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Jessica S. Cattaneo

A Thesis

In

The Department

Of Sociology and Anthropology

Presented in Partial Fulfilment of the Requirements
For the Degree of Master of Arts at
Concordia University
Montreal, Quebec, Canada

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ABSTRACT


Jessica Cattaneo, MA

The purpose of this thesis is twofold. First, it is an exercise in the application of critical anthropological theory and methodology to a subject matter that has not been treated by these approaches. In the process, the construction of anthropological knowledge is consistently questioned and evaluated. Second, an exploration of menstrual ideology and practice is provided through the experiences of women living in south-western Ontario. Research was conducted through various methods: 100 women of different ages and ethnic backgrounds participated in a menstrual care product questionnaire. Store managers and owners were interviewed regarding the sales and merchandising of menstrual care products, as well as a thorough search of the feminine hygiene industry's different websites. 18 women were interviewed regarding their menstrual history, sexuality, family experience, health, and their perceptions and choices of menstrual care products. Six different families participated in life history interviews. Four of these families are presented in the thesis in the form of 14 individual life histories. The topics discussed include: menarche, pregnancy, divorce, abortion, sexuality, work, family relationships, Toxic
Shock Syndrome, Polycystic Ovarian disease, menopause, and commercial menstrual care products. By approaching menstruation through women’s understandings and experiences, menses is shown to be diverse, processual, connected to every aspect of women’s lives, part of political economy, and contingent on history, culture, and society. Some of the issues I address are: the experience of western menstrual taboo, and the experience of the biological body, doing anthropology “at home”, the dichotomies of the mind/body and public/private, as well as the importance of restructuring and rethinking previous studies of menstrual taboo. This thesis presents menstruation within the complexities of the every day lives of ordinary women, and provides an examination of current critical approaches to anthropological theory and methodology.
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For my parents,
who taught me the value of knowledge.
For Gwen,
whose friendship is limitless.
For Lynne,
whose lessons always resurface.
And for Sally,
to whom I cannot give enough thanks.
This started out as a simple poem
for Virginia Woolf
it wasn’t going to mention history
or choices or women’s lives
the complexities of women’s friendships
or the countless gritty details
of an ordinary woman’s life
that never appear in poems at all
yet even as I write these words
those ordinary details intervene
between the poem I meant to write
and this one where the delicate faces
of my children faces of my friends
of women I have never even seen
glow on the blank pages
and deeper than any silence
press around me
waiting their turn
A Simple Poem for Virginia Woolf, Brownen Wallace
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Part One:
Introduction to Menstrual Culture
1.1 Prologue


The body as a “thing” that can be a specific topic to be analysed and philosophised and toiled over, occurs only because it has an opposite, the mind. The Cartesian mind/body split seems as embedded in the experience of the body, as our bodies, our materiality, is embedded in every aspect of living in the world. I've been working on a thesis about menstruation, and most of the time, I forget that I have a body. I've been focusing around issues of body politics and lived bodies for over a year, but the feeling of living through your body often escapes me. I take my body for granted. I only remember when I have to. When I am in pain. When I have to do something and my body doesn't agree with me. When I am hungry or menstruating, for instance. Yet, the body is part of consciousness, and just because it is not speaking loudly doesn't mean that it is being ignored. Feminist theorists attempt to transcend the mind/body dichotomy through the use of phenomenological theory and methodology. In this thesis I use this approach because in previous anthropological studies of menstruation, bodies were absent, for the most part. Menses involved rituals and taboos and cosmological orders, but it did not involve bleeding. So I asked a bunch of women what menstruation felt like. Some had to pause, think backwards, trying to remember. Some began enthusiastically
detail and intonation. Others I met with a hint of sarcasm, like hell, they would tell me, as if I didn’t need to know more. My hesitation in approaching the body now, looking back, is related to the fact that for many of the women involved in this research, menstruation is just a tiny part of their lives, and has little to do with who they are. They are so much more than their bodies, and they separate themselves, sometimes with great need, to be more mentally focused rather than physically grounded.

For women, bodies can be a challenge. In western thought, the female body, as a result of its reproductive biology, is generally understood as closer to nature than the male body. In the hierarchy of this thinking, the female body is inferior to the male body, because of this supposed closeness (because it is harder to control) (Birke, 1986, Martin, 1987, Ortner, 1996). It is therefore easier to categorise it in biological terms, to define the female by her biology. It is part of a woman’s unyielding biology to be feminine, motherly, moody, and irrational. Women who have come to understand their bodies through this thinking often learn to ignore their body’s biological processes, to surpass the limits that nature is perceived to impose on them. Menses, being specific to the female body, can become a signifier of this biological determinism. It therefore behooves us (for I am also a female body), to play down, ignore, forget our cycles so that we can continue in our daily tasks without meeting friction. To admit that you are affected by, or even part of the process of blood letting, is to admit your body’s control over your mind and activities.

The body in phenomenological and feminist approaches is both concrete and flexible. Not a given (biological determinism), but contingent on history, society, and culture. The female body is a signifier of womanhood, because we have (as a culture)
created a gender in response to the different biological sexes. However, what
to womanhood entails depends on culture, history and social structure, it is not a fixed state.
The body tells a story about power and transformation, about economy and biology. In
talking about menstruation, the body is a point of reference in expressing the account of a
female life. It is not a straightforward story. The only given is that menses happens.
How and when and where are incredibly powerful variables. Further, what it means to a
particular woman also varies.

In analysing feminist approaches to the body, biologist and feminist Lynda Birke
(1999) maintains that, while treating the body as shaped by culture and society is
important, it is not enough. She contends that within feminist theorising of the body,
gaps have been created. Feminist critiques of biological science have been important in
recognising the naturalising power western culture offers science (Delany and
Yanagisako, 1995; Martin; 1997; Tesh, 1996). Increasing attention has also been placed
in the area of reproductive technologies as these technologies become more common and
popular to societies (Martin, 1987. Ragoné, 1990; Sawicki, 1999). Feminist critique has
also been involved in critically analysing the production of biological knowledge, how
culture shapes science (Martin, 1987; Shiebinger, 1999). However, Birke argues that this
last task has not received the attention that it is due. In most feminist works, biological
science is treated as a narrative and nothing more. It is not recognised to provide any
material truths about organism, or rather, the possibility that biological science does offer
concrete facts about our bodies' workings is often completely denied or ignored. To look
at biology seriously, would mean to give weight to biological arguments that have limited
and defined women through history. The goal of feminism is not to fuel the fires of
sexism, and therefore, feminist theorists do not want to be trapped into acknowledging that biology may shape human consciousness. There is a fear in admitting that a body's biology can play a role in one's abilities and identity.

However, it is possible to recognise that there are certain material realities to the world and to our biology, while acknowledging the lens with which we view them to be powerful. That lens shapes the way biology is understood and experienced. To focus on the internal workings of the body does not mean to deny the effect that history, society, and ideology have in producing definitions and meanings for physiological processes. Birke argues that "bodily interiors need to emerge from the confines of physiological discourse into wider cultural criticism" (45). For Birke, the gaps in feminist analysing of the body are first, a lack of attention on the interior workings of the body, the body's biology, and secondly, little acknowledgement of bodily development. What Birke means by her second point is twofold; that the experience of the body changes and transforms as bodies age, and as culture changes. "Living the body means experiencing it as transformable, not only as cultural meanings and readings, but within itself...culture shapes our internal experiencing (of our bodies)" (Birke, 1999: 45). And in this gap, falls menstruation. beautifully. Menstrual narratives tell the story of biology as a lived experience, because women interpret, live through, and react on and against western biological models. By studying menstruation through women's experiences and histories we create a space in discourse, a space where culture, science, experience, biology, and gender can be analysed in unison while recognising the power relations within which these concepts are understood.
1.2 Introduction

In this thesis I explore the relationship between menstrual ideology and praxis in the lives of women living in south-western Ontario\textsuperscript{1}. I study how women come to understand menstruation and transmit their beliefs to other women and the world around them. My goal is to understand women’s experience as biologically based, culturally shaped, and part of the larger systems of power and global relations.

I must first explain how I understand and employ the terms “ideology” and “practice”. I approach the term “ideology” as the cultural beliefs or public symbolic order that reflect and support the interests of certain categories of people. Following Marx, I believe ideology to be the worldview of the dominant sectors of society (see Tucker, 1997). Eric Wolf extends this definition to include “the unified schemes or configurations developed to underwrite or manifest power” (1999: 4). Within the particular context in which I conducted my study, menstrual ideology is shaped and disseminated through western biological models of the female body and the feminine hygiene industry. “Practice” consists of the actions, beliefs, and understandings of individuals living within a certain historical and cultural context. Practice includes the application and cognition of dominant ideologies, as ideology is not a separate concept in people’s daily lives. Practice is the action and worldview of individuals in relation to and within particular social and ideological structures. I am employing a “practice approach” which Sherry Ortner describes as “understanding something the people did or do or

\textsuperscript{1} While all of these women were living in south-western Ontario during the time of the interviews. Not all of them are from the area, or currently living there. While I do believe that the particularities of community are important to shaping people’s experiences and beliefs, in this thesis I will be treating location as part of a general western context.
believe, by trying to locate the point of reference in social practice from which the beliefs or actions emerge...It is a question of seeking the configuration of cultural forms, social relations, and historical processes that move people to act in ways that produce the effects in question” (1989: 12). I am seeking to understand how women might perceive their experience of menstruation within a particular ideological context. By exploring menses from this vantage point certain questions arise. How is this different from the ways menstruation has previously been studied within anthropological discourse? How is this project filling in the gaps left by anthropological inquiry? How does this project speak from and to the very core of anthropological goals and aspirations?

The study of menstruation has been a part of anthropological discourse since its emergence as a discipline. Often, study has focused exclusively on the rituals of menarche, a young girl’s first menstruation. Characteristically, the analysis has remained specific to menarche as a rite of passage, disregarding that menstruation is a process which can last until a woman is in her fifties, its context and meaning changing over the course of her life (see Hogbin, 1970 and Montagu 1937). Menstruation as a subject of study in anthropology has been viewed as simply a part of public symbolic order. Anthropology has largely been limited to analysis of the outward norms, rituals, and beliefs which surround menstruation. Menstruation as a biological process, physical experience, and artifact of material culture has been neglected. By exploring women’s menstrual histories, this thesis understands menses as part of both culture and of biological experience, each affecting the other. Beliefs and understandings of menstruation then become visible as dynamic, processual, contextualized, and constituted by many different factors.
In conceiving menstruation in this way, new data emerges. Using women’s voices as the medium expressing menstrual culture, menses can be understood as something tangible as well as symbolic. How women practice and experience menstrual taboos, can be included along with descriptions of the taboos themselves. Furthermore, when reading women’s descriptions of their menstrual cycles we may come to understand what has been prohibited by conventional anthropological paradigms. What makes us uncomfortable? Which are those topics that teeter between cultural anthropology and biological science, between respectable, academic discussion and topics seeming appropriate only for doctors’ offices and women’s washrooms? Why are these topics never considered in conventional discourses? In order to begin to answer these questions and explore “forbidden” terrain, I developed the notion of “menstrual culture”. The concept of menstrual culture emerged from my approach to studying menstruation and I have used it in order to fit a need or absence in theory. For me, menstrual culture is the point in which menstrual ideology and practice meet, within women’s experience of menstruation. It is an acknowledgement that menstruation produces culture, that women’s experience of menstruation is part of ideology, practice, and biology. The concept of menstrual culture goes beyond the conventional anthropological discourse on menstruation to require analysis of these formerly excluded, “unrespectable” topics and domains of knowledge. Menstrual culture is subject to history, location, power, class, and biology. It is experiential and processual. Within the concept of menstrual culture, menstruation is understood as part of both public and private domains of society.

A recurring theme and methodological tool in this thesis is that of the private/public dichotomy. By private I mean to express those aspects of life which are
considered domestic and personal; the household, child bearing and rearing, for instance. The private domain is linked to nature and biology (or rather, bodies). "Women" as a social category have often been associated with what is private; as a result, women's bodies and their activities have been presented to exist outside of culture. The public represents the larger domains of society, that which all (though through different means) community members have access to. It includes economy and politics and is generally considered to be the space in which culture and social structure are created, and is associated with men (Ortner, and Whitehead, 1981). I believe, like many feminist theorists, the distinction between the public and private domain to be more a construction than a reality. These categories are not bounded or mutually exclusive. Furthermore, the make-up of these two categories can change and is contingent on history, culture and power. Following this logic, I believe that within anthropology the experience of menstruation and the female body has largely been considered private knowledge whereas "taboo" has entered a public anthropological discourse.

The approach that I use in studying menstruation is born from the discipline. It is the product of studying, reading, and critically analysing the works of other anthropologists. It is a borrowed approach. It belongs to the collective efforts of feminist, "third world", and post-modern academics in the field. It is grounded in the continuing project of understanding the world, and our reproductions of it. This thesis is therefore not just about menstruation, it is also an attempt in creating and employing new methods and theory. The methodology and theoretical approach are already important in other areas of the discipline (see Abu-Lughod, 1991; Behar and Gorden, 1995; Cole and Phillips, 1990; Min-ha, 1989; and Vincent, 1990). I am also using menstruation as a
reference point to theorise how women’s bodies are culturally shaped and physically lived. Menstruation cannot be studied in isolation, outside of experience, history and context, as has been the case in anthropology. The study of menses in a western context (doing anthropology at home) provides an opportunity to analyse the experience of the female body as culturally and physically defined and challenges the process of constructing knowledge in anthropology.
1.3 Literature Review:

Menstruation and the Constructions of Anthropological Knowledge

The most common disciplinary approach to menstruation has been studies of the menstrual taboo. In *Blood Magic: The Anthropology of Menstruation* (1988) authors Thomas Buckley and Alma Gottlieb reconsider the term that has often been interpreted as something inherently evil or negative. Turning to Polynesian semantics, where the word originates. Buckley and Gottlieb focus on the Polynesian word *tabu* (tapu), stating that *ta* means to mark' and *pu* is an adverb of intensity. Therefore *tabu* (tapu), strictly speaking, means “to mark thoroughly”. They also state that the concepts of “holy” and ‘forbidden’ are inseparable in most Polynesian language. Tapu encompasses both what is sacred and what is defiled, its opposite being profane or common².

Buckley and Gottlieb state that it is necessary to distinguish between types of menstrual taboos. Some taboos restrict the behaviour of menstruating women, different taboos restrict the behaviour of other people around menstruating women. Therefore, who is threatened by the breaking of a menstrual taboo, who is vulnerable in a specific context, and who is protected by a menstrual taboo, are questions that must be asked. If a menstrual taboo requires that a menstruating woman be isolated from society because *she* is vulnerable during this time a researcher cannot readily proclaim the taboo a sign of female subordination. Furthermore, Buckley and Gottlieb explain that a distinction must be made between “rules” and “taboo”. “Rules” have distinctly practical considerations,

² Their analysis is largely based on Franz Steiner’s *Taboo* (1956) They also point to Keesing’s *Conventional Metaphors and Anthropological Metaphysics* (1985) for a critical discussion of the anthropological usage of “taboo”.
however impractical they may seem. Taboo has a kind of spiritual foundation that is apart from any practical effects that might be their by-product. The restrictions and compliance to a rule will differ to that of a taboo.

"Taboo" has been an important tool for anthropological discourse with a diversity and variance to its meaning. There are no negative or positive dimensions inherently linked to the word. However, within the discipline of anthropology there is a great inadequacy in the studies of menstrual taboos. The prevalence of menstrual taboos around the world has made possible a number of cross-cultural studies, causal explanations, and assumptions regarding the "universal nature" of menses. Menstrual taboos have often been understood as synonymous to something negative, particularly to women (Buckley and Gottlieb, 1988).

Taboo and Female Oppression

One of the most pervasive interpretations of menstrual taboos, in both popular and academic literature, has been to understand taboo as a symbol of female oppression, to view the term "taboo" synonymously with "oppression". The assumptions which underline this perspective are as follows: (1) Women, when menstruating, are seen as unclean and/or dangerous. (2) The restrictions surrounding menstruating women are a form of punishment: they provide no pleasure to menstruating women. (3) Men are the creators and controllers of culture, women are passive in the creation and evolution of culture. (4) There is a naturally competitive relationship between men and women. Men use the taboos to assure and gain dominance in society.
In *The Golden Bough* (1922) Sir James George Frazer lists the different menstrual taboos enforced upon women. He states:

The motive for the restraints so commonly imposed on girls at puberty is the deeply ingrained dread which primitive man universally entertains of menstrual blood. He fears it at all times but especially on its first appearance; hence the restrictions under which women lie at their first menstruation are usually more stringent that these which they have to observe at any subsequent reoccurrence of the mysterious flow (698).

Frazer continues with a plethora of examples from around the world. He describes the Australian “blackfellow” who killed his wife for lying on his blanket while menstruating, and later died from the terror she bestowed on him. He explains how girls in New Ireland are confined to cages for four to five years at the onset of menarche, and continues with a case in Uganda where all vessels used by menstruating women must be destroyed. By presenting menstrual taboos in this way it appears that men create and control culture, placing restrictions on women and controlling their behaviour. Rather than enlisting this dangerous force to gain power, women simply comply to the wishes of men. Women appear unclean and passive.

This model has lent itself generously to evolutionary and cross-cultural approaches. For example F.W. Young (1965) uses menstrual taboos as markers with which to locate the status of women in different societies. He understood menstrual taboos to reduce women’s status in relation to men. Another example can be found in William Stephens’ work (1961). He identified five different types of menstrual taboos, then blended them together to create a type of menstrual taboo score sheet. Stephens constructed a statistical base for testing various hypotheses concerned with menstrual taboos and women’s subordination.
One menstrual custom which has been lavished with attention is that of menstrual seclusion. Beverly Strassmann’s work in the mid-1980’s is a current example of the correlation assumed between menstrual seclusion and female subordination. She states that Dogon women are forced to isolate themselves during this time in order to signal to men their cycles. She concludes that this information helps men track paternity, which is very important as offspring are understood as an important investment (Small, 1999; Strassmann, 1992). Strassmann’s study is both valuable and interesting. However, her conclusions cannot be stretched to include all Dogon people, let alone all small-scale societies throughout time. Doing so assumes that men are universally the creators of culture. Dogon women’s understanding of menstrual seclusion is not fully presented to the reader, nor is any possibility that the meaning and practice of seclusion has altered through history and across space.

While women may be isolated from the non-menstruating members of society, they are often not isolated from other women, menstruating or otherwise. With this in mind, Michelle Zimbalist Rosaldo pointed out in *Woman, Culture, and Society* (1974) menstrual seclusion may provide grounds for solidarity among women. Rosaldo’s hypothesis is reinforced by reference to examples like the Warao of Venezuela. Menstrual seclusion within this society is said to allow women sexual autonomy and provides them with opportunities to have lovers (see Suraez, 1968). And the Yurok Indians are said to believe menstrual seclusion offers women space to build spiritual and economic ascendancy (see Kroeber, 1976).

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3 The Dogon are a cultural group of millet and onion farmers in Mali. They were chosen for her research because they have maintained their traditional culture and believe fertility to be very important.
Much of the recent feminist literature focused on menstruation has understood all taboos regarding menstruating women to be a result of the power and reverence attributed to women's reproductive abilities. (see Grahn, 1993; Shuttle and Redgrove, 1978). This work has been important to re-evaluating menstrual studies, as well as allowing western women to think of their bodies in positive terms. However, this depiction falls victim to the same universalistic and ahistorical assumptions as those works which view taboos as markers of female subordination; it simply reverses the relationship of power between the sexes.

**Menstruation and Evolution**

Menstruation is often incorporated into evolutionary frameworks. Judy Grahn (1993) posits that menstruation was the human specie’s first method of keeping time. Sir Solly Zuckerman (1933) hypothesised that social evolution occurred when the sexual activity of primates became more regular. marked by a more periodic (monthly) menstrual cycle in female primates. It seems that menstruation lends itself easily to evolutionary schemes for two reasons. First, all women (physiologically speaking) menstruate at some point in their lives. Secondly, female primates also menstruate. Menstruation can then be seen as a link between contemporary humans and their earlier "brothers and sisters". Menstruation becomes a base in which to locate the past because it appears to be concrete. The actual physical process of menstruation is often assumed to be universal, to have remained the same through time and space.

Most evolutionary approaches to menstruation are concerned with gender relationships. In these studies menstruation is seen to define women as different from
men. Anthropologists like Sherry Ortner and Michelle Rosaldo (Women, Culture, and Society, 1974) have used menstruation and menstrual taboos in order to understand universal gender asymmetry. In Is Female to Male as Nature is to Culture (1974), Ortner uses menstruation and menstrual taboos in locating the origins of female subordination. She uses a structural approach in asking how the universal fact of female subordination can be explained. Ortner posits that human societies produce “culture” in order to transcend, surpass, and control the natural world. In doing so, the creation of a dichotomous worldview becomes an important abstract scheme in defining human life and activity. Within this dichotomy, “culture”, or the “operations of culture” (73) become distinct and superior to nature, because through said operations “nature” is transformed into useful human tools. A tree becomes wood for building a shelter or creating a fire, for instance. Ortner asserts that this dichotomous and abstract worldview exists in every culture and is extended into every realm of life. Men become viewed as closer to culture, because within this framework they are understood to create culture. Women, on the other hand and by virtue of their bodies (reproductive abilities), become viewed as closer to nature, or perhaps lying between culture and nature as their biological and social roles provide that they turn “nature” into “culture”, giving birth and socialising children, for example. Menstruation has been analysed within this framework that identifies women as closer to nature and therefore subordinate to men (culture). In this analysis, menstrual taboos have worked through history to institutionalise women’s subordination within cultural systems and social structures.

