"CHANGE OF LIFE" — END OF LIFE?

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There is an amazing amount of ignorance and misinformation among even well educated men and women regarding the climacteric stage in the woman's life span. According to Webster the climacteric is "a period or point in human life (as, among women, the menopause) in which some great change in the constitution, health or fortune takes place." This definition makes it clear that the term covers a variety of changes. And yet only the menopause is given the distinction of being called "change of life," implying that from here on a woman's whole existence would be radically different. Change of life is not implied when speaking of the male climacteric.

It is the purpose of this paper to show that change of life in this radical sense is an untenable concept, both because of the nature of the developmental process and the nature of personality; and that our conception of the personality as a unique, self-consistent style of life excludes the possibility that the menopause, or any other objective factor, has the power to shape or transform an individual. As Adler often said, the influence of any factor depends upon what we do about it.

PHYSIOLOGICAL FACTORS

Having acknowledged the importance of the individual's choice of response to reality, we may begin with a brief statement of the objective factors involved in the menopause. The word menopause in its Greek derivation means cessation of the menses, and this is of course the basic reality of the period. But although a woman loses her procreative ability, the menopause per se does not change or end her sexual needs or functions, neither her desire nor her capacity for fulfillment. The firmly grounded superstition that the menopause ushers in a period when all sex life is over, has only recently been counterindicated. In fact it has been found that women sometimes experience a fuller pleasure after the menopause, because the fear of conception has been removed. By the same token, sexual maladjustments are not automatically ended by the menopause.

1Excerpted and adapted from: "'L'age critique' est-il un age critique?" Psyché, Paris, 1954, 9, 152-163.
Other glandular and hormonal changes also take place at this time, undoubtedly with great variation, but they do not indicate a sudden or radical change of the personality. Development is generally an unbroken chain of phases, each phase bringing fresh demands which must be freshly responded to. Whenever a new phase approaches, something of the previous one must be given up; but no earlier phase can be completely renounced. To try to do so, would be like cutting out a part of oneself. Every important former interest mingles with a new one in some form or other; to remain through the rest of life.

Much as the menopause is a definite change, there are other changes in a woman's life perhaps as decisive. The baby who stops crawling and begins to walk upright, experiences a complete change of view of the world; the onset of menstruation marks the end of childhood. The menopause is one among many changes, and thus cannot be regarded as the change of life.

Social Factors

In addition to physiological factors, the cultural attitudes toward aging women in our society are also a part of objective reality. The lesser social value generally accorded to women, in spite of their guaranteed social rights, is most pronounced in later age when the discrimination between men and women becomes strikingly unfavorable to women.

Another, more specific, social factor is the husband's attitude toward the wife during the climacteric, his climacteric as well as hers. Since a woman's mate is likely to be of the same age or older, he is undergoing, or about to undergo, similar physiological changes. He may be plagued by similar anxieties, and he may experience an actual decline in his power of sexual performance. In such a situation many men are inclined to blame their partner's actual or imaginary loss of physical attraction, and often seek new stimulation elsewhere. Thus the male climacteric occasionally results in a "change of wife." Most human beings, and women in particular, feel the need to be wanted, especially within the framework of the male-female relationship. But men suffering from the decline of their virility are not the most cheerful or inspiring companions. When their own self-evaluation is thus impaired, they often cease to give their partner the small signs of tenderness. The woman then sees her mate's decreasing sexual power as the reflection of her own waning desirability rather than as a physiological manifestation on his part. If her inferiority feelings are already
intensified through other causes, this deduction will naturally tend to increase them still further.

**Women's Attitudes**

In order to get a sampling of deep-rooted attitudes toward the menopause we asked several women to give us the first thoughts that came to their minds at the mention of the word. Some of the responses were: life ends; then it is too late; there is not much left after that; what an adjustment to make; I wouldn't admit it; I can think only of men; etc. One woman, however, said, "It is terribly overrated," and several replies expressed relief and calm, either because the women looked forward to the end of a bothersome function, or to the cessation of their husband's sexual demands.

Every woman will experience the menopause according to her personality. Some case histories even show a striking resemblance in the individual's reactions to the beginning and ending of menstruation, and thereby demonstrate the consistency of the individual style of life. Does the growth of the breasts, the first sign of maturity, affect every girl the same way? No one common reaction is found. Some girls are proud to become women, some are deeply ashamed, some are frightened, some cannot wait for it to happen and try to stimulate it. If the effects of the onset of maturity are varied, should one not expect the effects of the climacteric to be equally varied, ranging from acute to mild, from depressing to relieving?

Although many women do succumb to melancholia during this period, it is often hard to decide whether these depressions are physiologically grounded or due to apprehension. In many cases the troubles prove to be caused by fear alone inasmuch as they disappear when the fear is removed.

No generally definitive answer can be given regarding the somatogenic factors in menopause disturbances. But it has been found that mostly those women suffer during the menopause who have previously, permanently or temporarily, experienced nervous disorders. They are those, in other words, who have the capacity or the urge to suffer. Nervous disorders do—or do not—occur during the menopause in accordance with the style of life which has characterized the individual heretofore. The much heralded change is certainly no change of personality.

The distress suffered by so many women stems from their faulty self-evaluation regarding their existence generally, and specifically
regarding their relationship to the opposite sex. Unfortunately far too many women suffer from the illusion that they do not count fully as human beings; they see themselves in the role of what is peculiarly feminine. Accordingly, they underestimate the importance of comradeship in marriage and see in their continued menstrual period a symbol of their desirability, their capacity to be loved and even respected. Thus the end of menstruation becomes subconsciously estimated as the end of life. Such women are distressed out of all proportion when any signs of old age appear; they may wage a furious battle against age and keep up the appearance of youth to the point of absurdity. This happens mostly, we repeat, when women with a faulty style of life have built their self-evaluation on the treacherous ground of their attractiveness to men and on their own sexual abilities.

There are also examples of a more productive pattern of response to the menopausal period. One hears often of women who, after a relatively uneventful life, develop unexpected capacities just as they are passing middle age. It is as if such dormant capacities had been waiting for this phase when the ability to bear children would have dropped out, but society and culture were still asking for a contribution.

The implication for therapy here is, of course, to help the woman see herself in her wider role as a human being and find the contribution she is able to make in a function other than as a sexual partner.

**Summary**

Our intention has been to clarify certain problems in the so-called change of life by drawing attention to the determining role of attitudinal factors. The menopause is but one change among many changes during the course of a woman's life, and she may be expected to respond to it as she has to the other changes, namely, in accordance with her style of life. Where psychological difficulties are found during this developmental period, they are likely to be the result of the individual's mistaking her role in life as something exclusively feminine rather than that of a fellow human being, and of mistaking the values of the woman's role as restricted to pleasing the male sexually, to attractiveness, and to procreative ability.