

Moving into menopause

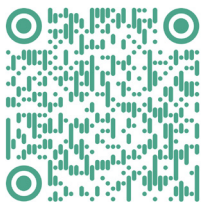
a conversation guide

**for small groups
in faith communities**

Background

This conversation guide is one output of a research project by Dr Emma Pavey at the Susanna Wesley Foundation. Based on an interweaving of literature research, action research and ongoing conversation, she aims to raise the profile and lower the awkwardness of conversation around perimenopause and menopause, reflecting the fact that it is part of the lived experience of a large percentage of people, and possibly even the majority of people in churches and other faith communities. This then opens up opportunities for theological reflection that serves those experiencing it, those supporting them, and the wider community. The sections of this guide were among the themes that emerged from the research.

Find out more about the project, its outputs and impact here: <https://susannawesleyfoundation.org/menopause-and-theology-research-project/> or via the QR code.



Content and graphic design by Emma Pavey for the Susanna Wesley Foundation.

Contact SWF@roehampton.ac.uk for paper copies of this booklet. Visit susannawesleyfoundation.org for electronic copies and facilitator guide.



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This conversation guide is designed for small groups in faith communities. These could be support groups for those going through perimenopause – indeed, a lot of the guide is aimed at those in perimenopause. However, they might also be intergenerational groups of women sharing stories or mixed small groups where men, young people and others can listen in and learn together, exploring the theology of this common and profound experience.

The move into menopause can be an emotive subject. In any type of group, take time to establish how you will listen to each other. Consider any other **guidelines** that are needed for a sense of welcome and belonging. For example, you might agree to only offer advice if it is requested. We recommend you make the most time for hearing from those who are in female-bodied perimenopause and encourage you to explore the further suggestions in the **facilitator guide** that accompanies this conversation guide.

The guide is divided into six sections: **Context, Narratives, Control & Agency, Loss, Grace, and Justice & Inclusion**. Each topic is broad and there is a lot of flexibility built in to allow the discussion to be shaped by the participants in the group. You may want to tackle one section for more than one session, and you do not have to tackle them in the order they are presented. You might also want to create your own further topics for discussion as this guide is only the beginning.

Introduction

Context

Perhaps you are going through perimenopause, will in the future, or have already moved into menopause. Perhaps your daughter or mother is going through it, or your wife/partner, your minister or your boss. Do you hear more about perimenopause and menopause than you used to? Why do you suppose that is?

Look around the communities you are part of, and your faith community in particular. How many in those groups will go through, or are going through, or have gone through perimenopause into menopause? The move into menopause is a far more common female body experience than biological motherhood and is thus far from a marginal, niche topic. Compare these observations with the frequency with which you hear perimenopause or menopause mentioned in your community and in its stories.

Two generally accepted definitions before we go further.

The term **perimenopause** refers to the years leading up to menopause when one might experience irregular, heavy periods, hot flushes, anxiety, rage, and so on. This can last from a few months to ten years. In the case of moving into menopause due to surgery, there may be no perimenopause.

One is in **menopause** when one has not menstruated for a year, and the body can take a few more years to adjust to new hormonal levels and ways of being (depending on whether one takes hormone replacement therapy (HRT)).

Questions

- Where do you get your information about perimenopause and menopause from? Where did your mother or grandmother get her information from?
- How often do you hear talk about perimenopause and menopause in your faith community? What do you make of this, given how common an experience it is?
- If you are not someone who will go through the move into menopause, how do you feel about it?
- Do you think it is important to talk about perimenopause and menopause in faith communities? Why or why not?

“Oh, gosh, no, I wouldn’t have [told anyone I was in perimenopause]... because in the church, as a woman... you’ve still got to prove that you can be as good as a bloke... I think you would be perceived, possibly perceived, as less capable.”

Research participant (minister), SWF research project

The term ‘menopause’ was invented by French doctors in the late 18th century. They recognised the untapped market potential of medicalising the experience, drawing women away from traditional (usually female) folk healers.

See Downham-Moore 2022

Questions

- Mayra Rivera writes: “we belong to the same world but we inhabit it differently” (2015: 156). How do menopause narratives intersect with those about race, ethnicity, dis/ability, gender, religion, poverty, migration, violence, and so on?
- What does it mean to listen to the stories of your own body?
- Do you believe that God understands the experience of moving into menopause? If so, how?

The experience of moving into menopause is influenced by narratives; that is, the stories we tell about it. In faith communities and in society we hear messages about all sorts of topics that impact the way we think about perimenopause and menopause. Consider together the stories you are told about the female body in words, in art, in theology, and in your places of worship.

What is attractive, what is clean, what is pure, what has value or purpose, and what is normal? Why are these characteristics considered important?