1 The universality of gender asymmetry has been highly contested within the discipline, particularly by feminist anthropology. While I am still uncertain to my own opinion on the subject. Michelle Rosaldo’s argument in The Uses and Abuses of Anthropology, has been the most convincing for me as of yet. So while I use the term
In *Blood Relations: Menstruation and the Origins of Culture* (1991), Chris Knight posits a different evolutionary theory regarding the sexes. Knight pulls from a number of different disciplines and theoretical approaches to create his own personal "origins myth". In this highly condensed text (581 pages), Knight applies feminist, socio-biological, Marxist, paleo-archaeological, structural, and symbolic approaches, working from many aforementioned academics’ insights, including Zuckerman. Knight postulates a rather original theory (or myth) regarding social evolution. Focusing on biology, or rather, female reproductive physiology, Knight posits that women in "primitive" societies used their menses to form alliances with one another. In his origin myth, women ovulate monthly (therefore, menstrual cycles are regular, and have always been) and menstruate at night. Knight then goes into a series of case studies regarding menstrual synchrony: that women in close proximity will influence each other’s menstrual cycles and will menstruate at the same time (for more information see www.mum.org).

Where their cycles were randomised, females could be dealt with one by one and thereby managed and controllable. Synchrony, by contrast, would have been a manifestation of inter-female solidarity; its achievement would have granted females a special kind of power, enabling them to escape being privatised by dominant males either monogamously or in harems (Knight, 1991: 222).

Women then used their synchronised menses as occasion to gather together and away from their regular workloads. Sexual activity included, thereby originating the custom of menstrual seclusion. “Throughout the traditional world, menstruation – real or pretended – has been used by women as a means of avoiding the obligation to provide sexual service in marriage” (ibid., p.385). It is not the denial to cook or clean, tend the

"universal" hesitantly. I do find some truth in the concept of a universal gender asymmetry, although greatly varied and fluid.
fields, or care for children, it is the denial of sex on which Knight focuses. In his hypothesis, Knight states that women would jointly go on a sex-strike, denying men, all men, sexual intimacies. This sex-strike was created by women, not only to take a break from their daily workloads, or exhibit their power, but also to motivate men to hunt. Because men are both driven by their sex drive(?) and can take advantage of the women's absence allowing them to engage in different activities, they would go on group hunts. It isn’t until the men return with meat that the sex-strike will end.

From this revolution of female reproductive labour over primate male dominance, evolved a number of different menstrual taboos and conceptions of menstrual blood. According to Knight, it wasn’t until the dynamics of human social groups altered and women were denied their solidarity and synchrony, that menstruation and menstrual blood began to be viewed as negative and dangerous and female subordination was institutionalised.

There are many issues that are problematic with Knight’s origin myth. Because he places this sexual revolution so far in the past he seems content focusing on biology and perceived human animality. To assume that females, at any time, were not sexual actors or initiators, and that males were driven by their sex drives cannot be proven, and is more a reflection of present day sexual ideology (see Peiss and Simmons, 1989). Moreover, Knight presents sexual friction as innate to the human condition, which also can not be proven.

The regularity of the female menstrual cycle is something very much debated. Beverly Strassmann has shown that women living in the horticultural societies of the

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5 See also her revisit to this article in Making Gender (1996)
Dogon have approximately 110 menstrual periods in their life time, compared to the 350-400 menstrual cycles of women in industrial societies (Small, 1999; Strassmann, 1992, 1996). Aside from the more common state of lactation amenorrhea, women leading more physical lives will menstruate less frequently and regularly than less active women (Shostak, 1980; Small, 1999; Strassmann, 1992, 1996). Recent studies are beginning to suggest that an exact monthly menstrual cycle may actually be unhealthy for women, not "normal" at all (Angier, 1999; Coutinho and Segal, 1997; Strassmann, 1996). I do not wish to use contemporary small-scale societies as a window into the past, rather I want to posit that other menstrual cycles do exist and may be more "natural" (birth control free) to the female body (or some female bodies). While there is evidence for menstrual synchrony, it is difficult to postulate that all, or even most, women would be menstruating at the same time. Menses varies too greatly in our contemporary world to assume a uniformity in the past.

But my intent here in not to critically analyse Knight's origin myth, but rather to explore the problematics with evolutionary theories based on menstruation. I do not think that this project should be given up all together as it sheds light on contemporary assumptions and tells us about the infinite possibilities that the past may shape, as well as the future hold. I do feel that searching for origins is something almost innate to academia. I doubt the search for evolutionary schemes, or the evolutionary scheme, will ever completely fade in popularity. While evolutionary approaches and frameworks have undergone cycles of popularity, they always seem to return.

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Amenorrhea is the absence of menses, and lactation amenorrhea is the state in which the hormonal changes required for nursing suppresses ovulation and inhibit menstruation.
And yet, these evolutionary theories remain highly suspect. Menstruation becomes a base in which to locate the past because it appears to be concrete. While many studies illustrate the constructedness of understandings of menses, the actual process of menstruation has not been destabilised. And while I do believe there is a limit to this destabilisation, we are not in any way prepared to make grand statements regarding how much of our (academic) understanding of menstruation, biologically, is constructed, and how this construction has varied over time and space. Furthermore, it is impossible to know how menstruation would have evolved over time. The use of small-scale, non-industrial societies as a window to the past has proven to be problematic, and eurocentric (Leacock. 1981; Pandian. 1987). As Leacock states, “the societies studied by anthropologists are virtually all in some measure incorporated into world economic and political systems that oppress women” (Leacock, 1981: 131) It is impossible to know exactly just how the processes of colonisation and imperialism may have altered a society’s social structure. And yet, these processes are so glaringly absent from any study which focuses on menstruation, it almost appears as if theorists assume that neither the physical nor the cultural (although I don’t assume these to be necessarily separate domains) aspects of menstruation change or are affected by colonisation and imperialism.

It is interesting to note that most studies focused on menstrual taboos choose societies which are more isolated and have had limited contact with the western world.

In *The Uses and Abuses of Anthropology* (1980), Michelle Zimbalist Rosaldo states:

..at the same time that we fight to see ourselves as cultural beings who lead socially determined lives, the movement back in evolutionary time brings inevitable appeal to biological givens and the determining impact of such “crude” facts as demography and technology” (392)
Menstruation, taken out of context, becomes an important determinate of social organisation and evolution because physically' it appears to be a stable base from which to construct society and identity. While I do not doubt that the body, and its biological processes, have played an important role in constructing a worldview, this worldview must be dynamic, varied, and in return, affect conceptions and knowledge regarding the body. To work from the present backwards will probably tell us more about contemporary thought than about human evolution. How menstruation may have been used in shaping evolutionary history can not be known, especially when present-day menstrual studies are so incomplete, lacking an understanding of how menstruation can shape contemporary knowledge. Evolutionary frameworks or theories cannot assume menses as a biological given. How menstrual cycles have changed, and how menstruation and female or male bodies have been understood in the past, cannot be known for certain.

Menstruation and Symbolic Analysis

Much of the symbolic analysis of menstrual taboos has been built from Mary Douglas’ concept of ‘pollution’ (1966) as symbolic contamination. Menstruating women and menstrual blood and are understood to be perceived of as anomalous⁷ and dangerous (polluting). Menstrual blood is interpreted as part of a specific symbolic order, and a

⁷ Within the symbolic analysis framework menstrual blood is considered an anomaly because the blood signals both loss of life, and the possibility of it. As well, menstrual blood is understood as anomalous to other forms of blood loss because it is the only act in which women routinely let blood (Rosaldo and Atkinson, 1975) However, whether all cultures perceive menstrual blood or menses as anomalies has yet to be effectively shown. It should be kept in mind that within this framework the anomalous nature of menstrual blood is more often assumed, rather than even questioned.
danger to it. Therefore, menstrual taboos have been created in order to contain this danger, to restructure society in a positive way. Douglas later revised her work on pollution theory, stating that "while all pollutants are anomalous in terms of a given symbolic order, not all symbolic anomalies must be coded as polluting" (1970: 15). Anomalies are powerful, "this power being granted a negative or positive valence to be determined through specific cultural analysis" (Buckley and Gottlieb, 1988: 27). Therefore, menstrual blood may be seen as polluting or sacred. Douglas' theory allows for a variation in understanding menstrual taboos, making a distinction between sociologically functional rules and religious supernaturally sanctioned taboos.

Mary Douglas' pollution theory was highly influenced by the works of Emile Durkheim and Marcel Mauss. They posit a close relationship between ideas about the social body and the physical body (Buckley and Gottlieb, 1988). Douglas hypothesises that menstrual blood is seen as polluting when it symbolically encodes an underlying social-structural ambiguity regarding women. According to Buckley and Gottlieb: "The common fact of menstruation among all women challenges that social order of a male-dominated society and defines and bounds a female subgroup within the society, thereby creating a new separate and dangerous order" (1988: 29). Therefore, in societies (and analytical frameworks) where menstruation is understood to define women as 'Women', granting them a certain power of creation, and where men are understood to be dominant, menstrual blood is seen as dangerous to a social order that prescribes certain gender asymmetry and thus is framed/constructed as polluting (Buckley and Gottlieb, 1988).

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8 The category of "women" here, and throughout all of the works I have read regarding menstruation, has not been problematised. It seems that within these studies "women" are those who have, will, or do menstruate. While it is unfair to state that these studies have completely essentialised "women", based on physiology, it is important to note that the complexities of a socially constructed gender identity are often
In this way, pollution theory differs little from models which view menstrual taboos as markers of female oppression. Pollution theory also has entered into feminist frameworks seeking to account for the universality of gender asymmetry in which “women” are seen as inferior to men (see Rosaldo, 1980; Rosaldo and Lamphere, 1974). Here, pollution theory is understood within a framework of gender symbolism, where “women”, by virtue of their physiology and reproductive roles are understood as polluting. Within this scheme, menstrual taboos again, become a signifier of female oppression (Moore, 1988).

Thomas Buckley and Alma Gottlieb’s work Blood Magic (1988) provides a comprehensive account of anthropological work on menstruation, the only anthropology text to do so. The authors focus on symbolic approaches to menstruation, yet remain critical of this form of analysis. They call for the study of menstrual taboos to be context-specific, not directed toward developing a generalising theory of cultural “types” in which certain menstrual taboos become signifiers. They also state that the analysis of taboos should not be causal. Explanations should not centre on why certain taboos exist as the meaning and reason for taboos to change over time.

Works that approach the study of menstrual taboos cross-culturally are often faulted in this way. Pulling a specific taboo from the cultural and historical context of those who practice it would eliminate those specific meanings ascribed to it. As with the practice of menstrual seclusion reasons for the adherence to such a taboo will vary across cultures and through time. It is in this way that cross-cultural and evolutionary

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not even alluded to. “Women”, therefore, on the most basic level, is in the literature on menstruation a category defined by biology.
approaches are easily exhausted. They often ignore the historical and specific significance of menstrual norms and beliefs.

Also mentioned in *Blood Magic* is a need to include the experience of menstruation. Menstruation, as a physical process and experience has often been presumed to be universal. Understood as a monthly cycle which is accompanied by physical pain and psychological stress (PMS), the experience has largely been understood as unpleasant, coinciding with western conceptions of menstruation. From this, assumptions regarding the occurrence and meanings attached to menstrual taboos can be formulated which perhaps do not correspond to a specific context. Researchers have been able to show that the experience of menstruation differs throughout the world. Pre-menstrual syndrome (PMS) identified as a disorder by western medical science is not universal (see Martin 1987). Marjorie Shostak’s *Nisa* (1983) was revealing in this respect. Through gathering life histories and conducting shorter interviews with over 200 !Kung women Shostak found that !Kung women had far fewer menstrual cycles than women living in industrialised countries, and did not experience any form of pre-menstrual syndrome. She states:

The !Kung did not have any expectation or belief comparable to that held in the West of a pre-menstrual or menstrual syndrome. Nor did they recognise any effect of the menstrual cycle on women’s moods or behaviour. They were surprised when asked about it, saying that menstruation was such an unimportant event that it didn’t deserve much concern. (I mentioned to one woman that women in my country are occasionally unhappy around the time of menstruation, and she suggested that it might be because their husbands were not having sex with them while they had their periods). (353)

These works reveal some of the assumptions which have shaped an anthropology of menstruation. In many ways menstruation has not been studied at all. What has
interested researchers has allowed menstrual practice to be isolated from women’s experiences and understandings of menstruation. Emily Martin’s *Women in the Body: A Cultural Analysis of Reproduction* (1987) provides an analysis of western medical scientific views of the female body. Martin explains that it is often difficult to recognise how contemporary scientific ideas are infused by cultural assumptions. They become “facts” and universal “truths” that are difficult to question (see also Delaney and Yanagisako. 1995). She illustrates how scientific authority has affected and shaped women’s conception of their bodies in western societies. Providing a genealogy of scientific and medical knowledge Martin states that within scientific discourse,

Menstruation not only carries with it the connotation of a productive system that has failed to produce, it also carries the idea of production gone awry, making products of no use, not to specification, unstable, wasted, scraps. However disgusting it will be, menstrual blood will come out (46).

It is this underlying conception of menstruation, related to a sexist construction of the female body, which pervades western scientific analysis, and often goes unquestioned in menstrual studies. In looking at a college textbook description of the process of menstruation, Martin is struck by words such as “degenerate”, “decline”, “withdrawn”, “spasms”, “lack”, “weakened”, “deteriorate”, and “dying”. Martin states that these are not neutral terms. The same textbook describes male reproductive physiology as “remarkable” and “amazing”. The description of the shedding of the stomach lining, a process analogous to menstruation, focuses on the “renewal” of the mucus lining, not its “decay”.

Martin’s work illustrates how anthropological studies of menstruation need to deconstruct scientific authority regarding menstruation as well as situate anthropology in
relation to scientific discourse. In doing so, studies can possibly recognise how scientific knowledge affects the way local theories of menstruation are viewed within anthropological discourse, allowing “local knowledge” systems a larger or guiding role in cultural analysis.

As consumption studies come to play a more important role in anthropology (see Appaduri, 1986; Howes, 1996; and Miller, 1987), it is interesting that none of the anthropological works focused on menstruation acknowledge menstrual material culture. The experience and practice of menstruation remains relegated to the private domain within anthropological discourse. By this I mean to say that menstruation has mainly been studied as a domestic practice only. Most studies have been focused on “other” cultures and have tended to shadow the physical experience of menstruation with symbolic analysis and medical scientific “facts”. The link menstruation shares with global political economy has been mentioned little, if at all. In this way, menstruation becomes less of a public issue or lived experience, and can be dealt with comfortably. A key task of this thesis is to theorise menstruation as both part of the public and private domains of life. Within this study menstrual culture is understood as material, experiential, symbolic, and biological.

The eight separate works (excluding Emily Martin’s contribution as her analysis is not symbolic) in Blood Magic, though quite valuable, do just that. The contributors do attempt a break from conventional assumptions and analysis regarding menstruation and menstrual taboos. However, their focus remains on the symbolic analysis of them. While I recognise taboos as important to the study of menstruation, to begin an analysis

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9The definition I use for the phrase ‘local knowledge’ can be found in Henrietta Moore’s introduction to The Future of Anthropological Knowledge (1992).
from this point allocates menstrual taboos an extravagant amount of importance within a particular cultural scheme. Furthermore, the contributors’ attempt to be context-specific works to hinder their analysis. Their studies do not consider a growing global and commoditised menstrual culture, and do not express the heterogeneity of experience and understanding of menstruation between women, which change through time. By presenting menstrual experience and taboos in this way their analysis is not only context-specific, it becomes context-bound. The difference between “our” experience and understandings of menstruation and “their” experience and understandings of menstruation is therefore stressed. In this way, cultural groups become homogenised and distinct by their difference to the rest of the world.

**Menstruation and Political Economy**

In 1992, Canadians activists Liz Armstrong and Joan Scott wrote *Stop the Whitewash*. This book linked menstrual practice, beliefs and material culture together through a critical analysis of the feminine hygiene industry in Canada and the US. They explain how tampons and pads are made, advertised and disposed of. By exploring issues of safety, cost, and waste disposal, they present menstruation as a public and global process, which the anthropology of menstruation has yet to do.

The latest work released on menstruation is *The Curse: Confronting the Last Unmentionable Taboo: Menstruation* (1999). Written by journalist Karen Houppert, this text explores and analyses western menstrual beliefs and practices. Houppert breaks down and exposes beliefs of menstruation which shape western ideology. Applied to anthropological knowledge, the same assumptions have shaped the anthropology of
menstruation. *The Curse* includes research on the feminine hygiene industry, the adolescent experience of menarche, PMS, the medicalisation of menstruation, as well as recognising spaces of resistance to western consumer conceptions of menses. Houppert is able to illustrate that a culture of concealment surrounds menstruation as women and young girls are told again and again that menstruation is private and dirty, something to be hidden or treated as an inconvenience. She explores the 8 billion dollar feminine hygiene (a name which gives shape to the western consumer ideology of menstruation) industry revealing its role in shaping and transmitting information about menstruation and the female body. Although not an anthropological text, Houppert’s work moves in the direction which an anthropology of menstruation must proceed in order to create a body of knowledge which recognises the realities of menstruation in the contemporary world. As the industry becomes larger and more global, the conception of menstruation carried by menstrual care products can affect (or be affected by) the experiences and understandings of menstruation around the world.

**Conclusion**

The purpose of compiling these previous works on menstruation has not been to devalue them as useless. These works provide valuable information regarding menstruation and cultural constructions of menses. But more importantly, they are critical to understanding the construction of anthropological knowledge regarding menstruation. Anthropological discourse appears to be acting in accordance to its own menstrual taboos and rules. So what’s missing? 1) Menstruation as material culture, connected to global political economy, therefore both public and private. 2)
Menstruation as a biological/physical process and experience, and 3) The description of how menstrual taboos are experienced and lived through. To include these aspects of menstrual life, the complexity of menstruation as both part culture and part biology becomes apparent. The concept of menstrual culture attempts to develop an analytical framework to address this complexity in a particular western context. This thesis is an attempt to situate, historicise, politicise, and publicise menstruation, and by extension, women's bodies.
1.4 Conceptual Framework

Phenomenology is a mode of thought which views the body as neither passive nor completely commanding, rather that the way individuals understand the world is contingent on the ways in which their body experience it and projects their beliefs and feelings. Using this perspective the mind and body become inseparable. Human consciousness is regarded as caught up in and part of the realities of material existence (Jackson, 1996). It is in this way that I approach a study of menstruation. What has been absent is a discussion of women’s experience of menstruation, an acknowledgement that menstruation is a process of the body, and is something that is felt. Not simply in the sense of a passing of blood or the bloating of cramps, but that menstruation shapes subjective perceptions of the body, feeling clean or unclean, feeling sexualised or powerful, defined or absent from one’s body.

Lila Abu-Lughod’s *Writing Against Culture* (1991) shapes my use of a phenomenological approach. In this article, Abu-Lughod illustrates how anthropology, through a variety of different mechanisms, has allowed a dichotomy between the ‘self’ and "other" to pervade the discourse. In doing so, a conception of “culture” has formed which allows and strengthens a timeless and static concept of “difference”, similar to the term “race”. Menstrual studies in anthropology have contributed to this conception. In order to produce theory and text which is neither context-bound nor generalising, Abu-Lughod provides three different methods, to be used together. These methods coincide with the principles and methods of feminist anthropology and the project of decolonising the discipline.
At the theoretical level, Abu-Lughod offers two terms in place of "culture": *practice*, being the strategies, interest, and improvisations of people; and *discourse* “which allows for the possibility of recognising within a social group the play of multiple, shifting, and competing statements with practical effects” (147). Focus is on what people do, how they feel about what they do, what they think they do, and why. It is important in recognising and working with the contradictions which shape people’s lives. This method is similar to Ortner’s definition of a “practice approach” (Ortner, 1989:12), a focus on people’s actions in order to understand the social structure which they interpret, act upon, and live within.

At the substantive level, Abu-Lughod calls for a recognition of the connections between the world of the researched and the world of the researcher/anthropologist. The question of connection is not asked in general or overtly, but rather woven through ethnography and analysis by tracing specific and particular histories. The inclusion of such thinking within fieldwork and text can allow the anthropologist to address a number of issues, such as the inter-subjective nature of fieldwork and the construction of anthropological “facts”. By tracing the historical process of colonialism, imperialism, and globalisation, an awareness of the connection between the anthropologist and the communities s/he studies allows for a recognition of the power relations which have made the relationship possible. Abu-Lughod states that at this level it is important to acknowledge the “national and transnational connection of people, cultural forms, the media, techniques, and commodities” (149), in presenting studies within a global context. By doing so, the problems inherent in a concept of “Culture” which is bounded by geographical location, are ultimately revealed.
In terms of my specific study the recognition of these connections is important. It could be assumed that I am an insider, a member of the community within which I conducted my research\textsuperscript{10}. However, as soon as I become the anthropologist and the researcher, my relationship to those around me and the community on a whole, changes (see Narayan, 1997). Furthermore, the women with whom I conducted interviews have not necessarily lived in south-western Ontario all of their lives. Many have immigrated from parts of the world appearing quite different from this area of Canada. I say this not to stress difference, but rather not assume familiarity. I also recognise that women interviewing women is not an unproblematic activity (see Stacy, 1991). What is important is that the power relations between research and researched are acknowledged consistently as well as the historical contexts and the interconnectedness between the local and global.

