

**Group Cognitive Behaviour Therapy  
for Managing Peri-menopausal Symptoms:  
Feasibility and Effectiveness of Two Delivery Methods**

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## Abstract

The increased understanding of the role of behaviour, mood and cognition associated with menopause has resulted in menopause transition no longer being considered only a biological process, but also understood in a psychological and social context. This has led to the development of psychological interventions to treat menopausal symptoms. This current pilot study aimed to evaluate the feasibility and effectiveness of two delivery formats: Weekly (ten weekly, 1.5-hour sessions) and Weekend (two 7.5-hour sessions) of a Group Cognitive Behavioural Therapy (GCBT) program for managing peri-menopausal symptoms. The Menopause Made Manageable (MMM) GCBT program has incorporated many well-established cognitive and behavioural strategies including psychoeducation, relaxation, mindfulness, lifestyle intervention, cognitive strategies, and stress management. Participants were allocated to the Weekly ( $n = 51$ ) or Weekend ( $n = 22$ ) group according to their preference. A battery of standardised questionnaires: the Menopause Rating Scale (MRS), the short form of the Depression Anxiety Stress Scale (DASS-21) and the short form 36-item Medical Outcome Study questionnaire (SF-36) was administered at waitlist (6-8 weeks before treatment), pre-treatment, post-treatment, 3-month follow-up and 6-month follow-up. Participants were also asked to complete a symptoms diary (daily version of the MRS) during the MMM program to monitor their menopausal symptoms. Changes in mean scores over five assessment time points and between two groups were evaluated using a Linear Mixed Model. The current study design used participants as their own controls in the waiting control time period, where no significant change was identified. The results indicated that both Weekly and Weekend MMM program were effective in improving menopause-related symptoms ( $d = 0.66 - 0.86$ ) and psychological symptoms ( $d = 0.19 - 0.51$ ). The treatment gains were maintained at least for 6 months. No significant group

effect was identified in any of the outcome variables. Further analysis on the symptoms diary also revealed that both Weekly and Weekend MMM improved over time at a similar pace during the treatment program. The second part of the study focused on evaluating the MMM program using qualitative method. Semi-structured interviews were used to explore participants' experience of the MMM program, in both Weekly and Weekend formats. Interpretative phenomenological analysis (IPA) was chosen to analyses the data because it is particularly suitable to explore the research topic in detail from participant's perspective. Five superordinate themes were found: (1) Pre MMM: A Life with Chaos; (2) MMM Answered My Questions; (3) MMM Made Me a Stronger Woman; (4) The Power of Group; and (5) Need for Options of Delivery Format. Generally, the findings suggested that prior to the group, the women found the menopausal symptoms overwhelming and pervasive. All of them wanted to know more about menopause but had experienced difficulty accessing information and support. After the treatment, all of the interviewees expressed having increased knowledge and self-confidence in managing their symptoms. Despite the perceived disadvantages of the intensive format, the Weekend MMM has provided an option for the women who could not attend weekly treatment sessions. The results of this study suggested that the MMM GCBT program has the potential to be an effective and feasible, non-pharmacological treatment alternative for managing menopausal symptoms. Since both Weekly and Weekend groups showed similar results, the MMM program could be delivered in either format to suit clients' needs and preference. Similar to previous studies, the current findings support the use of GCBT for managing peri-menopause symptoms.