Particular perspectives on ageing and youth, (in)fertility, decline and death, and how we should control or manage our bodies in public also impact our experiences. Take some time to find examples.

Female bodies are created to go through perimenopause and menopause, so these experiences are **not diseases**, and yet you might often hear words like ‘symptoms’ and ‘imbalance’ used in relation to them. As the quote from Joyce and Mamo on the opposite page suggests, we must add messaging around medicalisation, economic productivity and capitalism to our list of narratives. This is *not* to be read as opposing medical assistance such as HRT during perimenopause or menopause. Rather, it is an encouragement to think deeply about the ‘why’ of these decisions, unearthing the influences that surround you and recognising where they come from.

You might explore to what degree you can use your created free will to choose and claim the stories your own body tells you and the ones that bring you life.

Narratives

“I know that I’m experiencing something that is a very, physically is a, is a female thing to experience. Therefore, I need God to be a God that gets that.”

Research participant; SWF research project

“What was once healthy is today... in need of anti-ageing therapies... The expansion of disease categories... is part of a corporate-profit system that fuels and financially benefits from the ever-expanding notion of illness (into wellness).”

Joyce and Mamo 2006: 104

“We may know that it is true that increased anger and rage can be caused by hormonal shifts... and yet also feel it to be true that the rage is deep self-expression... Both ‘truths’ [can exist at the same time].”

Pavey 2025: 9

Control & Agency

Let's dig deeper into some of these feelings you might have about perimenopause and menopause, beginning with the sense of control and agency.

Menopause **cannot be avoided**, assuming you live long enough. In menopause, you ultimately lose the choice and capacity to bear children and your bodies will never be the same, regardless of whether you freely choose the dependency of taking HRT or not. This experience is a weighty transition, out of your control, that life rarely allows the time and space to process.

Another challenge to your sense of control in perimenopause is its **unpredictability**. You may experience startling hot flashes, brain fog, impossibly heavy bleeding or any number of other manifestations at *any* moment. You may feel as if you have lost control of the appearance and behaviour of your body at a time when you might be busy with family and/or career. Take a moment, then, to consider your relationship to feeling in control (or not) and how that feels in your body, both alongside the way you are expected to present yourself to the world and alongside your faith and what that teaches about control, faith and trust.

You might consider here too the impact of the stories you are told about what counts as **'strong'** and **'weak'**. Discuss how these impact your perception of a loss of control and your understandings of free will and agency.

“These changes within the body, the fabric of the woman, are experienced by her but remain invisible to the world at large. How can she reestablish control, bring her chaotic being back into some semblance of order? These events must take place at the periphery of her being... To deny and repress may be the obvious solution, maintaining her clean and proper demeanor at the cost of denying the transitions that are taking place.”

Rogers 1997: 233

Questions

- What stories from scripture might help you in thinking about your relationship to control?
- How does it feel to imagine inhabiting your unpredictable, created body with hospitality rather than trying to domesticate it?
- Where might you have an opportunity, amidst the expectations and unpredictability, to exercise your created agency in the move to menopause? (Consider Mark 5: 25–34).

**I am becoming a more substantial woman...
I don't mind taking up a bit more space.**

Research participant; SWF research project

As we have begun to explore in the previous section, the move into menopause involves the challenge and opportunity to let go. A fundamental loss is the capacity and choice to bear children – this loss may be felt as relief or grief, or a mixture of both, along with other feelings.

Since female bodies are created to move into menopause, **the perimenopausal body is not broken**. However, it may *feel* broken. Discuss here the significance of the broken body in your theology and how to recognise yourself as still made in the image of God in the midst of profound change.

Once in menopause, we have different levels of hormones (if not on HRT). As such, our capacities and abilities shift and, in many cases, decline relative to our youth. In perimenopause, our bodies are working to adapt to this, much as they did in puberty. Like every living thing that is part of the web of creation, we are born, we live, we decline and we die. Consider how that sentence makes you feel, and why.

Take time to explore here stories and perspectives from your faith tradition, scripture and experience around **change, limitation, discomfort, suffering, grief, lament, decline** and **death** (but maybe not all at once!). Consider what role these feelings and experiences play in your human existence, your spiritual growth, your life in your faith communities, and what you believe about who God is.

Through these explorations, we begin to see the significance of thinking about the move into menopause not only for those in it but also as a useful metaphor for considering the lives of our faith communities.