As stated in the previous chapter, anthropological studies of menstruation have yet to include an acknowledgement of the global menstrual care industry. Understandings and experiences of menstruation are part of those systems of colonialism, imperialism and globalisation that Abu-Lughod refers to. As stated earlier, studies have largely focused on the "other" and have considered menstruation as a "private" activity of women. My study will consider menstruation, as a political and "public" reality, while acknowledging the use of public/private dichotomies in both menstrual ideology and practice. It is hoped that further studies of menstruation and menstrual taboo will also employ this perspective.

The third method advocated by Abu-Lughod is what she calls "ethnographies of the particular". By "particular" Abu-Lughod does not mean a focus on micro relations

\textsuperscript{10} I grew up in Windsor, Ontario, and conducted the majority of my fieldwork there.
over those of the global system. Rather, her goal is to move away from a language of
generalisation, which she describes as a language of power and abstractions. This
language flattens out difference within “culture”, intensifying concepts such as
coherence, homogeneity and timelessness. “Ethnography of the particular” involves
telling stories about particular individuals in time and space” (153.) How individuals live
and understand their lives and the lives of others. For example, a “culture” can be said to
practice menstrual seclusion. Instead of simply stating so, or describing how one
participates in this menstrual taboo, we ask how one lives the taboo we call “menstrual
seclusion”, how a person might experience this “cultural norm”, how they practice it and
understand the reasoning for doing so. In this sense, the agency and knowledge of
individuals and groups may be affirmed while addressing the constructedness of social
life. A focus on the particular may also be able to show that it is the particular histories
and people which create community, society, and nations; there may be no minimal
general experience to be found.

The life course framework of presentation and analysis follows in Abu-Lughod’s
“ethnographies of the particular”. The centre of analysis is not the individual, but rather
the relationship between the individual and history, society and other community and
family members. Within this framework, the role of the individual is recognised as fluid,
depending on and changing with age, and on modifying family units, relationships, and
other factors. Change is constant, shaped by culturally constructed biological time tables
(menarche, menopause) and social and economic change (the creation of the commercial
tampon) (Adams and Hareven, 1982; Rosenmayr. 1982). In this way, the particularities
of a person's life may not only be acknowledged, but also become a guiding factor of analysis.

In my study, part of the collection of data regarding menstrual ideology may appear outside of the practice of women's individual lives. This would include researching media such as the internet, advertisements, and science textbooks. But I will also be seeking an understanding of menstrual ideology through women's words and actions. Asking women to talk about the products they use and the way they feel about menstrual blood is a way to express ideology in action, as a process. Within the conceptual framework of this thesis, ideology will not be treated as an entity outside or separate from practice.

In approaching experience in this way, a language of familiarity may emerge. This is not to contradict the concept of generality which Abu-Lughod writes against, but is rather a recognition of the similar understandings of life which can appear between different experiences. Abu-Lughod calls this "tactical humanism" (159). It can emphasise similarities without homogenising human nature. It will allow me to discuss the female body and menstruation without generalising the experience as a universal process, or presenting women as defined by their reproductive biology.

The study of menstruation poses a difficult challenge to feminist anthropology. The core of this problem lies in the unhistorical, atemporal nature of the category "Women". If what defines women as "Women" is the eternal fact of biology, this definition will intrude into any attempt at historical and theoretical specificity. Menstruation can make this type of categorising so much more easy and smooth. Women menstruate, men do not. In many ways menstruation can be seen as binding
women to biological fact, making women the “other” of anthropology’s gaze. Perhaps, feminist anthropology has little dealt with menstruation because there is such an uncomfortable blurring between the self and other, as well as a conscious effort to move away from biology and biological determinism. And yet, this biological “fact” seems to vary so greatly throughout the world, in its understanding, construction, and experience. It is important that this variance be expressed. Furthermore, this blurring of self and other has been an important methodological and theoretical tool for feminist anthropologists working to illuminate and deconstruct the shaping of anthropological knowledge.

A study of menstruation though the particularities of individual experience over time can dismantle concepts of the body as pre-social (Butler, 1980) This postmodernist claim tends to ignore the power relations and lived experience grounded in the body. While this may be an attractive assertion, an approach which allows women (and men) an unlimited range of gender identities, which the feminine hygiene industry for instance, may help to fuel, it still ignores the lived experience of the body within a system of power relations which remain patriarchal. I turn to Susan Bordo’s (1999) concept of “materiality”, or the “finitude of our bodies”. Bordo describes this as “our inescapable physical locatedness in time and space, in history and culture, both of which not only shapes us but also limit us” (182). Menstruation may be a tool in what Bordo calls "bringing the body to theory", not as a defining feature of what women are, but as a factor in understanding how gender is constructed within the relationship of biology and culture.
What I am calling for are menstrual studies which are contextually situated, but not contextually bounded. Emphasis needs to be placed on the experience and process of menstruation. Western constructions of menstruation need to be deconstructed and situated. Furthermore, the global and political aspects of menstruation need to be recognised and analysed. I call, in many ways for a feminist phenomenological anthropology of menstruation. Menstrual ideology through practice should be expressed and used in understanding how menstruation is constructed within relations of power on both the local and global levels. In this way, menstruation does not necessarily bind women to their bodies, nor unite women throughout the world. A language of familiarity, diversity, and heterogeneity, may then emerge and change the study of menstruation and the female body.

I do not think that studying menstruation will necessarily change how anthropological knowledge is constructed, but I think it can play a role in this task. I do not think it is the only study which is capable of doing so, there are many. But, I do feel menstruation may provide a space in which biology and culture have to be analysed, not as separate domains, but as interrelated factors shaping the construction of gender identity, economics, science, religion, and politics. The study of menstruation offers many challenges which have yet to be embraced. I am presenting my effort in this task.
1.5 Field Site and Methods

The research for this thesis was conducted in south-western Ontario, mainly in the city of Windsor, between October 1999 and March 2000. The methods used in data collection were various, as I believe it is important to approach a subject through a variety of sources. I wish to briefly outline those methods here.

In researching the feminine hygiene industry I conducted thorough searches of the Internet. I collected the material created by the industry through their web sites, T.V. and magazine advertisements, pamphlets, as well as teen magazines and other sex education resources. I also was able to interview different stores which carry menstrual care products and discussed the merchandising, sales, and general perceptions of the products and the profit they bring in. As well, I conducted survey work with women of different ages and ethnic backgrounds regarding their choices and perceptions of menstrual care products. This data was compiled through an anonymous and brief questionnaire completed by 100 different women (see appendix). In researching a medical perception of menstruation I was able to interview some doctors and nurses. However, the bulk of information regarding the medical ideology of menstruation is based on library research.

I employed Abu-Lughod’s "ethnographies of the particular" through both shorter interview and life course methods. I recognise that these are not unproblematic. There remain issues of ethics, authenticity, honesty and power which I hope I have consistently acknowledged (See Abu-Lughod, 1990; Cole, 1991; Gluck and Patai, 1991; Jourdan, 1997). As I was asking questions that are generally considered "private" or personal (about sex, menstrual blood...) it was important that a level of comfort be reached before any interview was recorded. Furthermore, it was made very clear to all interviewees that
they did not have to answer questions that made them uncomfortable. While the majority of control remained in my hands, particularly in terms of analysis and presentation, informants did know that they also had a say in the direction and shape of the interview. They were able to tell me what information they did not want included in the final product, and they were assured that their identities will remain concealed. I was also able to give some of the women presented in the life history chapter a copy of their completed life history for their review and approval. While there remain certain issues related to this method, oral histories are an important tool of feminist research, and I understood them to be most suited in collecting "ethnographies of the particular". Life history interviews allow for a richness in information, as well as offer women subjects an important space to make themselves heard. This way subjects are able to express and explain their actions and experience in context, rather than simply listing them (Cole, 1991; Gluck and Patai, 1991). I wanted to understand menstruation and menstrual culture through lived experience.

I conducted short interviews with 18 women of varying ages, class levels, and ethnic background. These interviews would last anywhere between 30 minutes and two hours. I used a basic questionnaire (see appendix) to provide guidance and direction to the interview. For the most part, the questionnaire was very useful and was followed. The single interviews cannot be found in the thesis in full. Rather, they provided me with important guiding points for the research, allowing me to consider the possible range in answers to the same questions. They also play an influential role in analysing menstrual culture as they were considered and employed as a useful source of knowledge regarding menstrual experiences and beliefs in south-western Ontario. These women were all very
kind and open in their responses, and allowed me great insights in understanding the experience of menstrual culture for each of them.

Longer, more detailed, life histories were collected from six different families of women. Originally they were to include at least three generations of women, but I ended with wonderfully rich and complex life histories from two-generation families, and could not bear to part with them. From these six different family interviews, I have chosen four to present in the thesis. They were chosen for the richness they provide, and the comfort the women had in sharing with me their personal experiences. All of the families were very open and provided marvellous tales of their menstrual lives. I would have included all of them had space allowed. Unfortunately, given the amount of information life histories entail, I had to narrow the choice down to four, so as to omit the least amount from each individual life history. The four families presented in this thesis best represent the diversity and familiarities of menstrual experience and beliefs that I encountered throughout the research process. The life history interviews were completed in anywhere from one to four different sessions, each lasting between one to two hours. I used the same interview questions that I had with the single, shorter interviews. These questions provided a base with which to work. The interviews tended to be part formal (with the questionnaire) and part informal, asking interviewees to recount their life experiences, looking at menstruation through those experiences. In addition, each woman filled out a menstrual care product questionnaire which was kept with their interview. Also, each woman was given a blank notebook in which to add any additional comments regarding the interview process, and information they had remembered or wished to add once outside the interview context, and to record the experience of a current menstrual cycle.
The fieldwork took place in Windsor, Ontario, with some ventures around the nearby areas (Sarnia, Toronto). I have lived in Windsor since I was five years old, so the majority of my growing up took place there. It has a population of approx. 200,000 and has been growing quite rapidly as of late. In 1994 a Casino was built and since that time, there has been a marked increase in construction, population and business. Windsor is also the Automotive capital of Canada (Ford, Chrysler and GM all have factories in the city) and along with the Casino, provides the majority of work in the area. There is also the University of Windsor which brings many students from the nearby towns and cities. As Windsor borders Detroit, there is also an American influence within the population, though many would deny its effect on popular culture there.

In finding women to interview and participate in this project, I used the networks that I already had in the city. Granted, this network has grown immensely, each one of the women involved in the research had a relationship with me outside of the project. They were/are my neighbour, my doctor, my teacher, my friend, my mother’s friend, my father’s colleague, my friend’s sister or co-worker, or neighbour. These outer relationships worked to both hinder and aid my work. I have responsibilities to ensure their anonymity, not simply to strangers who may read this thesis, but to people who know them, and live with them on a daily basis. It was also important for me to be able, during interviews, to suspend these outer relationships to some extent. I had to ensure that a women I was interviewing did not view me as their daughter’s childhood friend, but as a professional researcher who would ensure confidentiality in the life events shared with me. In terms of the presentation of family interviews, I have had to take great care to least affect the family relationships involved. Many of the women I interviewed did
not want other family members to read their stories, or rather, specific aspects of their lives. This is difficult as the life histories presented in the thesis are public, and cannot be kept from family members who wish to read them. Care was taken in presenting these women’s lives, omitting information not crucial to the study, that would make them uncomfortable. For the most part however, these networks provided a great deal of comfort for me. Most women were able to feel at ease in discussing personal matters with me. Being a member of the community, I was able to gauge the meanings of ambiguous language and share in an understanding of location and community history. Because of the nature of this research, the connections I already had in the city gave ease in locating interested parties and understanding the history and experiences of these women.

I did not begin conducting the life history interviews with families of women until I had compiled the data drawn from all other forms and tools of research that I employed. Although I was conducting research in the city I had grown up in, and although I too am a menstruating women who experiences and participates in menstrual culture, I knew that I could assume nothing about the kinds of data I would find. I had ideas about how women living in south-western Ontario might perceive menstruation, but they were not concrete, they were more of a hunch. Conducting research “at home” is difficult: one has to question aspects of life one would otherwise take for granted. Furthermore, in collecting data, one has to be able to recognise what one knows based on responsible and thorough research, and what one believes based on one’s everyday life, childhood memories, and own adolescent discoveries. Simply because I was a women who had grown up in the area where I was conducting research did not mean that I already knew
how menstruation was perceived and experienced by other community members. I had rarely spoken about menstruation to other women before I began this project. Furthermore, any conversation I had had before would have occurred within a small cohort of peers. Through conducting this research I realise how important an anthropology at home can be.

First, I recognise that there is no knowledge that can be taken for granted. Once I began this study I realised how little I know about the different ways menstruation could be understood and experienced by women. Many of my assumptions fell apart, because they did not speak from the beliefs other women held about menstruation. I quickly discovered that I knew very little about the ways in which women considered and observed menstruation. Secondly, although I have always felt that researchers have a great responsibility to their research subjects - in presentation and data collection and in terms of the time they sacrifice and the personal experiences they share - I have never had research subjects to be responsible to. Because the women involved in my project were also, in some way, part of my own personal networks, that challenge of responsibility could never escape me. I was consistently aware of the ethics and concerns that could arise in a research situation. Most anthropologists recognise and act in accordance to these responsibilities. For me, in experiencing my first field research at home, the kinds of concerns and issues that arise from the research context have become quite visible. I know that I can never leave the “field” behind. I know that many of the women who participated in my research will read my findings and engage in my conclusions. The responsibilities I have to the women involved in this thesis did not end when I started writing, and will continue long after I have put down my pen.
Lastly, by conducting research at home, within a western context, I was able to critically explore and analyse the kinds of assumptions and biases that shape western discourses regarding menstruation. I was able to fully explore the questions I had about how anthropology has treated menstruation. I know now that the experience of menstrual taboo is not isolated to non-western societies. I know now that women experience menstrual cycles differ entirely, that it is not a universal process. I am also certain that the politics of commercial menstrual care products play a role in how societies perceive menstruation, and how women experience menses. By conducting field research at home, I could put the discipline of anthropology on its head.

Unfortunately I was not be able to include studies and discussions with males. For the purpose of keeping this study specific and focused, I did not include men equally as research subjects. Interviews with male family members and community members are important in providing a more holistic understanding of menstrual culture. I recognise this lack in my data as a deficit, and had hoped to include discussions and interviews with males regarding there experiences of menstruation (via women in their lives and media such as television advertisements). Given the time and size constraints to this research I could not do so, but intend to in the future.
Part Two:
Life Histories
2.1 Introduction

If cultures are fluid, dynamic, historically situated, part of society and part of the individual, then what better way to present culture than through life history? I have explained why I chose this method of collecting and presenting menstrual culture in south-western Ontario. I would like to explain why I have chosen to conduct life history interviews with families of women. It may seem obvious, as menses is often considered an activity and concern of the domestic domain: the household. The irony is not lost on me, but I am certain that I present households as part of both public and private activity and production (on both symbolic and material levels), and transcending the public/private dichotomy. I wanted to present the complexity of experience and understanding women had regarding menstruation, and in this way I need to present the complexity the household. By using the life histories of families of women, by making women’s experience the entry point of research, I knew that this complexity would become visible. Furthermore, it is often assumed that mothers are the major sources of information regarding menses for their daughters. This is often true, but the following life histories will also show that sometimes mothers do not play such a role in their daughters’ lives.

Furthermore, by focusing on families I am able to present menstrual culture through a larger span of time, beginning in the early part of the last century, introducing the historical changes that shape women’s perceptions and experiences of menstruation (the introduction of tampons, or the Toxic Shock Scare in the 1980’s). It has been stated that each generation develops a new approach to culture and the world around them, resulting from different historical events and the influences of past generations.
(Rosenmayr, 1982). I have taken this into account and wanted to show how different generations of women might view menstruation and women’s bodies in distinct ways. There are differences, yet in the following life histories you will also find that there are some remarkably interesting similarities between generations as well. I was able to provide the perceptions and relationships between different generations, by having mothers talk about their daughters’ menarche, or about their own mothers’ ideas about menstruation. The result has been a richness in storytelling that allows the reader to better understand and relate to the life histories. By presenting menstrual culture through families of women I have been able provide historical background, show both difference and familiarity, present menstruation as a lived experience, and present the individual and familial circumstances which shape people’s experiences and beliefs.

Bodily histories are the “psychosocial experience of going through one’s life course, within specific and historical and sociocultural spaces, with a particular body” (Lee and Sasser-Coen, 1996: 9). In many ways the following sections will be a presentation of 14 different bodily histories. I like this term because it recognises a life lived through the material limitations of a body. It is useful and poignant in presenting menstruation as a biological experience, but in the end I have chosen not to employ it. Perhaps my choice is simply based on my familiarity and comfort with the concept and term “life history”. But I think my choice is based on the stories women told me about their lives, the way they told me about their lives. It wasn’t so much a telling of a life as lived through a body. There are definitely numerous spaces where menstruation, and even women’s bodies, do not seem present. Rather, lives were presented as having different spaces. Life was lived and time passed in women’s presentations of their
histories without necessarily acknowledging their bodies. Time slows when we discuss bodily experiences; it is located in anecdotes and particular events. It is a different space, where one is openly part body. For this reason I feel discomfort in calling the following section bodily histories. Perhaps it is my preconceived notion of what a bodily history would entail. We all know that while discussing one’s activities at work or relationships to fathers, daughters, mothers and sons, that bodies are there, bodies are always a part of the lives we lead. But I found the way the women told me the stories of their lives and of their bodies telling. I think it speaks to the mind/body dualism in western culture.

So part of what you will read will seem to have nothing to do with menstruation, and may seem irrelevant. It isn’t. Part of this project was not simply to look at specific biological events in a woman’s life span: menarche, pregnancy, menopause, though all very important in understanding a woman’s experience of menstruation and her body. I also wanted to place these different women in a specific historical context with a particular family history. These different aspects to their lives shape the persons that they are, and the ways they relate to other people. I think the possible “extras” to the life histories allow these women a greater opportunity to present themselves as whole people, rather than as simply menstruating women. This was how they presented themselves to me. it seemed clear to them that they were much more than a menstruating body. This is consistent with the theoretical approach I am taking to menstruation, that menses is not experienced universally. That it is processual, diverse, experiential, and situated.

I chose to present the life histories as seamless narrative because I wanted them to be readable, to be enjoyable to a wide range of readers. It was important for me to write in an accessible rather than exclusively academic style because I felt accountable to the
women in my study and to others who might find interest in my topic. I wanted this thesis to be accessible and stimulating to a wide audience. I have structured and edited the life histories through my analysis of menstrual culture. The interviews did not follow the same path that these life histories do. The life histories also include passages from the blank notebooks I had given the women, and as well include their answers to the menstrual care product questionnaire. In addition, the life histories are a result of the kinds of questions I asked women, questions that were the result of my methodological and theoretical approach to menstruation. If I had asked women to simply recount their menstruating lives these life histories would look quite different. In an attempt to involve the women in this study and with the process of writing ethnography, I also gave some of the women present in this thesis a copy of their completed life history for their review and comments. For the most part their responses were positive, even though many found reading the presentation of their lives quite awkward. I want to both stress the integral role the women had in the final version of the life histories, and at the same time emphasise that ultimately, the finished product is my responsibility and is the result of the theoretical and methodological framework I have used in studying menstruation.

These are the stories of women I know well. I feel such responsibility in sharing their lives with others. These interviews were conducted during a specific period of time, so for many of the women, their perceptions about their bodies and their lives may have changed, or will change in the future. The following, while presenting women’s lives with fluidity and transformation, remain snapshots of lives, affected by each woman’s circumstances during the research period. The following are the life histories of 14 different women and for the moment of this thesis, are frozen in time.
Tara’s Family
Margaret Kennedy\(^1\) (b. 1949)

Menstruation is bleeding that happens almost every month. If you look on a calendar you could figure out that it would happen once a month. It can go from three to five days as an average. The bleeding is only in women, and it's from the vaginal area. It's a special area where women bleed. They bleed because they have a uterus. If the women doesn't become pregnant she will bleed. It's a way of cleansing the uterus and uterine tissue that were there to help nourish a new offspring.

"If I had had a choice to menstruate or not to menstruate, if menstruation wasn't linked to fertility, I would have chosen not to. My cycles were too painful, too heavy, and not at all regular. But I had a trade-off. During all those years off erratic, messy and painful menses I was just a housewife. It wasn't like anything was hindered, I could just accommodate it. I didn't have to sit at a desk and look pretty in an office all day when I felt dumpy. When I felt dumpy, I felt dumpy and that was it. But, I think there was a time when menstruation was very disruptive. My mother never made me feel that way. She told me what to do if anything got stained, and she treated menstruation more as a fact of life then a curse of God. But my husband's mother, she had such taboos. His mom's family was very old school catholic. That's the way they were raised. I remember her being so upset when her niece came to visit and she had bled in the bed. I came over to visit and asked his mom how Erica was. She told me 'Oh, she was sick in the bed'. And I said 'Oh my god! She was sick in the bed. What happened? Did she eat something bad?'. 'No', she said 'Sick in the bed'. And then I realised she was scrubbing these bed sheets, so I said 'Well, did she throw up much?'. I was clueless! They called it the sickness or the curse. It was as if Erica had done a disgusting thing. She had a period, she had it in her bed, and Paul's mom was cleaning it up. If Erica had thrown up in that bed, if it was vomit Paul's mom was cleaning, she probably would have been pleased as punch. So weird.

