meals and my time is limited with commuting and a full time job, so perhaps I could do some advance preparation the night before and you could pop it in the oven and start the vegetables at 5:30 so it's ready when I come home. It seems you are caught in the role of "people pleaser" . . . please the hubby in keeping house as perfectly clean as you can get it, having supper ready, taking care of the boys and the homework, and listening to his woes. Compromise with little changes instead of assuming all responsibility.

Stretch your imagination to new heights of possibility. If your life-style situation is uncomfortable with regard to workplace, home or social life, recognize that changes can be made by you. Identify what is making you uncomfortable. Start taking small risks in the way you relate to others. If you have longed to do something, what is holding you back? You don't have to quit your present job to request information about a new career direction. And you don't have to stop being active because you are afraid to fall on the ice again while walking outside during winter.

IDENTIFY OPPORTUNITY

Now is the time to experiment with new activities or revive those old activities that you used to enjoy. It's a time to prepare and strengthen your body and bones. You want to retain your independence as you get older rather than depending on someone else to do those simple tasks of everyday living. Observe others in their 40s and 50s who have been on skis for the first time in their lives or are taking up aquacise and boogeying to the music. Watch the way their bodies move and the smiles on their faces as those endorphins kick in. In some cases, they are merely transferring skills they already knew and picking up a few new ones along the way.

Many of us become so used to caring for others and helping others achieve that we lose sight of our own

YOU COUNT,
CALORIES
DON'T

goals or never get around to formulating any. In the second half of life, many of us have an opportunity to pay attention to ourselves and our own needs and aspirations, perhaps for the first time. The added years we gain with increased longevity can be ours to grow spiritually and intellectually. Midlife is often spoken of by women in metaphors of birth and rebirth, a time to nurture our own talents, casting off the external criteria by which we may have devalued ourselves and blossoming in new ways.

Once the menopausal transition is complete, a woman enters a new state of equilibrium. Her energy, moods, and overall sense of physical and mental well-being should be restored, but with a difference. It is a time when all the wisdom a woman has gathered from 50 years of experience in living comes together. If we think of our future years as providing an opportunity to develop our creativity, our passions, and our activism, we can look forward to our older years with confidence and enthusiasm.