Loss

**“The world is not your oyster. It is your ocean...
Amidst the undulations of uncertainty and the riptides of
loss, can we discern the possibility that is good for us?”**

Keller 2008: 66-7

**“[I]f we perform [our] brokenness through our own
fragmented selves, we offer God the raw materials
required to transgress reality as it is in order to transform
it into what it could be.”**

Wigg-Stevenson 2021: 21-2

Questions

- If you feel broken or lost in perimenopause, how does God help you in those moments? What can your community offer?
- What are you invited to let go of, to release, as part of the move into menopause? Which stories or characters from scripture might help you?
- How does suffering and discomfort intersect with choice, control and power, both for yourself and for others who may be different from you? How might your beliefs about disability, ageing and (in)fertility be unearthed and, where necessary, challenged?
- Does a perspective on the move into menopause that takes you from individual loss to being part of a wider ecological system feel helpful for you, or as a metaphor for your faith community?

As the quotes in the previous section suggest, the move into menopause presents inevitable loss but also offers transformational grace and lively possibility. It's perfectly possible to feel a sense of both in the space of a day, or even a moment.

“I’ve had women burst into tears on me...and if they carry on feeling they need permission, it needs somebody to say, actually, you can put yourself first.”

Research participant; SWF research project

Through the discomfort, the uncertainty, the letting-go and the profound changes – likely even *because* of them – might you see **the move into menopause as a means of grace**? In other words, could it be a place of growth, deepening and renewal of your relationship with God, and a welcoming of God’s transformative grace?

Through the move into menopause we become, in a sense, new people in new bodies, pioneers in our own lives as we discern new patterns of rest, purpose and hospitality for ourselves and others.

Just as for your faith community, your movement is ever forward. You cannot go back. You might consider how God has accompanied you in the past and promises to do so into an unknown, wilder future.

Questions

- Where can you find (or provide) grace in the move into menopause? How might you feel held as a beloved child of God?
- How might you support your ministers, deacons, and other leaders (or leaders in training) who are going through perimenopause?
- How might the wisdom gained in perimenopause and into menopause serve a church navigating its own changing presence and identity in the world? Is that voice of wisdom welcome?
- Consider the work and character of the Holy Spirit, if appropriate for you. How might you find resonance with the experience of grace in the chaotic and yet purposeful move into menopause?

“Menopause as resurrection is an invitation for us to find new ways of seeing our bodies as worthy and inherently wonderful.”

Manfredi 2024: 93

“I’ve had to just kind of go, hang on a minute, try and be a bit kinder to yourself... you’ve got hormones flying around your body. Maybe God’s saying to you, just chill a bit.”

Research participant; SWF research project

As you move into menopause, you may become aware of being viewed differently, and a new or heightened sense that the world is not designed for you, your body and your needs. You (all) might then want to **advocate** for assistance or adjustments for those in your faith community in perimenopause; in the 'pew' and the 'pulpit', in the church kitchen and on committees, as a matter of justice and inclusion.

If you have previously been **marginalised** by your faith community or society, you might consider how you feel to be joined by (some combination of) white, middle-class, able-bodied, straight, neurotypical, cisgender women, who might suddenly be learning through perimenopause an inkling of what it feels like to have to manage their bodies and others' expectations or judgements.

Another step might be to consider the **queer** aspects of perimenopause, thinking of the way it challenges gender norms and transforms our identity and our bodies, for example. If you are not queer or transgender, this could lead to a new sense of affinity and solidarity with queer or transgender folk (or others who also challenge gender norms and experience transformation of their bodies) in ways that respect both similarities and differences.

Consider too an imaginative and inclusive lens on the move into menopause that embraces a more expansive and enriched definition of **fertility**. This could encompass the good, new life you might offer to your faith community and the world, as well as your connection to the rest of creation.

Justice

Those who are in the center do not ask the 'who-am-I' question because they are normative. Their identity is self-evident and, therefore, there is no need for further explanation.

Kang 2012: 109-10

If we don't love ourselves,
how can I love my neighbours?

Research participant; SWF research project

& Inclusion

Questions

- How might your move into menopause make you more aware of your relative privilege? How could it nurture your understanding of God's justice for all; that each and every one of us is of equal value and worthy of dignity?
- Given the likelihood that the body that goes through perimenopause is the default body in many faith communities, what might be needed to make faith spaces more appropriate?
- What is the importance of community for women and all those who go through the move into menopause?
- How do you feel about the possibility of becoming less 'visible'. Explore the theme of (in)visibility in scripture.

Space for notes and doodles

Good does not lie in some part of our beings, our minds or our bodies, our erotic sensuality or our cool rationality. It lies in the transformative metanoia and slow maturation of a grounded self in community, able to be both self-affirming and other-affirming in life-enhancing mutuality. It is both a gift and a task, grace and work.

Space for notes and doodles

Space for notes and doodles

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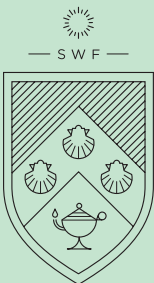
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