\(^1\) All of the names used in the life histories are pseudonyms.
“I was born in Alberta in 1949, but we moved around a fair bit. They weren’t really rapid moves. There were years in one place and years in another. My mother was a housewife and my father a chemist and we moved around on account of his work. From Alberta we moved to British Columbia, where my sister was born. She’s three and a half years younger than me. We finally ended up in Nitro three years later. It’s a little town just south of Montreal, near the St. Lawrence Seaway. It was mostly a French community. There were English people there, but the company my father worked for was predominately French. He didn’t know how to speak the language, but since he was a chemist it wasn’t really a problem. Oxygen is O2, no matter what language. We lived there until I was thirteen.

“I think I was around nine years old when I started to learn about women’s bodies, but this learning was gradual and was mainly from other kids. I didn’t really learn about menstruation right away. I learnt about closeness and kissing. It was more or less the taboos of sexuality as opposed to menses. One of the girls that was in my grade five class, she was raped. She was very very developed, she must have been a 38-bust already in grade five. Sometime before finding out about that rape I sort of knew about menses because kids were saying something like ‘she bleeds’, something like that. But I didn’t understand it. On the day I began to menstruate my mother was going into the hospital for a spinal fusion. I had been cramping quite a bit at first and I didn’t know why I was experiencing all of this pain. She was getting ready to go to the hospital when I actually physically started. I kept trying to get her to come into the bathroom, because it was private and one of our neighbours was over, a real busybody. The bathroom also seemed the appropriate spot to discuss that sort of thing. I kept moaning and groaning louder and louder, to get my mother’s attention. Calling her to come upstairs. And she kept telling me to come to her. The neighbour kept yelling at me to stop bothering my mom because her back was really really bad and she couldn’t keep getting up and down. But I just kept moaning and my mother never came into the washroom.

“I wanted to give my mother the opportunity to tell me about using pads and everything else. I already knew about the pads by then, I even knew where she kept them. But she had not yet told me anything! I went into the living room twice, that’s where she was resting. I was kind of upset because I had stained a bit on my skirt, but nobody
noticed it. Finally I gave up and just put a pad on. That was back when you had to use
the belt too. Those stupid, ugly belts. The clips were metal at first and would get stuck
and pull and pinch and tear. It hurt! I had it in my mind that I had to wait until the last
minute because I figured that she probably knew exactly how many pads she had. If any
were missing she would notice and I would get in trouble for going through her things,
like with her cigarettes. When my girlfriend tried to get me to smoke cigarettes we took
from my mom and I was so convinced that my mother would know that we had taken one!
Anyway, it was awful. I was cramping and cramping. But I wasn’t flowing real heavy
yet. The hospital was 45 miles away. a long car ride, and my parents insisted that I had
to go. It was unbearable. The drive was horrible, the cramps so bad, and I was upset
because my mother hadn’t come in to the bathroom. She had had an opportunity to tell
me about menstruation, and she didn’t.

“My mother was going to the women’s only wing at the hospital, so a lot of
pregnant women were being admitted. Back then they had to bring their own pads when
they went in to deliver their babies, the hospitals didn’t supply that kind of stuff. So I saw
-all these big boxes and being deliberately rude, in the elevator I asked my mom why all
the women were carrying those boxes and she wasn’t. I don’t remember how she
responded, but I know I wasn’t satisfied with her answer. It was on her mind to be in the
hospital. My little sister was there, my dad was there. So I didn’t tell her. I thought
she’s going into the hospital, she’s going to have major surgery, the next time it happens
I’ll pretend it’s the first time.

“After my mom was dropped off at the hospital my dad had made us go with him
to a restaurant. The evening was long. When we were driving home the car broke down
and we got stranded right outside the Montreal Forum. It was unbelievable because
while we were stranded a hockey game ended, and it was pandemonium. There was a
million people all of a sudden, and I was in so much pain all I wanted was to lie down on
the sidewalk and die. I really did. I had nothing to take, and I didn’t even have any
changes of pads. I had only put that one on. Of course nobody could fix the car right
away, so we had to abandon the car in the city at a garage, and take a greyhound bus
home! We didn’t get home till midnight. It was awful and got even worse. The next day
I ended up in the hospital. I woke up during the night and my pillow was warm and wet.
I turned on the light and there was blood all over my pillow. I had had a nose haemorrhage\(^2\). I was freaking out! I thought I was bleeding from all over my body. Nobody told me about all of that, I thought that it was menstruation gone awry. I had really low levels of haemoglobin and iron. I had started coming down with the sniffles earlier that evening, and had sneezed a couple of times on the way home. By this time I was really flowing a lot and I had had to change my pad quite a few times. I thought, how am I going to buy more? How am I going to replace them? And then my father had to rush me into the hospital. I spent the next five days of my period in the hospital! I eventually told one of the nurses what was going on because I needed a pad. I said I had no way to get them, and that they couldn’t tell my father. They had a few from the maternity area, and the next day one of my mom’s friends from the church came. I just pretended like I already knew. I told her that my mom was going to be so upset, that she had left pads for me, but they were at home. I said that my mom had left me enough for while she’s gone, just in case I got my period. I pretended like my mother had let me know all these things. I figured that her friend probably wouldn’t tell her that her daughter had had her first period because I acted like my mother had already taken care of me.

"My mother was in the hospital for a long time. They sent her home in a body cast. I had to do all the housework, take care of her, do all kinds of stuff. It seemed like there was so much on her mind, so I just couldn’t tell her that I had started. It’s like telling a lie I guess, it keeps going on and on and on, getting worse. Things just weren’t regular for such a long time. I actually had my period for about five months before I told her. But during this time I had to get my own pads, which turned out to be quite easy. I didn’t tell my dad or ask him for money. The lady that was my choir instructor at the church had a little corner store. At that time I would go and help out in the store. She

\(^2\) There is an extremely rare phenomenon known as vicarious menstruation, bleeding from the a mucous membrane other than the uterine lining. Seventy per cent of cases bleed along with their regular menstrual cycle, and 30% will bleed at some other time in the month. In most cases bleeding occurs from the nose and is considered as a symptom of Premenstrual Syndrome. The reasons given as to why a woman might vicariously menstruate are several. It has been said to be psychological, or the result of surgical error (bit of lining of the womb may be misplanted into other areas of the body, and will actually still menstruate). The most common reason provided is that some tissues in the body my be particularly sensitive to the high levels of estrogen in the blood just before and during menstruation. This can cause the tissue to redden and swell (Delaney et. al., 1988).
had an elderly mother that she had to tend to a lot. I was only eleven years old, but she used to trust me to take care of the store. The store was in her house, in the front part. At the beginning she would be in the kitchen making something, or doing something for grandma, changing her T.V. channels or trimming her toenails, and I would be minding the store. Eventually she would leave me in charge of the store, like when she took grandma to doctor appointments. So I was working in the store and I would just buy them there with the money that I earned from her. I didn’t like the Kotex or Modess pads, I thought they were cheesy. I think the name of the brand I liked was called ‘Confidence’. I used them until we moved to Stratford and I couldn’t find them anymore.

“When I finally told my mother she was kind of like ‘oh, dear. I knew I should have said something’. I know she had planned on talking to me about menstruation at some point. She had already gotten some pamphlets\(^1\), things like that. She seemed to regret that she hadn’t talked to me about it yet. Then I told her, I had been having a lot of stomach pains for a while. She never had that, she never had the cramps. She did have a lot of leg and back pain, so she just figured that pain is pain. She was empathetic in that respect. She took me through the pamphlet. She didn’t tell me anything about conception or anything like that. She just told me about menses. That when you don’t have a baby that you get your period. Also, she told me what I should do if my panties get stained. That I should rinse them out right away, and leave them soaking. She gave me a spot in the bathroom where I should put them so that they are not visible to people. It was pretty good, our talk. She asked me if I had any questions, and at the time I didn’t. I just figured, ‘oh I’ll bug her later about where babies come from’. I guess basically that’s the only thing she left out. It was never discussed around my father. If he ever bought a product, I sure didn’t know about it. I was raised never to leave anything around. I remember one time I went to the washroom and made a change and forgot to flush the toilet. By the time you go through all that paraphernalia and change this and go through that, you forget you went to the washroom in the first place! It happened to me only once. But my father was the next person in the washroom and he freaked out! He went to my mother. And then my mother told me. And then I heard his disgusting

\(^1\) Discussion of the pamphlets and other educational tools created by the hygiene Industry can be found in Chapter 3.3.
ruminations in another room. Course he didn’t flush the toilet. She had to look at it and then I had to look at it. I thought that it was something quite accidental, and I was embarrassed already. If only my mother had seen and brought me in there and said, ‘gee Margaret, you forgot to flush the toilet’, I would have been embarrassed, let alone anybody male.

“I didn’t tell any of my friends that I had started. The only girl, the one that maybe I could have talked to, was the one that was raped. She was raped going home from school. She was taken out of school and I didn’t see her for the longest time, so she wasn’t around then. I had a feeling that it wasn’t happening to these other people yet and that it wasn’t something that I could talk about. And the aura, or the message in this society was that this isn’t something you talk about. I knew that my mother should be telling me about it, and she wasn’t. I felt that for the other kids it should be their mothers, not me. So that’s kind of the way it was. By the next year things were more open. I don’t know when the transition was, but everyone progressively started having their periods. Beginning to menstruate, however, didn’t really feel like a rite of passage. Womanhood wasn’t even on my mind. I hung out with a whole bunch of kids, we were like a gang of girls. We were flirtatious with guys. For like three weeks one guy would date a girl, and then he’d be somebody else’s boyfriend. We started going to dances at the community centre. We would have a lot of house parties, where you pull away all of the living room furniture and dance. But, it didn’t seem like womanhood was the thing there. You didn’t feel anymore mature in that way. I know that I started to get that feeling later on, after we moved away. I think it’s just too young. I don’t know if girls feel that way now. We didn’t have all of the advertisements you have now, with images of love and romance. I just didn’t equate it. I didn’t even have a bust yet! They didn’t have those training bras or beginner bras, it was either you did or you didn’t. I didn’t. Besides, I was having such a miserable time anyway.

“I had really bad cramps, and they got progressively worse. By the time I was in grade nine, it was really really bad. I could not function. My mom used to have to pick me up at school all the time. The whole school must have known when I was menstruating! They started up about a day and a half before my cycle. I became very irregular and those cramps were my only warning. I wasn’t on a good cycle. At that
time my period would last anywhere from seven to nine days. The time between could be anywhere from 28 to 40 days. The cramps were bad, and I had two kinds. I could always feel when I was ovulating, in-between my periods. That pain I had for the longest time. I kept going to the hospital and they kept ruling out appendicitis. Eventually I had my appendix out, so they couldn't blame that anymore. It was a clinchy clinchy, kind of grabby feeling in the middle of the month when I was ovulating. The other one was a more generalised kind of cramp. The cramping would gradually get more and more intense. It was sometimes hard to tell if I was really having my period or not. If you put a pad on too early I would get chafing and irritation on my skin. I don't know how many false alarms I would have, but I would have a lot. It wasn't just Wammo! It was a kind of crescendo, and it would be very difficult to plan, I remember that very well. The flow was so heavy. The blood was always very fresh red, arterial. And it wouldn't trail off. The flow would be pretty consistent, and then it would just end.

"I eventually had to go to a specialist. My mom took me to London to see a gynaecologist and he said I had dysmenorrhea, painful menses. One of his theories at the time was fluid retention. So he wanted me to take a diuretic before I would start my period. The problem was knowing when to take it. He would have liked it to be three days before, so I wouldn't have all that fluid. The diuretic thing sort of kicked in, it sort of work, except I didn't get it on board soon enough. I had to go home and do some homework. Write down certain things and wait. It was true, before I was starting my period I wasn't urinating enough. I was clamping down and holding in and there was some retention. And I would be in so much pain, I'd be screaming. My

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4 In a biological description of the menstrual cycle, ovulation takes place around the fourteenth day (so fourteen days after one's last period). Ovulation is the release of the egg, or ovum, from the ovaries. Many women experience a dull ache from this process. If the ache is painful it is called mittelschmerz, German for "middle-pain" (Mallin, 1987).
5 Dysmenorrhea simply means painful menstruation which most often refers to painful cramps, but can include other symptoms such as headaches and lower back pain. Dysmenorrhea is not the same as Premenstrual Syndrome, but many women may experience both dysmenorrhea and PMS. Dysmenorrhea is divided into two types: Primary and Secondary. Primary dysmenorrhea are cramps that occur when the pelvic organs are normal. Secondary dysmenorrhea include the cramps caused by endometriosis and other pelvic disease. Endometriosis will be discussed later in the chapter. Exactly why women may experience menstrual cramps is unknown. The medical health community has pointed to causes such as improper diet (high dairy, high carbohydrate and sugar, as well as high salt intake), psychological (women in conflict with being women), or the result of Prostaglandins, a substance produced in the body in high concentrations before menstruation. Prostaglandins will lead to contractions in the uterus, causing menstrual pain. (Friederich, 1983; Mallin, 1987; Northrup, 1998)
mom used to give me heating pads to help. It comforted me. It made me feel like it was helping. But, I kept turning the heating pad up and up and up. I always had this big red belly. They did try to put me on the Pill. They thought that if I could be more regular that I could take the diuretics three days before. Back then I think the Pill was different components of hormones than it is now. They say now you can get really low doses to do the same thing. I couldn’t take it, but I wasn’t really told why. A lot of the things that went on with that doctor in London I didn’t fully know about. He had a lot of conversations with my mother that I wasn’t in the room for. Lots of things weren’t explained to me, a lot of the rationale. He said I couldn’t take the Pill, he said I was just not compatible with it, ‘it’s not for you’. I didn’t know exactly why, it wasn’t explained to me.

“We moved to Stratford when I was thirteen. We moved right next door to my future husband, Paul. He’s three and a half years older than me. And as I said earlier, his mom was raised in a very religious household, and tried to do the same with those around her. Tampons⁶ weren’t around so much when I was younger but I remember the first time I knew someone who was using them. My sister-in-law, she was not my sister-in-law then, she must have been thirteen at the time, but I remember when first she bought some tampons. I was visiting and we were sitting in the kitchen. I knew what they were for, but I had never bought them or tried them. I just thought I was already going through a lot of pain, I didn’t need to complicate things further. She got in trouble. Her mom really gave her heck for having them. I remember thinking ‘Why did Paul’s mom get so freaky about these tampons?’ I mean she really went ballistic. Paul’s sister said that she was using them, all the girls was using them, and she was going to still be able to go swimming and be active when she was having her period. And Paul’s mom said it was masturbating. That was the first time I ever heard that word. I had to look it up! I didn’t know what it was, and then I still didn’t know what it was. The dictionary’s definition didn’t really help me on that one. I remember so clearly how that made me feel. She was my neighbour, and later she was my mother-in-law! For the longest time I would be very cautious about having any remnants of menstruation around her. But Paul’s sister, she still used those tampons anyway.

⁶ The history of tampon manufacture and sale is provided in Chapter 3.3.
"Now, I don't know when my sister started menstruating. She never said anything. I never gave it a thought. It was nothing. She continued to be her own little self. We shared a bedroom, and I never knew. I do know that eventually, somewhere along the way I knew she was having periods. I also remember that she started having a lot of milky discharge all the time, I think even before she started menstruating. Eventually it became known to be yeast infections that she was having. That's not really normal. I know there was concern about it, and I'm assuming they went to a doctor. I do know that eventually she was diagnosed with very severe endometriosis\textsuperscript{7}, because she had chronic, chronic infections all the time. She had scarred tubing and infertility because of those infections. But I don't think she ever had a painful menses, not when she was young at least. If she did, boy, she hide it from me very well. I don't even know if she knew what was going on with me half the time, because it just wasn't discussed. Eventually she has in vitro, so she did end up having a daughter.

"When I was still in high school Paul went away to a college in Massachusetts for two years. After he moved to Windsor, it actually was his home town. He was here living - with his aunt and had transferred into one of the colleges here. But he didn't like his program, so he went and started working as a bank trainee in a bank. We got married as soon as I finished high school. I was eighteen. That's how I ended up in Windsor.

"Originally we had wanted a big family. But after having three kids I changed my mind. I had had a lot of complications with pregnancy and was continuing to have problems with my cycles. But then we had one 'oops'. Ben was born in 1982 and wasn't as planned as the other three. So, I had a tubal ligation\textsuperscript{8} three months after he was born.

\textsuperscript{7} Endometriosis is the name of a condition where the tissues that form the uterine lining (the endometrial lining) grows in other areas, outside the uterine cavity. Endometriosis is generally associated with pelvic pain (cramps), and infertility, but will vary from woman to woman. It can be very painful and some women choose to have a hysterectomy in order to stop the pain. The amount of women being diagnosed by their doctors as having endometriosis has steadily increased over the years. Medical practitioners postulate that this is the result of better technology is diagnosing the disease, women conceiving later in life, and that women are having more menstrual cycles allowing more opportunities for the lining to spread. (Friederich, 1983; Northrup, 1998). I have not been able to secure information on the experience of endometriosis outside a western context.

\textsuperscript{8} A tubal ligation is a form of contraception which is generally irreversible. In this surgical procedure the fallopian tubes (the tubes between the ovary and uterus, which provide passage for the egg), are clamped so that eggs released during ovulation may not reach the uterus where fertilisation may occur. A tubal ligation may cause a women to experience early menopause if the blood supply to the ovary is affected by the surgery and decreases (Northrup, 1998)."
I was still menstruating, but at least then I was infertile. I was already pregnant with Melanie when Paul and I got married in 1969. My cycle stopped right away with no bleeding or spotting. She was premature, born at eight months and was in the hospital for a month. I had wanted to breastfeed, but I couldn't. I kept pumping breast milk, but in the hospital she was being fed supplements. They really discouraged me from breastfeeding, people just didn't do that back then. So I stopped the pumping. I started having a period pretty soon after that.

"I had always been told that after you have your first baby your cramps go away". And after I had Melanie they did. Not completely, but they were much more tolerable. So my period got a little more bearable for a time. After I had Melanie the doctor here in Windsor put me on the pill, I guess it was a normal practice at the time, but he didn't tell me how to take it. I didn't know that it would take at least a month for it to be in my system. I went home and took a pill and thought that I couldn't get pregnant. But I had a reaction to it and ended up with thromboses and heart palpitations and clots. It also made me bleed all the time. My cycle wasn't painful but I was constantly spotting. I had all of these symptoms and complained about them to my doctor. The doctor gave me a lower dose. I think I took them again for one more month because we had already bought them and I figured there wouldn't be any harm in that. Looking back I am certain that that wasn't a good idea. After, I had to use an IUD as a birth control, and I was okay with it.

"I had another pregnancy soon after Melanie. We had wanted the kids closer together then they were and the one after Melanie was planned closer, but he was born at seven months and he only lived a day. I had a hard time, mentally, getting ready to be pregnant after that. I just felt like the outcomes weren't going to be very good. I eventually found out I had an incompetent cervix. Dilation is supposed to happen at the end of pregnancy, when the cervix is 'ripe'. Not only does it have to open, but it has to thin and prepare for birth. Until then the cervix stays closed and very very tough and taut, maintaining the pregnancy. An incompetent cervix gradually starts thinning and dilating and dilating until it's not capable of withholding the pregnancy. Eventually you

\[1\] Researchers have observed that the experience of menstrual cramps usually diminishes greatly after childbirth, however the cause for this reduction is unknown (Mallin, 1987).
go into labour and deliver prematurely. When I was pregnant with Tara they sutured it. A lot of women who go into early, pre-term labour get this done. It's not without complications, but at least it will maintain the pregnancy along the way.

"But by the time I had Tara I was a nervous wreck. It was 1973 and I was working as a waitress in a Casino here, the Elmwood. I had wanted to breastfeed but I didn't think a woman could work and breastfeed at the same time. But by the time Mark was born, 1978, breastfeeding was just coming into vogue again. I was only one of two moms in the whole hospital who wanted to breastfeed, and again the nurses were really working against me. However, I was determined. I didn't care what anyone else said. I had educated myself a little more and was hell-bent on it. Breastfeeding was in the literature more and the health benefits were encouraged. Heck! Just the cost benefits alone. But it wasn't going well in the hospitals. When I came home I was pretty much not going to do it because they had really broken me down. The nurses would bring him to me when he wasn't hungry and they were supplementing him in the nursery. They were doing everything to sabotage me. He wouldn't latch on well because he was sound asleep! The holds they were showing me, the way I should pose and hold him, were very uncomfortable and every time I tried to breastfeed this housekeeper kept coming by and looking through the curtains. She always had to do the floor when I was trying to nurse my baby. So I came home a wreck. Back then the health nurses used to come and visit all the moms, not just the high risk moms. So even when he was born, 21 years ago, the nurse would come and visit at least once. So when I got home the health nurse called and asked what my plans were and she wanted to set up my appointment in the next week or so. I started bawling my eyes out! She asked me if I was bottle or breastfeeding and I explained to her that I had wanted to breastfeed but it wasn't going well and they had not been helpful at the hospital. She came over within the hour to make sure everything was okay and she gave me a lot of really good advice. I was finally able to breastfeed my baby. But she didn't mention anything about the hormones affecting the period regulation or anything like that. I did read about it in some of the literature she gave me. I think I went just a couple of months without my period.

"I started telling my kids about the facts of life at a young age. I think all the way along. With Melanie, I know when I was having the baby I told her about babies, where
they come from and how my body would be changing. I know before I had Tara, Melanie knew that I bled. She knew that I had pads and that I had to change them. I didn’t go ‘by the way I use these once a month when I menstruate...’. It was simply as you see things you explain them. In the back of my mind I was thinking that I didn’t want them to be waiting to be told about these things. If anything, I think I kind of erred on the side of early, with Melanie especially. I’m sure by eight I had told her everything she needed to know about having periods and things like that.

“With Tara things were different. She didn’t believe me. Melanie would come to me and tell me that after I explained things to her, Tara went to Melanie and said that I had told her all of these strange, untrue things. So naturally, Melanie would then try to explain everything to Tara, and she would still not believe it! It was incredible! I had to keep reinforcing that preparation and keep telling her that it would happen to her one day. Unfortunately I don’t remember when my girls started. I think Melanie started around the same age as I did. I can’t remember at all when Tara started. By that time I had so many kids I didn’t even keep up their baby books. I think I told them that it was their responsibility to keep track of it. I told them that they could have their own private calendar for it. I always had a little pocket calendar that I used in my purse. That was the one that was more personal that I’d track stuff with. I made sure that nothing was hidden, that they knew that it was a normal natural process. I just wanted to make sure that there was no discomfort in my household.

“I don’t remember how exactly we approached it with the boys either. Like I said, information about the human body was never hidden or taboo. I remember that shortly after Ben was born we all went on a trip to drive Melanie up to camp. She had all her products with her, but on the way up she started menstruating. I told Paul that we had to stop for a washroom. So we pulled off and he went to get gas, complaining because we had slowed down the drive. Ben was just in a little seat at the time, and I was in the back seat with him and Melanie while Mark was in the front seat for some reason. That was before people knew that it was not safe for little ones to sit up front in cars. Melanie was being very discreet and, trying to hide things and get to them at the same time. She had stained a little on her pants, but it wasn’t really noticeable. So she grabbed a tampon and a change of pants and went to the washroom. No big deal. We all
get back in the car, settling in; I’m fussing with her, Paul’s watching the baby in the car, this, that and another thing. We get on the freeway and Mark says ‘Well, I just hope Melanie isn’t going to bleed again’. Three and a half, not even four years old, and he says this! We hadn’t pulled the wool over his eyes at all, I know he knew that I menstruated. I didn’t expect him to relate that to her however. She was just mortified. She was devastated. She didn’t even think Paul knew. She looked at me, I put up my hands. She was so pissed off that everybody knew she was having her period, that she was bleeding all over the place.

“We never hid the pads and tampons from the kids. They were always pretty much in the open. For most of this time I used pads. I switched around brands, but stayed for a long time with Stayfree. They had a night-time pad that was super absorbent and by that time my periods were really heavy. I couldn’t really use tampons. The first time I tried them was before Tara was born, when I was working at the Elmwood. I had been complaining to one of the girls at work how difficult it was to wear a bulky pad when we had to wear these tight uniforms. They just didn’t hide anything. She told me that she used tampons and said that they were this wonderful invention. But they didn’t really work for me. I found them so uncomfortable. They just didn’t slide in as easily as she said they would. At least by then they had invented the pads with adhesive tape and I didn’t have to wear the belt anymore. Eventually I would wear tampons, but I always had to wear a pad with such a heavy flow. I figured tampons were made out of a lot of cotton and gauze, seeing as that’s what they looked like. But when Toxic Shock Syndrome[^1] became public, I figured that there might be some more absorbent, synthetic fibres too. It made sense that there could be some seepage of toxins in the system. I read a few things on the subject and was thinking that TSS wasn’t so much due to what tampons are made of, rather the amount of usage time in-between. If some people weren’t being very prudent in their changing, allowing breathing and space, or using tampons on only heavy days, then too much would be absorbed and the balance inside the uterus would be affected. So I was always careful with that.

[^1]: Toxic Shock Syndrome is a rare illness which can occur if the bacterium, Staphylococcus aureus, becomes active and breeds. The bacterium is present in 15% of all women and remains dormant in the vagina. Tampon usage can provide the ideal breeding ground for the bacterium if the tampon absorbs most
"I didn't budget for these products. I just bought them. I tried to be economical, but it wouldn't work. Everyone had their preferences. But once those big warehouse stores opened, like Pace and Price Club, I bought in bulk. I think I just bought the Stayfree pads and Playtex Tampons, I had liked them. I don't think I ever paid too much attention to the different brands or the advertisements. I did notice that the commercials were on T.V. a lot more, but it wasn't a big deal. When we'd be watching T.V. as a family sometimes Mark would say some silly things about the commercials. I do remember when Ben was two or three years old he would listen so attentively to the commercials. He'd say 'They still didn't say what it's for!'\textsuperscript{11}. I suppose that was around the time I started to notice these sorts of advertisements. By this time I branched out of the house. I was taking nursing at university, and I was going to be a different kind of woman. It was like somebody turned a light on and all these issues were before me. I realised that they were picking on women a lot! Why do they pick on us? They're not advertising jock straps and athletic support things. Why don't they hit the guys below the belt? It was just in that sense, as a feminist thing, that they would bother me.

"During my cycle I would use about five or six pads a day. I know it would interrupt my sleep a bit. Sometimes I would wake up and realise I was really flowing, cause you just felt that warm, wet feeling. Sometimes I would wake up and there would be a lot of cramping. When I was slowing down there was a lot of that cramping. I'd think I was done, but if I took a pain reliever or something to relieve some of the pain, the flow would just increase again. It was like the tension of the cramp was preventing the ease of the flow. I was using hot pads a lot. Rocking and laying down. I sure couldn't stand up. That's another thing too, I'd just be weak in the legs. Every piece of energy was drained out of me. It would be messy. I wanted only to soak in the tub all the time. When I first started menstruating everyone told me that that you can't take a bath when you are having your period. They didn't tell me why though. But the thought of a nice warm bath was so appealing that eventually, after I was married, I figured to hell with everybody! Who's going to know that I took a bath while I was menstruating?"

\textsuperscript{11} Discussion of marketing and advertising by the feminine hygiene industry is found in Chapter 3.3.
"After I had my tubal ligation things were pretty regular, pretty good for a while. Eventually I started having a lot more frequent, rapid bleeding, very menopausal things. What was happening was that I was forming fibroids\textsuperscript{12}. It was just one more fun thing to go through. But until my fibroids took over, when I was working, all of the women I worked with would all end up on the same cycle. With the one I was really close with, we started within an hour of each other. Even in the middle of the night. We'd come into work, she'd say 'you didn't?!' I'd say "Yes I did!". We'd write down the time we started and hand it to each other. It was nice to be so regular. But then the fibroids started up. Heavy duty bleeding all the time and a lot of cramping. I had to wear a pad everyday because I never knew when I was going to flow. The fibroids were also causing a lot of bladder problems. I thought I had an incompetent bladder, but I was told that everything would go back to normal after my surgery, and it did. It really did. I couldn't believe it. I wasn't convinced until they showed me the scope, the camera inside me. I watched it and they said \textquote{See that big lump?}, that was my uterus. My fibroids were pinching on the bladder so much that it could hardly fill up or function or do anything. It was pretty incredible. I've got pictures of my surgery, of my ovary. Some people think it's gross. I think it's neat. I like all that stuff. I think it is helpful to know all those things. I don't know what women did when they couldn't have hysterectomies. We didn't remove my ovaries though. There were a couple of cysts on my ovaries, but they weren't too bad. Ovarian cancer is harder to detect after a hysterectomy\textsuperscript{13}. But I didn't have a family history of ovarian cancer, so my gynaecologist thought I should leave them in. They are still functioning, so when they shut down, I will go through menopause. I have a lot to look forward too. At least I'm not menstruating anymore.

"My grandmother was always a hot flashy kind of person. She was always like a furnace, like my husband. I can't sit next to him for a long period of time. He used to get mad at me because I wouldn't snuggle enough. But he just radiated heat. You can feel it

\textsuperscript{12} Fibroids are benign tumours of the uterus, and their medical cause remains elusive. Many women will experience no symptoms, but some experience heavy and rapid bleeding, as well as menstrual cramps and pelvic pain (Northrup, 1998). Margaret had a hysterectomy to remove her fibroids, which is one of the main reasons women in the United States choose to have a hysterectomy (Hutchins Jr., 1990).

\textsuperscript{13} A hysterectomy is the removal of the uterus, and can include the removal of the ovaries as well. It will therefore, be an irreversible end to menstruation, and can bring on early menopause (Coutinho and Segal, 1999). The operation takes less than an hour to perform and can involve either general or local anaesthetic. (Kunz, 1982)
coming off of his skin. And my grandmother was like that too. When she went through menopause she was really beside herself. She started it very early. She started when she was about forty and went till fifty, having a hard time with it. My mother went through menopause before she was forty-six. I remember two full winters we froze ourselves because she always had the windows open. She was always so hot. But that was all that happened to her. My sister is starting to have some change of life, menopausal things happen to her. I have my hormones tested every three months. I haven't been feeling that ovarian pain that I always felt. I don't feel that I am cycling as much. After my hysterectomy, my gynaecologist was ambivalent about me going on estrogen early and I wasn't near menopausal, as far as my hormones were concerned. Estrogen is the component in the birth control pill that causes thrombus and heart palpitations and everything and she was worried about me taking it for such a long time. With me estrogen is contraindicated. I didn't have any menopausal symptoms until about last year. I started having night sweats. When they start to get problematic I take a low dose of estrogen, a tablet, and it's a very very low dose. My ovaries are still functioning. This just keeps me at a certain level and takes some of the discomfort away. But I haven't had any hot flashes yet. There have been quite remarkable changes, but I have been maintaining myself on this estrogen therapy. I have already changed my exercise habits and diet to make everything better. But I can't wait till it's all over with!"
Menstruation is when, once a month you would feel pain in your stomach, maybe some swelling. After these symptoms you would notice that you are bleeding, but it’s normal, it’s okay to bleed. Sometimes the blood looks red and it looks like fresh blood, like you might have a wound, but you don’t. Sometimes it’s dark brown, and that’s fine too.

“I was born in 1969. My parents were living in Windsor but I was born in Stratford. They went there to visit both of their parents, and I came by accident. My mom had me in the door of the emergency room because I came within a half an hour of her water breaking. The next day there was a newspaper article that said ‘Don’t travel when you are pregnant or this could happen to you’, and it was a picture of me. I was there for a month, in intensive care. And back then nobody could touch you or pick you up, which is terrible because kids should have contact. My mom had trouble with her pregnancies. Of course, she didn’t tell me that story until recently. She has changed a lot over the years. Now she is very open, and she is good at explaining how our bodies work. I can see her very easily training others as a public health nurse on menstruation and such things. She learned, or rather, relearned how to understand and deal with things. What she learned as a young person, and then as a young mother, was not how to talk about the body but rather not to bring such a topic up at all. In university she learned that menstruation and reproduction is natural and the people need to learn about it. So later on she began to tell us things that she would have never said before.

“I am the oldest of four children, though I had a brother who passed away. I was young, maybe two or three years old, but I remember him because his passing was traumatic for me. I kept being told that the baby was coming, and then there was no baby. I thought it was my fault. And then Tara was born and she almost died. She was very sick and I again thought it was my fault. I kept being told that I was going to have a brother or sister, and I was very egocentric. I thought that they were for me. Because I was the oldest, I always had to baby-sit, especially when my mom started going to
university. I moved out when I was eighteen, which was hard, especially for Ben, the youngest. When he confronted me about the move I just started bawling. I felt like I was deserting him.

“Before I actually got my period I didn’t know anything about it. It started at school. When I noticed that there was blood on the toilet paper I just stayed in the bathroom and cried. I thought I had cancer! My fifth grade teacher, who was my friend’s mother, came in the bathroom and asked me what was going on. I told her I was dying of cancer! She asked why I was dying and I told her that I was bleeding everywhere. Then she told me that that was okay, I could bleed. I said ‘No, I’m dying! We have cancer in the family!’ I didn’t even know if we did or not. She tried to calm me down and got a pad for me. I was so embarrassed. I was so mortified. And then she said to just go back to class. She could have sent me home or something. When I got home I was ready to tell my mother, but when I called her she yelled ‘What!’, in front if my brothers and dad too, and wouldn’t give me the kind of attention I needed to tell her my news. She must have been in a bad mood, maybe they had been bugging her or something. Still, I was too angry with her to share my news. I asked her if I could talk to her in private and she said ‘you can just say it in front of all of us. What’s the matter?’ So I didn’t tell her for three days. And she found out because I had stained underwear. She was upset that I hadn’t told her but I was so embarrassed about the whole thing, and I was mad at her for not responding to me properly.

“I was embarrassed about the whole thing because I didn’t know about menstruation and I should have. I was just mad. Why didn’t my mom bother to tell me? Most girls that I knew didn’t have it. There were a lot of late bloomers I guess. And I was also a dancer, so I didn’t want something that would get in the way of being active. I did tell three of my friends. They were grossed out. I told them what happened. One of my friends had been told by her mother already, and another just thought it was disgusting. And one of my friends actually didn’t believe that I had started. She thought I was trying to get it before her. I think we stopped hanging around each other because of that. She was mad. I had started menstruating and wearing a bra and she hadn’t. I would have given it all to her if I could. It seemed only a pain, but really no big deal. There was never a sense of becoming a women or anything.
"I don't remember if I told Tara. Tara was a dreamer. She still is. She doesn't grasp things sometimes. My mom and I told her how a baby was born so many times, and she'd still say that babies came out of women's bellies. If Tara wasn't ready to learn, she didn't. In one ear and out the other. I remember sitting in the living room, we were watching TV and something came on about babies and pregnancy. My mother turns to me and says 'watch, we are going to have to explain this to her again'. And Tara, sitting cross-legged on the floor, asks 'So why doesn't the baby get digested in the stomach?' So mom starts again. She explained pregnancy and menstruation. And I said 'that's why women have their period, and she replied 'that bleeding, right?'. Then she told us that that wasn't going to happen to her. We told her it would, it happened to all women. But she was convinced she wouldn't. She told me when she started. I can't say if she was happy or not, I don't remember. I know I thought 'Oh God, another drag for her now'. I didn't think it was any big deal, nothing good for that matter. If I could choose, I wouldn't have it.

"Until I was nineteen my cycles were close to regular, but always a little bit off. And I always missed them during the summer, because I was so active. I was tested and they found out that I was burning so many calories that I was keeping my period at bay. I wasn't overly skinny or anorexic. It wasn't anything like that. I was just very active. I went to sports camp each summer and spent all day running or swimming or hiking. When I was menstruating my cycles would last up too nine days. It was long. Four days of that were heavy. But they were not painful at all. I didn't feel sluggish or down, I didn't have to pay any attention to my periods at all.

"I didn't use tampons until I had too. I was sixteen and I was in Florida with a friend and her family. I was stuck there and completely off my cycle I started my period. I was with her two brothers who were older than me and I didn't feel like I could go out and get pads. So my friend offered me her tampons. And it was so much better. I didn't have any problems with them and they made my cycles easier to deal with. As soon as I tried tampons I never went back. I will use pads sometimes, but mainly maxi-thins, just before I start or finish a cycle. I think I first used Tampax. I think they were the ones in the house. When I was sixteen I started buying my own, which was no big deal. I never went and looked at all the products or anything like that. I would try something and if it
worked I just stayed with it. I didn’t pay attention to my period and I didn’t pay attention to products that I used for it. The only time I took note of what I used was two years ago, when I switched to O.B. tampons\(^{14}\). They are compact and there is no applicator, so it’s more environmental. Not that they could be environmentally friendly, but they produce less waste than the other brands.

“My cycle began changing when I was nineteen. For example, I don’t like sweets at all, I never have. I could have a whole box of chocolate sit for a year, and then I’d throw it out. The Easter Bunny brought me V8 and pickles. And suddenly I started craving some chocolate. Not a lot, I’ll need one or two of those little chocolate bars. But why would I need it at all? I don’t even like chocolate. I hate chocolate. That was one of the first things that I noticed, so it was very strange. My parents even noticed it. And it was all around my period. Then I started to have cramps and back aches. And the cramps, it wasn’t a slow build up. It was acute, very painful. It felt like something had suddenly grabbed my ovaries and squeezed them and squeezed them for fifteen seconds and then let go. And that was long enough. It could happen periodically for a day and a half. It felt so completely debilitating. I quickly learned how to do jobs where I was in charge with what I was doing so I could decide when I was standing and when I was sitting and nobody would know, no one would have to know. I wouldn’t tell anyone that I was in pain. I was just doing paperwork. Around twenty-one years old my breasts started to get tender and I started to get acne before my cycle, which I’d never had in my life. Slowly I acquired more symptoms, all a week before my period would start. After the first day I am fine, except the cramps might last a few days longer. The day before I start and the day of, I have no appetite, it’s a sign to me that I am starting. Also, I feel like crying. I could have a supervisor say to me that an assignment I handed in was crap. Normally I’ll say ‘who the hell are you? Did you even read it? Do you know what you are talking about? Are you qualified to say this to me?’. I won’t let it bother me. But if it was a day before, I’ll get really upset and take it personally. I’d internalise it instead of look at the source. So I suddenly began to experience all of these symptoms before and

\(^{14}\) Procter and Gamble’s O.B. tampon is the only tampon in the market that does not have and applicator for insertion. It requires the customer to use her hand to insert the tampon properly.
during my periods. I had begun taking tests to figure out what was happening and the doctors figured that if I had a more regular, controlled cycle, things would be easier.

"I had gone on the Pill when I was twenty-one years old. I had not tried it before and it was recommended to me as a way to control my period, to get rid of some of the pain I experienced during my cycle. My mother had had a bad reaction to it, but we found that out later. I was twenty-one and I hadn't lived at home for years so there was no reason for me to tell my mother I was on the Pill, and she had never spoken to me about the Pill. My reaction started at home, my left arm was tingling. I went into work feeling this way, but didn't think it could be anything too serious. I felt the tingling all up my left arm and then it spread. I felt like I was out of my body. I remember the ambulance coming, I remember everything, but I couldn't speak. All I could focus on was the feeling in my left arm and that my body felt numb on one side. My boyfriend said that they had called him. He told me that it looked like my left side was paralysed. What happened was I had a trans ischaemic attack. It is similar to a stroke in terms of symptoms, but there are no lasting effects, there is no permanent damage. It is common - with people who have a reaction to the Pill. But I didn't know that. No one said that was possible. I called my physician after the first stroke. I told him that I had had a trans ischaemic attack in the hospital and that I was concerned about what happened. I told him that the only new thing in my life was the Pill. So I wanted to discuss this and see if we could change the Pill I was on or something. He said that the Pill had nothing to do with what happened to me. I haven't gone back to him since. He wasn't concerned about my well being. He told me to continue taking the Pill. I asked him to at least change my prescription but he said no. So I kept taking the Pill. I assumed he was a doctor and that he knew what he was doing, that I was on the lowest dose Pill. He is a father of five daughters too. Within 48 hours of that phone call, I had another stroke. I was on my day off, so I was at home. It started happening while I was alone. My boyfriend came home from work, and by that time I couldn't move. He threw me in the car, took me to Emergency, told them I was dying, and made them look at me right away. There were tons of people waiting, but they still pulled me in, and that's all I can remember. Now the attending doctor was smart, he asked me if I had recently taken something new. I told him that I had started taking the birth control pill for the first time.
in my life, and he told me to get off it immediately. That same night there was another girl in the hospital who had a trans ischaemic attack as a result of the Pill. She was twenty-three years old and she died from this! And she was on taking the same birth control pill I was taking! I never knew you could die from taking the Pill! Now it was already in my system and it had been for almost a month, so I still had another stroke and one heart attack. After the second stroke I stayed in the hospital for 14 hours, then I was released. My boyfriend called my mother and she started freaking out. She had had an allergic reaction to the Pill and had to go off it but she never told her daughters, and I almost died because of it! If she had passed that information on to me. I wouldn’t have taken it. And I still had to go through two more episodes. The heart attack I had at home, that was the last episode I had. I was so lucky. It was so good that that doctor was there that night. There are no lasting effects, but you can die during an episode. Even after the heart attack, I didn’t know that would be the last episode, so I was scared, so certain that I would die from this. I can’t really blame the first physician for putting me on it in the first place because he didn’t know about our family’s history. As soon as I found out I called Tara and told her never to take it. But she still went on it! She has had no side effects which is good. And nothing happened to my period. It was weird, because still seven months later I missed my period. It was in the summer, like always. Every July.

“I think my boyfriend actually talked me into having tests. He thought it was ridiculous, the pain I would be in. And I would still go to work. I’m a person who does not like to call in sick, and I would have to be sent home. He said that I shouldn’t have to endure this pain, his mom never did. I was really tired of it, it was getting to be very inconvenient. And no one could figure out what was wrong with me. After those episodes I still went for tests, thought not continuously, and they still couldn’t figure out what was wrong with me. When I was twenty-one I was diagnosed with endometriosis, but it didn’t add up. My symptoms were different. I knew my symptoms were different. I felt like a deviant. I was told that my pain was in my head. I have a high tolerance for pain. I know what pain is, and I can ignore most pain. I couldn’t ignore this, and I told them that. I felt like I was dehumanised. I think that the medical profession, in general, does not perceive a women’s problem as a problem. They want to make it yours. And I
don’t think that there is enough research and data to draw from. They just decided arbitrarily that it was in my head.

“I saw a lot of different doctors. One of my ex-boyfriends was a physician, I saw several doctors in the States, and I saw some doctors in London, Ontario. My condition was discovered because I was having huge abdominal pains and was rushed to an ultrasound. Of all the tests I had had they had never done an ultrasound before, because it was all in my head, right? They gave me blood tests, urine tests, but not an ultrasound. During this ultrasound they discovered this large cyst. They said that they were going to have to operate immediately, they had to remove it because it was larger than 8 cm in diameter and could burst or something. I still wanted to be booked for one more ultrasound, I wasn’t sure about having surgery. Four weeks later it had dropped down to 2 cm. I even had the same technician doing the ultrasound and she was so surprised. It made sense that that was what I was feeling all this time. I told them that I could feel when the pressure was going away. It felt like something shrinking. My cramps were a feeling of the rapid growth of a large cyst and then the sudden shrinking of it. I had - Polycystic Ovarian Syndrome. I can’t tell you how much of a relief it was to have a name for what I was going through. I wanted to tell everyone who had told me that my pain was in my head that it wasn’t, that I had a name for my condition, that they weren’t able to diagnose me. It is incurable, so I will always have it. Removing the cyst would not help. During those tests I felt very alone. I have endometriosis as well, and it is part of the pain I experience during menstruation.

“My doctor at the time said that I was a classic case and that he couldn’t believe that this was missed for so long. This all started when I was 19, and now I was 29! He told me that not many people are aware of this condition and the symptoms or information on it. He compiled a package for me about Polycystic Ovarian Syndrome which I picked up a week later. I appreciated this because no one else had put that much effort in understanding and helping me understand what was happening to me. This

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15 Polycystic Ovarian Syndrome used to be considered a disease, but is now considered “a sign of an underlying unbalance” (Northrup, 1998: 220). The first seven cases of the disorder were recorded in 1935, as Stein-Leventhal’s Syndrome. It is present in 20 to 25 per cent of women (Coutinho and Segal, 1999). Melanie provides a good description of the symptoms which can possibly affect a woman with Polycystic ovaries.
validated what I was going through, what I was feeling. I learned that the worst symptoms that a person could have is obesity, but I gain and lose weight easily. I'm not a big eater. I eat moderately. If I want it, I have it, and I don't have a scale. I don't worry about stuff like that. Also, you could have a lot of body hair. And I started having some on my upper lip, so I decided to have laser hair removal. I thought that it could be something with age but I really didn't like it, I thought it was gross. I asked myself if it was economically worth having it done and decided it was. So I've been doing it for a year, every three months. I have two more sessions. It's pretty expensive, but I don't care. I like who I am, I like how I look. I am a very active person. If I get dressed up and go out, I feel good about how I look. I feel good about who I am, and I don't let this get to me. any of this Polycystic Ovarian Syndrome, my heavy cramps. Any of these symptoms. If I do my life is going to suffer for it. The first day is worst. It is the only time when I cannot tolerate the pain. I have pain through the rest of the month but I don't let it bring me down. I try to ignore it as best I can.

"My mom was helpful with the diagnosis. She had helped me schedule tests and contact doctors. Before I was diagnosed she had always been pressuring me to have kids. None of my brothers and sister have kids yet, we all have other goals to accomplish first. But it was getting to be a pressure because I was the oldest. She stopped after I was diagnosed, because infertility is another side effect of Polycystic Ovarian Syndrome. I told her that I may not be able to have kids and she was understanding and supportive. I think that I will have a hard time having kids if I want them. It is probably safe to assume that I am not fertile. After I stopped using the Pill, I used only the withdrawal method as a contraceptive, and that was a pretty big risk. I didn't get pregnant in all those years with that boyfriend. And furthermore, we weren't so concerned if I got pregnant because we were planning on getting married anyway. He wouldn't have been upset if I got pregnant, by any means. In retrospect, I think that I am not as fertile as most women. Knowing I was probably infertile used to make me very upset until I found out that my cousin also has Polycystic Ovarian Syndrome. She had trouble conceiving and she adopted. Within that same year she got pregnant and ended up giving birth to a baby girl. There was also a woman that I had taught wilderness training to, who was having trouble conceiving. She just had twins, and she has Polycystic Ovarian Syndrome
too. This is a rare disease, but now I know two other people who have it and successfully conceived. I have not actively tried to have children, so I am not certain about it. But I am now okay with the fact that I may not be able to have kids. I had to come to terms with that. Either way I am going to happy. I am not a person who has to be a mother. I would be a great mother, I would love it. But I don’t have to be one in order to be fulfilled in my life.

“I do stupid rituals now around by period. The first day I make sure wherever my pain is strongest, I lean on that side. If I have plans I don’t cancel them, but if I don’t have any, I’m not making any. I have a water bottle. I fill it up, put it on. I take Advil, but only at home. The pain is so strong and I’ve had it for so long, but you can’t drug yourself up all the time. Now if I was someone who stood in the same spot all day and did the same thing all day, I might take Advil at work. But because I am in charge and people report to me, I can’t be all drugged up. I work at the Casino in Windsor, and I work in management. My cycles do affect my ability to concentrate but I would never tell anyone at work this. I don’t want to give anyone any fuel to doubt me or my ability to perform. My job is too high maintenance. I’ve got a pager, a cell phone, and I’m running up and down three floors making sure everybody is doing what they should be doing. If I took painkillers I would have been escorted out of the Casino. I have to be sharp and if I take Advil or Midol, I feel like sleeping. When I get home I take a Midol and a gravel, which you aren’t supposed to mix, and I fall asleep and don’t wake up until the next day. My cycle is more regular now. It lasts 4 and a half days. The first day is the worst, the rest is fine. I’ll have that pain that whole day and then it is gone. The only thing is before it starts, sometimes I’ll have a week and a half of pain. I can feel when I am ovulating, because sometimes it is painful. I release more eggs than I am supposed to which is part of the disease. I will menstruate every 28 or 29 days. And I’m even menstruating in the summer and have been for about three years now.

“The day before I started last month, I was really upset. I felt really emotional and I didn’t have an appetite. The next day I started, but I hadn’t clicked in that my body was telling me I would. I am not an emotional person, so I should know that if I am ever feeling emotional that it is a sign that I will be starting my period soon. It’s the hormones in my body, they become unbalanced and then I’m not balanced. My last cycle
wasn’t as painful as I expected it to be. The flow was light and the pain less intense. Sometimes I swear the pain I have is like labour pain. I obviously have never felt that, but you know when you see a woman giving birth, breathing quick, her body completely tensed up, that’s what I feel. And I always feel fatter. I feel like I can’t fit through the door. I have my fat clothes and I think I actually go up a size. When I am menstruating, I feel like the biggest, fattest person I know, and I am only a size 7-8.

“I still wear tampons. They don’t affect the pain, which is good. I do budget them. I am a budget queen. I budget everything. For every month, everything is divided up. I average for each period $4-$6 in expense. That’s including panty-liners and tampons. A box of tampons would last me about four months. And I have a box of the heavy pads, and they have lasted me forever. I’ll wear one maybe two nights a period. I use about two tampons in a day. I used to change them more often. However, when I was doing my bachelors degree in biochemistry, I tested myself for Staphylococcus aureus\textsuperscript{16}. I discovered that I’m not a carrier, so I am not so concerned about Toxic Shock Syndrome. I’ve never checked the ingredients of these things, the only thing I know is that I don’t like wings on my pads. I think they are stupid! They leak everywhere! I’m not concerned about the prices either, they aren’t expensive. I don’t put too much thought into the products, I never have. But recently I saw a Tampax commercial that caught my eye. All it is, is a bunch of cheerleaders cheering and dancing at a football game. At the end it just says ‘Tampax Was There’. I saw the ad with a male friend from work. I thought it was such a cool ad and he thought it was stupid. It bothered him. I told him that it’s real because wherever you are, wherever you were, Tampax was there. Then I asked him if he ever had to buy tampons or pads for a girlfriend or sister or mother. He said no, and if he had to, he would go to a store far away, so he wouldn’t see anyone who recognised him. It was interesting. I’ve had boyfriends buy tampons for me before. The guy I lived with for five years, he would. Tara and I made Mark get them once. The first day Tara was back from New York we

\textsuperscript{16} As previously explained. Staphylococcus aureus is a bacterium which many women have in their vaginas, though it is usually dormant. Tampons, particular those extra absorbent kinds, can create the ideal breeding ground for this bacterium by absorbing too much of the moisture in the vagina. If the bacterium becomes active and breeds, it can lead to Toxic Shock Syndrome, a possibly fatal illness (O’Grady and Wansbrough, 1997). Melanie tested herself and found that she was not carry Staphylococcus aureus.
stopped in Shoppers Drug Mart. Mark was getting something for only $5.00 but he only had his credit Card. So he asked Tara if she needed anything. She grabbed a box of tampons, put it down ‘Can you get these?’ she asked. His face got red, and he mumbled a yes, but he charged them. It’s funny how uncomfortable males can get around this stuff. I never noticed my dad making a big deal about it. He always bought us pads and tampons. It was no big deal.

“I don’t really like talking about menstruation. Even with all the stuff that happened to me, it was only medical people that I would talk to about it, so it was different. I don’t think guys really want to hear it about it anyway, at least anyone I dated sure didn’t. So, I never really have talked about menstruation before. The street I grew up on was all boys. My sister was such a dreamer, she was still playing with dolls until she was thirteen years old! I didn’t have anyone really to have female discussions with. When I went into high school I heard girls talking about their hair and such, but I would remove myself from the conversation, I would leave. I didn’t want to be a part of it. In university I chose a field where there was no females, which was fine by me. The part-time jobs I had through university were also isolating. I worked at A&E Nuts and Bolts, a factory. And I worked at Boblo, an amusement park where I was in charge of a ride, so I didn’t talk to any other workers. When I went to work at the casino it was all men. When I started there were 21 males in the office with me. I was the only female. Tea time isn’t for tea, it’s tee-time, for golfing. I can’t walk in there and say ‘you should see the new sweater I bought’. When you are existing in that society, you just can’t express any of those things. I never miss work because of my cramps. I organise my time differently. If I had gone to do some work on the computer it wasn’t because I was in pain and couldn’t stand, it was because I had to do work on the computer. In the past six years at this facility I think there was only two times where I was talking to someone and had to grunt out of pain. When they asked what was wrong I just said ‘Oh my god! Gut ache!’ I never told them it was menstrual cramps. I don’t hide the fact that I menstruate, though. Because we work at a casino there are a lot of security measures. The purses we have to carry things around are see-through. They have to be. So I just carry my tampons around all the time. Everyone can see, but that doesn’t bother me. Now I just started at a new position in the human resource department and I report to another
woman. Labour relations is predominately a female department and I find it very strange. There is no pressure! I had to produce all the time where I was and here my supervisor will tell me about her weekend, about her husband, being very open with her information. To me that's a female society. I am still getting used to it.

"I now feel more comfortable with my body than I did as a child. I feel more comfortable and accepting of the way things are. It took a long time for me to get this way. I wish it happened back then, but the environment I was raised in was very closed communication wise, there wasn't that much information. It doesn't help to finger point, but that's just the way it was. It's the way my parents were raised, that's what they knew. The only way I can change that sort of thing is with me, if I decide to pass it on or not. I feel this society in general shushes everything up. A woman's problem is not a real problem, it doesn't exist. It's all in your head, so just be quiet and grin and bear it. I refused to take that. But that's just the person I am. When I go through menopause it's not going to be a problem either. It is just going to be a natural progression in my life. Going through menopause and the cessation of my period is just as important as having it. It is part of the cycle, and I am glad that I feel comfortable with that. But society did not help me get to that conclusion at all. Because I had that problem and I had to deal with it. I really did have to talk about it with a lot of people, I had to deal with my medical problems and come to terms with a lot if things that before I could just ignore."
Tara Kennedy (b. 1973)

Once a month a woman goes through emotional and physical changes. She bleeds for various days, it depends on the woman. Some women bleed for two, some for seven. It is the time of the month that you just don’t want to mess with them.

“When I was a kid we weren’t very wealthy. We lived in a neighbourhood of townhouses. It was very close and everybody knew everybody. So it was more than just my family, it was my neighbours who were also family. I have friends that I’ve known since I was a baby. I know them like sisters because I was raised with them. My sister, she’s four years older, so most of my childhood she was telling me to get lost. When I was a baby she was motherly to me because she was told that she had to take care of me and watch out for me. So, she could be very protective, but in the same token she wanted nothing to do with me. When we were kids we weren’t very close. My parents really pampered me, at least between the two of us. She was more of a do-it-yourselfer and I was more the baby. My parents had lost a child right before me, and I was really sick as a baby. I had inceptions of the bowels and they almost lost me twice. They pampered me for quite a while because of this. I hate to admit it but I’ve noticed the difference between how they are with my sister and how they are with me. Things changed a bit after my brother Mark was born, but I think I’ve always been pretty pampered.

“I was first faced with menstruation in grade six. A girl in my class had started at school. It went through her pants and everybody saw it. I didn’t know at that time what it was. I just thought she wasn’t feeling well. By grade seven all the girls were talking about it and it became this big thing, this great achievement to get it. But we wouldn’t talk about it outside of the girls change room or the bathroom. I didn’t ask my mom about it because I was too embarrassed.

“I started when I was twelve. It was April 1st, April fool’s day and I thought it was a joke. I remember exactly where I was, in art class, and I felt warm. I thought that maybe I was coming down with something and I went to the bathroom to put water on my face. Then I realised that something else was happening to my body. I felt a bit shocked.
Then I just rolled up some toilet paper because I didn’t have anything and went back to art class. I whispered to my friend Megan ‘Guess what! It was my time!’ She had something there for me to use because she was one of the first girls in the class to get it. She always had stuff in her locker for everyone else. And when I was twelve it was the victorious moment. You’d announce it in the girl’s washroom. I remember my friend Rebecca started the Friday before I did and I was upset because she beat me to it. Then when I started everyone yelled ‘Tara has it now!’ It was like a prize. I also told Megan’s mother because when Megan first started her period, her mom made a big deal about it. She was becoming a women and it was this wonderful thing. In my house it was always this curse that I heard about because my older sister would complain about it. I think I wanted to celebrate it more and Megan’s mom made me a ‘becoming a woman’ dinner. It was special. I think I might have told Melanie I got it, but I didn’t tell my mom.

Actually, about a month later a neighbour told her and she confronted me about it. She was upset that I hadn’t told her right away. But I was in my rebellious stage when I didn’t want much to do with my parents. I think my mom then just told me how to use a tampon, to ensure that it is kept sanitary, that it doesn’t touch anything and that I wash my hands before and after, that kind of stuff.

“In the beginning my period would last about four days. There was no warning, it would just start. I might get a little warmer, perhaps feel a bit more lethargic, but I wouldn’t necessarily associate those feelings as a signal that I would be menstruating soon. The flow wasn’t so heavy at first, but after a year into it I started to get cramps. When I was twelve, menstruation was a victory. At fourteen everybody knew you were a woman now, who cares! It quickly became nothing more than a hassle. The cramps, they felt like ripping. Like a wound that was throbbing. There are times when I can feel my uterus tearing. It didn’t help that we had to wear those awful pads either. I’ve been dancing since I was two, so I have always been an active person. And when I was more active, my cycles would be lighter and less painful. But my period would still slow me down, and wearing those big diaper pads with a body suit wasn’t the most comfortable thing in the world.

“I started using tampons before I even knew smaller, thinner pads existed. I was on a band tour with my school and we were in New Orleans. One of the girls wanted to
go swimming and I told her I couldn't because I was on my period. Then she told me that I could if I used a tampon. I remember, I thought that they were so funny looking, and I was really afraid about the whole thing. I had heard that you could lose your virginity from it, and at the time I was saving my virginity until I was married. I felt really guarded about it, but she kept telling me that it was safe and easy. I finally tried them and it worked. I ended up having a really good time and decided that tampons were the way to go. I've used them ever since except at night time. My mom had them in the bathroom at home, so I just took hers. Eventually she knew I was using them so she or my dad would get them. But the first time I had to buy them, when I was still quite young, was a bit nerve-wracking. I felt like everyone was watching me, and I ended up also buying a bunch of things I didn't need. It's like the first time you buy condoms. You are so afraid what other people will think. You don't realise that it is such a natural thing and that you shouldn't be embarrassed.

"Premenstrual Syndrome" is an emotional roller-coaster. That's the best way to describe it. You could be laughing and having a blast one minute, and just bawling the next minute for no reason. I could be watching TV and a Hallmark commercial would come on and I'll cry. I think when I was younger, in grade 10 or 11, PMS would affect my relationships more than they do now. I suppose I would act out on it more because I didn't recognise what was happening to me. Now I know what I am experiencing. I take some Midols, I soak in the tub, I rest and relax, or I just tell people that I'm on my period. It's funny, though I don't like to say 'on the rag', my dad didn't know that 'on your rag' meant 'on your period'. He thought it meant simply that you were in a bad mood. So he would tell me 'Oh, your brother's on his rag. Stay away from him today'. I eventually had to explain to him what that phrase really meant.

"In high school my cycle went through a number of changes, at first getting a bit

\[17\] In the medical community, Premenstrual Syndrome (PMS) "is a physical condition involving biological changes in the brain, hormone levels, and immune system prior and up to the menstrual flow starting" (Coutinho and Segal, 1999) The symptoms include bloating, headaches, irritability, fatigue, backaches, acne, and emotional distress. It is said that 30 to 40 per cent of women experience these symptoms to some degree, while 3 to 7 per cent will experience extreme emotional distress. The exact cause of PMS is not readily agreed upon, but most researchers believe it is related to the increased levels of estrogen in the bloodstream. PMS does not include symptoms of heightened vision and sense of smell or increased sexual arousal, which is also experienced by many women before they menstruate (Angier, 1999; Coutinho and Segal, 1999). Premenstrual Syndrome is also not experienced universally. (see Strathern, 1980)
rough. The first day I wouldn’t eat anything because my stomach was so upset. The cramps got strong and the flow heavier. But then my cycle stopped. I was dancing a lot, and wasn’t eating very much. Looking back, I had an eating disorder. At the time, I was watching my weight. At first I was just happy not to be menstruating, then I suppose I got a little concerned, although sometimes I wish for those days again. Once my cycle started again and became more regular, about a year later, it got a bit out of control. It got really really heavy and lasted at least seven days. The first two days I would be violently ill. I would have very painful headaches and be very nauseous. It was really awful. Eventually my doctor recommended that I go on the Pill to control my cycles. This was four years ago, and it was a strange time for me, because I had to stop dancing. I have damage in my knees and ankles so dancing, which had been a daily activity until then, became a dangerous activity for me to engage in. It felt like my arms had been cut off. So I started taking the Pill, I stopped dancing, then I started gaining weight. I went up a cup size. But my period got lighter and less painful. I still feel drained of energy and extra emotional, but at least I can carry out my daily activities. I know my sister, my mom and my aunt have all had trouble with the Pill, so I really monitor my cycles now. But I’ve been lucky and haven’t had any of the complications they went through.

“I think I am pretty comfortable talking about menstruation, though I’m probably more guarded with men about the subject. If I ever got a husband I’m not sure what I would do. At night I use those really long pads, because you are laying down, you need them. But it would be so unattractive, his wife would be wearing diapers! How very sexy. I never spoke about menstruation to my father. I would just be way too embarrassed. I wouldn’t tell my boss either. I wouldn’t say I can’t come in today because my menstrual cramps are too severe. I’d say I have an upset stomach. It’s not something to bring up with people you don’t know, but I think I always tell my friends when I am on my period.

“I think I get most of my information about menstruation from TV, from commercials. I don’t really pay attention to them, unless I am consciously looking for something new. For instance I always used to use Playtex tampons, but then I switched to Tampax because they have cardboard applicators, not plastic ones, and that’s better for the environment. With pads I’m less selective, I’ll buy whatever is on sale, no name
brands too. I probably go through a box of tampons every two cycles and a box of pads every three, so I think I end up spending $10.00 a month on these products, and that is not including Midol. The prices are ridiculous. There is no way that it costs that much to make this stuff. The companies are taking advantage of the fact that women need them. It’s along the same lines as make-up, although women do not need make-up in exactly the same way, but it is something that all women end up buying, so they overprice them. You always find the money for these products. I had been living in New York since I graduated from high school. I was first at a theatre school, then I was there illegally, acting in small plays and working as a waitress. Needless to say, money was really tight. But even when it was really bad, there was always room for tampons or pads. Although I did get into the habit of leaving tampons in longer than I should. I know someone whose cousin died of Toxic Shock Syndrome, so I guess I should know better. But it is cheaper to push the envelope. I know they do lots of testing on these things, so I pretty much trust the tests.

“When I first started it was like this big, victorious moment. All the girls were happy ‘Oh! We are becoming women!’ But now it is like this big curse, this terrible thing that happens every month. From the media, it’s this problem that they are selling. It isn’t about menstruation at all. It’s not like on a sit-com they’ll bring it up. Their lives are perfect they don’t menstruate. So you only end up seeing it in relation to products that are sold, products that will ease the problem. It would be nice if menstruation would last only one day, with no emotional problems, no heavy flow, and free tampons and pads. I suppose it would be better not to menstruate at all, that would be nice. My cycle just slows me down and lowers my stress threshold. I don’t feel any connection to the process. It doesn’t make me feel more like a woman, more fertile, more attached to the earth. It is just a hassle to attend to each month.”
Emily’s Family
Claire Rowland (b. 1923)

Menstruation is the disposing of the egg and nutrients from a women's body, normally occurring every 28 days.

"I was born in Vancouver in 1923. We had everything we wanted to my knowledge, though I'm sure my parents went through some hard times. My dad always had a good job and we didn't have to worry too much about the future. I had a strict English upbringing so I never spoke to my mother about menstruation. If not for Miss Blaine, I probably wouldn't have known about menstruation until it happened, and even then, not been too certain about what my body was doing. Miss Blaine was my grade school science teacher. I was very very naive when I was young and looking back she was really very mannish. She was good. We all liked her because she treated us like young ladies, she addressed us as 'young ladies'. We weren't kids to her. She explained the changes that would soon be occurring for us. When she talked about menstruation, though I am not sure if she ever mentioned that word, she talked about the female body. She had drawings that she got from the lab and she explained what happened, and what happened to the egg if it wasn't fertilised. Of course this was an absolute no-no in my day. There were no men in the class, but it was a co-ed school. I am sure it wasn't really on the curriculum but it was just that she was having problems with some of the girls. They kept skipping school because they had cramps for not just one or two, but several days. I never told my mother, and I presume that most of the class didn't, but obviously some of the girls did. So she was severely reprimanded for that and she was never so candid with us again.

"Before it happened to us, my friends and I talked about it a lot. There were lots of discussions and we read everything we could find. The school library had nothing. This was a junior high school, grade seven to nine. You go on to senior high school after that. We talked about it with our girlfriends and we used the word 'curse'. I think it is still being used today. We'd say to each other, 'Oh I've still got the curse'. By senior high school we only really talked about it if it was going to affect something we were
doing. If we were planning ahead for something like a swim party one of us might say that it was that time of the month and see if we could change the date. Of course, we never spoke about it in front of boys.

“"I didn’t start until I was thirteen, and that annoyed me because I felt left out. I was looking forward to starting because it meant I was growing up. When it happened I remember that there was no pain, there was nothing, just the wetness. I told my mother and she said we’d have to go to the store and get some Kotex. Of course, I already knew all about that. She told me nothing else. She didn’t say that it would happen once a month, she couldn’t. I didn’t say anything to my father, though I am sure she told him. She didn’t explain how to use the products. The instructions were on the box. It was the same with my younger sister. She came to me for information when she began menstruating. She started earlier than me, at age ten or eleven. We didn’t discuss it with our mothers after the initial time, I think we just handled it on our own. I remember going to the drug store and buying her Kotex. I suppose it was a bonding experience, as bonding as it could be since we were miles apart having a five and a half year difference in age.

“When I was younger it was difficult to find information about menstruation. I had gone to the public library, and I had gone to the library at the high school. However, when we were in grade 12 and 13 the Nurses Association was coming around trying to recruit grade thirteen graduates. They had lost a lot of the nurses to the armed services so they were going to high schools and talking to the students. They left pamphlets and books on just about everything, both male and female. That was just wonderful, but least to say we kept them hidden from our parents. With some of the products there would be a little message that if we wanted a booklet on menstruation we could write them for it. We did that, but there was never anything we didn’t already know in those. It wasn’t until I went on in schooling that I really found out more. High school girls in my day, I’d say ninety-nine per cent of them, were very naive. That’s just the way it was.

\[18\] The advertising and educational campaigns undertaken by the feminine hygiene industry are described in Chapter 3.3.
"The first brand I used was Kotex. It seems to me that there was only that one brand at that time, so it was Kotex and the belt. It would be uncomfortable if you couldn’t change them enough. It wasn’t awful because this was the way life was. You couldn’t go swimming, because these were the days before Tampax. Of course we would use every excuse that we could think of so the boys wouldn’t know what was happening. You could only buy them in the drugstore, and you had to ask for them. Sometimes it would take us a really long time to buy them because we waited until the store was empty, or at least, there were no men left in the store. Some of the girls, their mothers didn’t buy Kotex, they made pads out of rags and then they would wash them and reuse them. I can see Europeans and perhaps Asians doing that now because they are far more economical then we are, they make do. And I am sure the British do too. Before Kotex was invented they had to. I had an aunt that I could speak to, she actually was a cousin that was so much older than me, so I called her aunt. I could talk to her about everything and anything. She was way beyond her time. She told me when she was a girl that she had to make them and her mother had taught her how to fold them and wash them. My mother wouldn’t have said anything like that. I am glad I never had to use cloth pads.

"I started using tampons in grade 13. That’s when they became available. I used Tampax because they were the only brand there was, and they were much more expensive than the pads. At that time there were different pads coming out as well, contoured and thinner. Most girls were concerned about the safety of tampons. One girl was afraid that she’d lose it and wouldn’t be able to extract it. We read the label and it said that they were sterilised and we believed what we read. My girlfriend tried them first and it worked for her so I got myself some. After a few attempts it worked all right. They made you feel very important. It was freedom. It freed us to do more sports. Before we still played, using those heavy pads, but you’d worry about something breaking or leaking. I don’t remember there being a stink about them, because I have heard talk about tampons being inappropriate for virginal girls. I think my mom knew I used them. It was the practical thing to do, and said nothing of your disposition. I would use both pads and tampons because the first day was a pretty good flow, but with the new products I felt a lot more secure."
"After high school I went to collage and received a teaching certificate. I was married in 1944 when I was twenty-one years old. My husband was in the airforce, so right after our marriage he was gone, because the war was on. This wasn't a great thing, but everyone was pretty much in the same boat, so you just went on with your life. I worked with a company which is now Bell Canada. I was teaching the younger girls how to speak correct English and answer the telephone. This was a time when operators did everything. I taught them geography because for a long distance call they had to know how to reroute everything. You couldn't call Toronto from Vancouver directly, you had to go through other cities. During the war, pads and tampons were scarce. I don't remember them being especially more expensive though. You could always get them, but you had to be at the drug store at the right time.

"We moved from Vancouver to Sarnia after the war, in 1945. I soon became pregnant with Christine. My cycle just stopped, and there was no spotting or anything. I was working part-time for some of it and playing sports. I swam until the seventh month, then the doctors said no more swimming. I played badminton until at least seven and a half months. My husband had started a business manufacturing ice, so I would work there through my pregnancy on a part-time basis. It was just office work. I was relieving the girls at the office when they were on holiday, so it would just be a week here or a couple days there, nothing too straining.

"Christine was born in 1946. We had two more children, Frank in 1949 and Julian in 1951. I was lucky in that I never had a miscarriage. All of my pregnancies were easy, though I was happy to see the end of it. Nine months is a long time. My labours weren't too long and my cycles would start up again between six to eight weeks later. By that time I only used pads when I was coming home from the birth of my children. I wasn't able to go back to tampons right after. The doctors had told me to wait three months or so. They were old fashion at the time. There is always a problem of discharge, with me it wasn't more than a week or two, then my period would come. It would last a lot longer than usual, but after that, things were back to normal, and you could use tampons again.

"My cycle had been regular all of my life. It was like clock work, even after the babies were born. I never had cramps. I would get a little depressed. I always knew two
days ahead of time that I was going to get my period because I’d feel kind of down, but I can’t really say it was ever too bad. If it was getting in the way of your day, you would take Midol. It was the remedy we chose back then, but I rarely ever had to do that. I had a cousin who took everything in the book, but none of my close friends ever had too many complications with their period. I know that my body felt sluggish and that my breasts would feel sore. My cycle lasted about 5 days, the first day being a bit heavy, and the rest just getting lighter. Even when I started taking birth control pills, when I was thirty-eight or forty, when they became available, my cycle stayed the same. It had never been an issue in my life.

“I did talk to Christine about menstruation before she started. It wasn’t the easiest thing, but I was determined not to be like my mother in that respect. Christine started early. I think she was ten years old, close to eleven. She took it the same as I did. It was part of life, sometimes a nuisance, but you put up with it. By that time you could buy pads and tampons at the grocery store, so I’d buy the products for us as part of my grocery list. Eventually my husband would get them too. At first he wasn’t too comfortable with the idea, but later it was nothing for him to go to the grocery store or drug store and pick them up. I was never concerned about the cost because they were something you had to buy. It never felt like a lot of money, and they just went in the grocery cart so I have no idea how much I spent on them. I think that if you were extremely poor and watching pennies you would know, but we were never at that stage.

“I watched as advertising became bigger and more important. I don’t remember the first time I saw an advertisement on TV, but I remember thinking that people were educated enough that they didn’t need to see this on TV. At this time I was probably offended by them. It was black and white TV, so around the 50’s. I’m not offended anymore, but I still think that they are unnecessary. They never showed the product in the commercial. A woman would either be speaking to a female doctor or a friend. Never a mother and daughter, not then. One woman would complain about a problem and the other would say she should try such and such product. They are still doing that now. It was very discreet in terms of language, it still is, but back then they never said ‘period’ or ‘menstruation’, and they never showed the product, especially to show its absorbency. I think I eventually tried all of the product as they came out. Samples would
be sent your home, in very discreet packages. When O.B. came out, I switched from Tampax. This was years and years later, but I liked the application of that one better. They have changed so much now. There are so many different kinds.

"In my late forties my cycles just got less and less and then faded into the background. There was no starting and stopping, it just faded slowly. I never had a hot flash, never had time to experience any of those things. Estrogen therapy wasn't really around until my fifties, so I didn't think about that until several years later, when I was having my yearly check-up. My doctor was doing my internal and he took a swab and the membrane started to bleed and that told him that I had the start of osteoporosis and that was when I went on hormone therapy. It didn't make me start menstruating again because I took them full time. And that was it. I just did it and went on with my life. It was going to happen, I knew all about it and I didn't have any problems. I did have to have a D&C\textsuperscript{19} somewhere along the lines because there was spotting somewhere in my fifties. There was nothing wrong but that just cleaned it up.

"Looking back, the perception of menstruation has changed because in my younger days it was hidden. It was there and it wasn't going to go away. It happened to all females, but it was in the closet. And now of course it is open and discussed among females which I think is very good. Younger children know about it and that this will happen to them and it is an acceptable way of handling it. I don't think that menstruation needs to be celebrated exactly, it should just be respected and acknowledged, because this is life. This is what it is all about."

\textsuperscript{19} A D&C (dilation and curettage) is a surgical procedure which removes any tissue build-up of the uterine lining. It is undergone to clean the uterine lining after surgery, miscarriage, incomplete abortion, as well as to find the cause of frequent or heavy periods (Kunz. 1982; Northrup. 1998).
Christine Rowland (b. 1946)

As a female you are born with all the ova you are ever going to have, as opposed to males which create sperm on a regular basis. Each month as the ova mature and are released, the lining of the endometrium builds up to support it if you become pregnant. If you don't the lining is shed and comes out as menstrual blood.

“I haven't had a period since I was 45, and it was no problem at all to stop menstruating. I was happy to. It is an important thing to some people though. It is a big issue for a lot of women. I have patients that when they hit menopause they want to have cyclic hormonal replacement therapy so they continue having periods. I think they are crazy, and it's not uncommon. Their cycle is just really tied up in their assessment of what they are. It is a non-issue for me because it doesn't have anything to do with who I am or my sexuality. It is a biological function and nothing more.

“I was born in Sarnia in 1946. We were a typical fifties family. I have two younger brothers and we all get along fine. I went to high school in Sarnia, except for my last year, that was in Toronto. My father got a job there, so we all moved with him. I was advanced a year and then I had mono so I ended up graduating with everyone else. I only went to university because Jack wouldn't marry me out of high school, as most of my friends did. I met Jack, my husband, in high school in Mississauga and we have been together ever since.

“So I did three years of undergrad, got married, then did three years of medical school. I had never been discriminated against until I applied for medical school in Toronto, and it really took me back. I was told that they had never had a married woman in the program, and they weren't going to start with me. They told me they'd have considered me if I had had a tubal ligation and asked me what kind of person was I married to that would let his wife become a surgeon. Well, that was the seventies, and since then there have been a lot worse things happen to me. It's pretty disgusting. I

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30 In undergoing hormone replacement therapy, women have a choice of taking pills cyclically, as with the birth control pill, or continuously. Women who chose cyclic hormone replacement therapy will continue to have periods, while women on continues therapy will not.
ended up at McGill. Quebec has a different attitude toward female physicians. There are lots of female physicians in Quebec, they were just more open to it. When I finished I was one in 30 female surgeons in Canada.

"After McGill we moved to Zurich. Jack did his Post-Doc there, he is now a professor of chemistry. I did part of my residency in Zurich. I became pregnant and had a miscarriage, which was hard. I was twenty-eight years old and ready to have kids, and it had been five months into the pregnancy. I became pregnant with Emily a year later. My cycle stopped right away and I never had any spotting or anything. I always felt smug when I was pregnant. I was proud of myself. It’s like you are fulfilling your biological destiny. My body didn’t limit me, I worked till the day I had her. I worked Monday morning and at night, had a C-section. The pregnancy was fine, although I threw up the whole time, but I had every complication known to man during labour. She was breech. She was in the hospital for months afterward and she couldn’t suck, so I didn’t breastfeed with her. I think my cycle started 2 months after that. I didn’t go back to work as a doctor, I did research which was okay. We soon moved to Boston for a couple years, and I continued with my research. After we moved to Windsor, and that’s where we’ve been ever since.

"Emily was six when I became pregnant with Lindsay. My pregnancy was the same. By that time I was doing my residency in Detroit. I worked on Sunday and had a C-section on Monday, returning to work two weeks later. You have to be tough, though it’s not for everyone. Emily might do that, she’s pretty tough. I was told that I would have to repeat part of my residency because I was pregnant. They had someone who had sliced all of the tendons in his hands and hadn’t worked in six months and they graduated him. They told me that because I was going to have two weeks off to have my baby, which was my vacation time, that I would probably have to repeat part of my residency. I told them to write that down on a piece of paper and I’d give it to my lawyer. I didn’t hear another word about it, and graduated.

"Emily started menstruating much later than I did, she was thirteen. We talked about everything, and then she didn’t start for years. I held off with Lindsay and then she started really young. I didn’t know about menstruation before I started, but I started very young, ten years old. I came home from school bleeding. It was no issue at all. I just
asked my mother what it was and she got me some pads. I don’t think we talked about it very much. I was given a book and that was it. It was just a part of life. I did find the pads really annoying, though. That was back when you still wore the pads and the belt, before they came out with sticky adhesive tape, or you wore the rubber pants. I rode my bicycle every day to public school, and those pads made that task very uncomfortable.

“It was really messy back then. That’s why you had rubber pants. In public school you couldn’t leave to go to the washroom, and I had a really heavy flow, seven to ten days. The belts would come loose, they would break or shift. They were ugly and heavy, and they felt like a thong. Gross, really. But then we had all sorts of fun things. There wasn’t pantyhose, so we had garter belts and girdles. I started wearing tampons when I was thirteen, back when Tampax was our only choice. When more brands came out I kept using what I had been using. I tried other things, but I never really liked them. I think both my parents may have bought them for me, but they were certainly not a choice for a virginal young female. Girls in those days didn’t swim or take gym when they were menstruating. But I was a jock and not going to let it interfere with anything I was going to do. Tampons allowed me that freedom. It was inconvenient the first time, but once I figured out what I was doing it was fine. You didn’t tell people you were using them, of course. I didn’t talk to anyone about it. I always looked down on women who used menstruation as an excuse not to do things. It’s a sign of weakness. It’s wimpy. It was used as an excuse not to do things that they supposedly wanted to do, and that is dishonest.

“My period had always been regular, and never painful. It was like clockwork, to the hour almost. If I missed a period I was pregnant, it was really simple. I took the Pill for seven years which made the flow lighter, but that was it. My cycles have never been affected by stress. Menstruation is just a fact of life, like eating or defecating or sneezing. It is a physical issue, not an emotional one. It isn’t something that should necessarily be celebrated, but rather understood as a natural function of the female body. That’s how I approached the girls about it. We are a family of extremely pragmatic people. When the girls started it was fine, not a turning point or anything, just a normal thing. We had lots of books in the house, so it was not hidden in any way. I wanted them to be respectful of their bodies and not embarrassed by their periods. Lindsay started
when she was eleven or ten years old. She was young, too young to be comfortable with the onset of her menstrual cycle. I don’t think any of her friends had started either. She knew about it, but I hadn’t talked much to her about it because I figured she’d start later. She was at a horse show in Calgary staying with the other girls in the show in a hotel. She felt too young and wouldn’t tell anyone about it. She wouldn’t go to the store and buy herself anything. She emptied out all the Kotex dispensers in the hotel, at a dollar a shot! I arrived a day later and she made me go to the store for her because she felt too young for this.

“I have no idea how much money I have spent on tampons and pads because I don’t buy them. My husband does the shopping in our house. I haven’t done the grocery shopping since 1977, and I am very proud of that. We bought them for the girls at first, but then they bought their own. The girls have enough money, we spoil them completely, so they should be buying their own products. I know that I would use a box of tampons with each cycle. The first couple of days I would have to change them every two hours. I’d use pads and tampons together on really heavy days. We never budgeted for them.

‘The price was not a concern. I would put pamperers on my kids before I fed myself. It’s all about your priorities. I don’t think about what they are made of. As a doctor I would tell people not to use the ones with powder in them. There is research that shows that women who use talc have a higher risk of gynaecological cancer. Douches are bad too. They change your bacterial flora. It’s an area that doesn’t need to be cleansed.

‘Sometimes I felt a little crampy when I menstruated, but mainly, I didn’t notice it. PMS is an excuse for a lot of women to be crabby, and I never fell into that. Some women are sensitive to their fluctuations in hormones and they experience bloating, irritability, headaches, water retention, etc. Physical things happen. But stress isn’t what happens to you, it’s how you react to what happens to you. Lots of people have problems and they don’t let them become central issues in their lives. But many people let minor things become the central issues of their lives. I do think that PMS exists. It is a constellation of symptoms and complaints. But I think that people’s tolerance to discomfort varies. I think that in primitive societies there was probably not a lot of PMS, probably none. It’s a kind of neurotic North American thing with people that have too much free time on their hands. If you are busy, you won’t think about it. Everybody gets
moody, and it is easy to let that get to you. It's a copout. Man in general does not like not understanding things. For women, I think PMS is something to blame. If you are tired and overworked and overstressed and put everybody's needs before your own, which most women do, then it is easier to say that what I am feeling is PMS, rather than that my life is out of control and I am not getting any satisfaction from it. It's an easy thing to label. Menstruation never affected my work life, though I know that it has affected other doctors. For me it was nothing more than inconvenient. You had to remember to carry those stupid things around. However, if you have endometriosis, then you will probably experience serious pain. That's when the lining of the uterus becomes implanted in the abdomen, and it usually leads to infertility. A lot of women who have pain, have it because of endometriosis. It has nothing to do with menstruation, it is not part of PMS. Endometriosis is a disease and can be quite difficult to deal with. Sometimes women have to have a hysterectomy to stop the pain.

"Like I said, for some women menstruation is a big issue, they link it to their identity. It can be a symbol of women's reproductive power. It's okay to view it that way, but I didn't. For me, menstruation does not define women as women. Having an X chromosome defines women as women. It is a lot more complex than that. Women are the nurturers in society. They are the witches and witch doctors. Being a woman is really awkward. Trying to be a surgeon and a mother and a woman. I don't think of people in terms of gender, but I know that I have been defined by mine. I am discriminated against all the time. This has shaped me. It has made me perceptive. It has made me bitter. It has made me something that I would have preferred not to have been. I can give better than I get, and nobody messes with me. I have had to be extremely aggressive. Women can't win. Women don't win as professionals. If they are aggressive they are unfeminine and a bitch. If they are not aggressive then they are not real doctors. These have been my obstacles. They have not interfered with the outcome, they only interfere in getting there. It has only made it less comfortable. I've never seen Emily in a situation where she is discriminated against based on her gender. Lindsay either. Guys used to ask Jack if his wife got discriminated against and he'd tell them no more than two, three times a week. It still goes on. Just like racism is alive and well out there, sexism is still out there too.
"I would say that the perception of the medical community has of menstruation would depend on what doctor you spoke to. It's the same with women's bodies. How I feel about people has a lot more to do with their socio-economic status than it does with their gender, more with what people do with their lives rather than their sex. People that come in on welfare, people with three kids from three different fathers, immigrant women coming in who can't speak a word of English even though they have lived here for twenty years, those elicit stronger reactions from me than what sex you are. I have a strong work ethic and my feelings toward patients are expressed through that ethic. I don't have sympathy for people that bring on their own problems because there are a lot of things that happen that you don't have any control over and I think it behooves us to be responsible for our own actions. I think that it is okay to tell people something bad as long as you give them something they can do about it. I see a lot of women with breast cancer and I don't have much use for women who are fixated on their breasts. I have patients who are dead because they would not let go of their breast. Their breasts are who they were and they wouldn't have anything done to them. I don't think that is right. If you came in and you had colon cancer you wouldn't think twice about getting it out. You have to think of surviving first, and then the cosmetic outcome. Many patients have the surgery and get on with their lives. Other patients, nothing else happens to them for the rest of their lives.

"Menopause started for me in my mid-forties. Menopause is ovarian failure. When your ovaries fail your pituitary drives them harder, so your pituitary hormones go sky-high, your LH and your FSH21. Menopause isn't painful. Your estrogen and your progesterone levels go down. Theoretically, you only really need the estrogen, as a hormone replacement, but if you take unopposed estrogen then you are at risk for uterine cancer. If you are on estrogen, you have got to take progesterone. A lot of the unpleasant side effects come from the progesterone not the estrogen, but you can't take the estrogen alone. I had one or two hot flashes and that was it. I started taking

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21 What Christine is referring to here is LH (luteinizing hormone), and FSH (follicle-stimulating hormone). These are hormones produced by the pituitary gland to stimulate the ovary to produce eggs. They peak during pregnancy and ovulation. As ovulation decreases, LH and FSH increase (Northrup, 1998). Christine is saying then that during menopause a woman's level of these two hormones, LH and FSH, increase.
hormone replacement. I think everyone should. I wasn’t sleeping at night. I couldn’t
sleep. I was still menstruating, but I couldn’t sleep. I was waking up every two hours.
The really awful symptoms that women have from menopause are not the ones you hear
about. The ones that drive them crazy are the not sleeping. The other one is they often
get irregular heart rates, which is really annoying. It probably took about a year to get
the dosage adjusted. It took about 6 to 12 months before we worked out what was best
for me. I think that that is why a lot of women stop, because there is not just one dosage
and one way of taking it. There is the pill, the patch, the cream, sequential, continuos,
and so on. And you have to figure out what you feel best with. There is a lot of
unnecessary fear and suspicion surrounding hormone replacement therapy. If you take
hormone replacement therapy for over 10 years you have a very slight increase of
developing breast cancer. If you smoke your risk is higher. If you don’t take it you have
a 10 times chance higher of developing heart disease and hip fracture and you are much
more likely to die of heart disease and hip fracture than you are of breast cancer. The
problem I have with all the Yam paste stuff, those natural hormone replacement
therapies, is that you don’t know what dose you are taking, it is not a properly regulated
supplement. Pregnant mare’s urine has been around for a long time, people have been
taking it for over 40 years. It’s got a pretty good safety record.

“Today, discussion of menstruation is much more open. You see it more often, on
TV, in magazines, it’s not as hidden. I don’t think women are meant to feel sick, like in
my day. Then, when you had your period you were meant to feel kind of sick, or weak. I
don’t think society thinks of it in those terms so much. For me it was an inconvenience
that I didn’t let get in the way of things I wanted to do. It didn’t keep me from having sex,
playing sports, going to work, nothing. The perfect way to menstruate would be not to,
but it doesn’t mean that you can’t lead a normal life with it.”
**Emily White** (b. 1975)

*The female hormone cycle runs about 28, 29, well 28 if you force it. At some point the uterus sheds its lining right before it is getting ready to receive an egg. It sheds its lining and that's the blood that is getting sloughed off.*

"I was born in Switzerland, although my parents are Canadian. They were just living there for a couple years, and I just fit into that space. I definitely had a happy childhood, and an open one at that. My parents are still married. My mother is a surgeon, my father a professor of chemistry, and I have a younger sister who is in her last year of high school. She’ll be going to university in the fall, taking biochemistry. I cannot remember the first time I heard about menstruation, but I know that I was fairly young. I had the book ‘Where Did I Come From’\(^{22}\), and I think that it may have provided me with reference to that sort of stuff. I think we just had a very open household, so talk about menstruation was always there, or always possible. Menstruation was treated as any bodily function. There was never a date or moment which was provided for discussion of it.

"I started in grade eight, I was thirteen, which is kind of late. Most of my friends had already started, so I felt kind of relived to join in this. Among my friends menstruation was perceived as a type of puberty stepping-stone. But I don’t think I could say that I was really happy, or scared or anything in starting. I think it started in the morning, before school, and my mom and I talked about it while she drove me there. I don’t remember exactly what she said about it, but I know it wasn’t anything about growing up, or becoming a women. My mom’s not really like that, everything is cut and dry with her. But I knew about it already, I was prepared for it, so it wasn’t really a big deal. We just acknowledged that it happened, that I started my period. I guess it felt like a step, but it didn’t make me feel any different. I didn’t suddenly feel like a woman.

"I used tampons from the beginning. It was all we had in the house. I was a bit nervous at first. I think it took me a long time to get the hang of it that first time, but I

quickly got over it. I use Tampax, the standard brand. There are a lot of advertisements that tell you that one is specially formulated for this or that, but they all work the same. I have never felt the need to switch from Tampax. I buy one absorbency, regular, and that’s it. I think my dad bought them. He did all the grocery shopping, and I just took them from the cupboard when I was younger. I think I started buying them for myself when I was still in high school, and of course I was embarrassed about it in the beginning. Now I am okay with it, but I still prefer a female cashier. It’s like buying condoms. You know that everyone buys them, it is a normal, natural thing, but it’s still a private thing made public. Both go inside your body, and in some spaces, that’s always a little embarrassing.

“Tampons are not something you could live without. They are a necessity, so I am not concerned about the cost, nor do I budget for them. I will buy them at places where they are cheaper, like Zellers, but if I need them and I am in the drug store, I’ll pick them up. I think pad and tampon advertisements are stupid, getting more stupid with each one. They don’t interest me in other products as I have a brand I trust and won’t switch from. I trust Tampax, it’s the main tampon brand. Like Kleenex, the brand becomes the product. I’ve never worried about what they are made of. I’m sure that they are tested. I sleep with tampons all the time, Toxic Shock Syndrome isn’t really a worry to me. I know a lot of people who wear tampons, and no one who has gotten TSS from them. Sometimes I may feel that I am getting a headache or something, and it seems like it’s because I’ve been wearing a tampon for too long. I’ll just change the tampon and the headache goes away. I imagine that you would have to leave a tampon in for a really long time for anything to happen. Some of my friends don’t trust tampons, because they are bleached\(^{23}\). There are a lot of things out there that we inhale or ingest that are worse, and we don’t question them, so I am not too concerned. I’ve got a good and comfortable system and I don’t feel like changing it.

“When I started I think I was regular. I don’t remember ever complaining about it. I know that it was a lot heavier before I went on the Pill, which I’ve never really taken a break from. I believe I was 17 when I started taking that. That’s when I started having sex, and I can’t see myself having sex when I wasn’t on the Pill. I didn’t go through my

\(^{23}\) A description of how tampons are manufactured is provided in Chapter 3.3.
mother to get them, I went through my family doctor. I believe that at the time I hadn't been dating anyone long term, and I didn't want her thinking anything about me in that way. I remember when my sister started taking them because we were at the breakfast table and she just announced it. I wasn't that straight forward with the issue. Once I started the only thing it did was make my cycles lighter. I never had cramps or anything before. I was always regular, which was nice. But later, I changed my Pill to one with a really low dosage of estrogen. For almost a year I didn't have a period at all, or it would be really really light. I talked to my doctor about it and she told me that's what can happen with such a low dose. Now I have one, but it is still really light, lasting two or three days.

"I have never had any problems with cramps or anything, but in the last two years I have experienced them. I don't know exactly why, I can think of a lot of possible reasons. I don't have the greatest lifestyle. I don't always eat right, I don't exercise regularly, and I work a lot. I work a hell of a lot. I suppose that it is probably stress related. Now, when I am going to menstruate my appetite increases. I tend to eat a lot and am constantly hungry. I usually dream a lot and my dreams are usually much more vivid. My period usually starts on a Tuesday morning, starts heavy, gets lighter, ends by spotting. The whole thing lasts about four or five days. If I experience cramps, they occur generally for just the first day. It is very dull, but that doesn't mean that it is weak, it is just not a sharp pain. It is hard to describe, but it feels like someone is pulling at my insides. It is right in my stomach and I don't want to stand straight up when I feel it. It's really hard to describe what it feels like to menstruate. It's like having a slow leak of thick fluid coming from you. I know that sounds really bad, it sounds like I am talking about a car or something. I suppose I don't think of menstruation as an experience. It is something my body does, nothing more.

"I will say that I do suffer from mood swings, but I'm kind of moody all the time. I joke that it could be affected by the work I do. I work with estradiol, which is the main female hormone. I'm doing my Ph.D. in chemistry, and this is my current project. I am developing an immunoassay for it, so we can test levels of estradiol in a person's blood. When you go through menopause, the reason women experience all of those awful symptoms is that their estradiol levels plummet. When you are pregnant and ovulating, it
goes up. That is how you can test your ovulation for fertility testing. The levels are also related to breast cancer and a lot of other diseases and disorders. Estrogen is the name for all the estriats: estrone, estradiol, and estriol. Estradiol is what they use in hormone replacement therapy. I think estradiol levels are highest when a woman is ovulating, but I am not exactly certain. Knowing that isn’t pertinent to my research, I’m just developing the test. There are already tests out there. I am working with a company that just wants a better and faster test. I didn’t choose the project, they chose it. There is a lot of interest in this topic right now because estradiol is being linked to a number of different diseases, like prostrate cancer in men. Men have the hormone too, just a lot less of it. It has been interesting work, but I can’t say that I feel like I am doing something particularly good with it. I’m just working to improve something that is already out there.

“My cycles have always been pretty much the same, except for the year that I stopped. My period doesn’t affect my ability to do work and carry on in the day’s activities. To some degree it will affect the way I feel about myself. Because I usually eat a lot before my period, and because my body does retain water, I usually become a little self-conscious about my stomach, but no more than if I had stuffed myself during a meal. The only thing I will avoid is sex when I am menstruating. It’s messy enough without blood being involved. The only time I would consider it would be in a desperate situation. If I’m at the end of my period and I am only going to see that person for two days. But if I can avoid it, I will. Since I am chemically controlling the levels of hormones within my body my cycles should be fairly regularly. I expect that they should vary somewhat depending in how stressed I am, what I’ve been eating and how regularly I’ve taken my Pill. If I’ve missed a day and have to double up, taking two pills in a day, I’ll usually skip my period for that month, or just have some spotting. I suppose I’ve got a really good cycle, since it is so light and regular. Of course, I’d rather not menstruate at all, but I think I am pretty lucky. If I could change anything I’d make the boundaries of my period more abrupt. Just three days bleeding as opposed to the two or three days spotting, that brown coloured discharge that is unpleasant.

“I’d say I am comfortable talking about menstruation, but I don’t really talk to men about it. I wouldn’t really talk to my partner about it. If they ask, I’d indulge them, but I would never just bring it up. It doesn’t mean very much to me. Menstruation
doesn’t hold any significance to me, and I’ve never had any problems with my cycle. I guess I don’t feel that it is a topic that needs to be brought up, particularly for myself. In a relationship, the only reason that I would bring it up would be to say ‘I’m menstruating’, as in ‘I don’t want to have sex’.

“I think menstruation is really a non-issue in society. It’s not something people talk about openly with casual friends. It’s not discussed like the weather per say. Most guys I know aren’t afraid to talk about it, or be present when it’s being discussed. But really, what does a man have to add to a conversation about menstruation besides curiosity? I personally do not think there is any need for all of those awful commercials on TV. A better advertising strategy wouldn’t hurt. The Tampax commercials aren’t too bad, they are discrete and even a bit clever. I don’t think I’ve witnessed a change in the way people understand menstruation. I just really think it isn’t a very important issue in society, nor that it should be.

“I’d have to say that I don’t think about menopause too much, it is really far away. I do know that I am not looking forward to it. There is all of the discomfort of the whole ordeal, which can be extreme in some cases. Hormone replacement therapies are available and actually should be used to avoid the onset of osteoporosis. Coincidentally, it’s the decrease in estradiol levels that actually induces the loss of bone density. In any case, if I were to subscribe to such a treatment I think I’d only feel comfortable taking synthetically produced estrogen, as we know where the natural source comes from, pregnant mare’s urine. I’ve been riding horses since I was eight. I worked with horses, I participate in horse shows, and I have owned horses. It doesn’t feel right to use estrogen from a source that I don’t agree with. It’s funny too, although I am far from sentimental about it, the loss of one’s period seems in some way to dampen the sense of womanhood. Not being able to reproduce I would imagine could be a blow to one’s sense of femininity, even though I am not sure if I ever want to have kids, and I know that I won’t want them at that age. Thinking about it from this vantage point, menopause may make you reconsider aspects of who you had always been.”
Lindsay White (b. 1981)

When you are ovulating, before the release of the egg, the lining of the uterus builds a layer of blood to feed the fetus and when you don’t plant an egg it is discarded, and that’s what menstruation is.

“My first introduction to menstruation came from Judy Blume books. I think I was nine or ten years old when I read ‘Are you there God? It’s me. Margaret’24. From that book I learned a lot about menstruation, though in it the character had to use a pad and belt, which is nothing I was ever faced with. Before I got my period I know that I really wanted it, but I’m not too sure why. It was just like wanting to shave my legs, I wanted to be more mature. I remember when Emily started. I remember that she was having problems with the tampons. Emily was in my parent’s bathroom and my mom and I were sitting on her bed, just outside of the washroom. My mom was coaching her through the door. Emily kept saying ‘I am supposed to get this in here?!’ It was all kind of funny. I guess she kept dropping them on the floor, until she finally figured it out.

“I was really young when I started, the first of my friends. I was away at a horse show in Calgary. I wasn’t with my parents yet, they were coming up later. I was sharing a room with a bunch of other girls, some younger, some older, all nice, but none that I felt really close to. We weren’t really friends, we just rode horses together. I got my period at night and woke up to it. I was eleven, so I couldn’t drive to a store to get anything. I just felt really embarrassed. I didn’t feel comfortable telling anyone, or asking anyone if they had any pads. I ended up using all of the pads from the hotel, you know, from the dispensers in the washrooms.

“My mother was the first person I told. When my parents arrived I made her get me pads. It was all very embarrassing. I had borrowed someone’s riding pants. They

24 *Are You There God? It’s me, Margaret.* was written by Judy Blume in 1970 and is an important part of the menstrual canon in North America. For many young girls, *Are You There God?* provides an important introduction to menstruation, training bras and other tales of pre-teen anxiety. Blume deals less with a biological explanation of menstruation and instead focuses on the products (belt and pad) and the experience of it as the four main characters buy their belt and pads in preparation for their first time and discuss what they think menstruation feels like.
were specific pants that you had to wear for a special class. They were white, and I
stained them. It was really just stained on the inside, but you could kind of see it on the
outside. The stain was more between my legs, so it wasn’t obvious, but it still made me
uncomfortable. I got them dry-cleaned, so it ended up alright. I don’t think I really saw
any of this as a rite of passage. I didn’t really feel like I was becoming a woman. I
didn’t really know what was happening, what was happening physically. Just from books
and TV I thought that I wanted it. I learned all of the technical stuff later, in biology
class.

“In my household menstruation was never an issue. I told my sister when I
started. We always had an open household and everything. It just wasn’t that important.
With my friends, we had all read the same books and we all thought we wanted it, we
wanted to mature. I suppose before we all started we did talk about it a bit. Now, it
never comes up, unless we are asking for a pad or something. I am pretty comfortable
talking about menstruation, though I don’t talk to men about periods, I don’t think that
they want to hear about it. I don’t think I have ever been in a situation where it
- spontaneously comes up in conversation.

“I don’t ever think about menstrual blood. Since that first time, I haven’t had a
leaking experience. I don’t know what I would do if someone saw an old stain on
something of mine. I suppose I wouldn’t like it. I think that it would just reflect poorly
on me, like it looked dirty or something. But I really don’t think too much about that, I
just know that I would be concerned if I had leaked and someone saw it. Now that my
cycles are so light I don’t worry about it.

“The first products I used were pads. Always with and without wings. I think it
was a regular absorbency. My mom bought the first ones, then I bought them. It was
rather uncomfortable the first time, to purchase them, but now it doesn’t bother me at all.
I started using tampons in grade nine. I joined the swim team, so I didn’t really have a
choice. I couldn’t skip practice because I was menstruating. I’m not sure why I didn’t
use them right away, since everyone in my house used them. I guess it just seemed scary.
I don’t remember that first time, so it must not have been too bad. I think I just grabbed
some from home, it was Tampax. After that I never used pads, because tampons are
easier than pads. I still use Tampax too.
"When I first started my cycle was heavier. It was always regular, it just lasted a week, and was heavy to medium for most of that time. I don't experience any of the symptoms associated with PMS. I may feel a little bloated. My pants may feel a bit tight, but they usually feel tight after big meals so it is not really a big deal. My period doesn't affect my mood or my ability to concentrate. I started having some cramps on the first day, but they weren't that bad, and I don't have them anymore. My period never really disrupted anything, especially now.

"I started taking the Pill two years ago. My cycle stopped for about a year and when it came back it had shortened, so now it only lasts three days. It didn't bother me at all not to have it. I was told that it would possibly happen. The doctor had said that some people stop and some get heavier periods, it just depended on the person. It was great. My period stopped right away and came back light and short. And my breasts grew. I think that those are two pretty good selling features for using the birth control pill.

"I know that my period will come during a certain week because of the birth control. I take them for three weeks, then stop for my cycle. I usually start on a Monday or Tuesday and notice one time when I go to the washroom. It's usually quite light in the beginning. It lasts three days and I go through about three tampons a day, and one at night. I can effectively forget that I have it. It's not an issue. It then gets really light and stops. Sometimes I get cramps, but I am allergic to milk, so whenever I have cramps I associate them with that. It always feels like a food cramp.

"Because my cycle is so short and light, one box of Tampax will last me three months. I have no idea how much I will spend on this product, I don't think about the cost. It's a necessity. I'm sure I spent more when my flow was heavier, but $8.00 every three months is no big deal. I've read all the stuff about Toxic Shock Syndrome and don't worry about it. As long as I don't leave one in all day I know that I will be fine. And I never think about changing brands. Tampon and pad advertising is pretty stupid and I don't see why they have to be on TV. I think people should be able to figure it out without the commercials. They may be effective on some people, but they just make me uncomfortable and waste TV space. Anyway, I'm too lazy to switch brands. I'm not going to change it unless there is some sort of problem, which has not happened.
“I’ve never heard of anything that you are not supposed to do while you are menstruating. I’ll shove my tampon in my pocket to keep it hidden. I don’t try and show it off, but I don’t really care if someone sees it. Menstruation happens. When I started menstruating I think I found it more of a hassle because I wore pads which are uncomfortable. Then I didn’t want to do things or be very active. Sports weren’t easy with a pad. But now, it doesn’t affect me. And when I didn’t have it, I didn’t miss it. There wasn’t anything missing. There wasn’t a lot of extra time all of a sudden. It just wasn’t happening and I wasn’t connected to it. I’d be really happy to stop menstruating. I’d stop menstruating through a pill so long as it was healthy and there were no side effects. I don’t see what purpose menstruation serves. I’m not looking forward to menopause though, but not because it will mean the end of my period. I work at a kid’s clothing store and some of the women I work with are going through menopause now. When they talk about it definitely doesn’t sound like much fun. It just seems like another hassle in life. Hot flashes, hormone replacement. It seems worse than getting your period in the first place.

“I think a lot of people don’t understand why menstruation happens. There is a lot of ignorance about that I would say. I find it a hassle and find it hard to believe that someone wouldn’t feel the same way about it. I guess there are people who might find it a good thing. It is something you have to do, there is no option in it. I don’t think it’s a big deal. I might if I had more symptoms. Then perhaps I’d have more to think about.”
Nora’s Family
Judy Hayes (b. 1951)

Menstruation is something specific to the female body. It occurs monthly. It is the process whereby the reproductive system casts off the unused eggs for that month contained in mucous and blood, and it lasts for three to five days.

"I think it is important to say first off, that I come from a varied background. We moved around a lot and I've got a lot of half siblings. I was born in 1951 in Rivers, Manitoba, the middle of Canada. I was the second born, only girl. I have an older and younger brother in my original family. My father was in the armed forces and my mother was a homemaker. We moved because of my father's work, and we did it every two years or so. This wasn't so easy once I became old enough to make friends in the neighbourhood and at school. You lose your bosom buddy. And every time you changed schools, your school work changed. They are never at the same spot you were. You either have to catch up, or wait for your new class to catch up to you. So, this moving around wasn't so enjoyable.

"When I was seven, my parents got divorced. After that I didn't see my biological father that much. He was an absent father. In those days divorce wasn't talked about. He'd show up once a year, once every couple years, to take us on vacation. He'd drop us off at his mother's house and go away, coming back only to take us home again. That's how they did it in those days. When my parents separated we moved to the town where my aunt and grandmother lived. That's where we waited for the divorce, which took two years. It was also the place where I first learned about menstruation.

"I know that I knew about menstruation before I started. In school we were shown a movie about it. Before that I was a Brownie, and we were given a book about body care at one of our meetings. It had stuff about combing your hair and bathing, and I think it mentioned menstruation. But I probably learned about it mainly from my cousins. I had a cousin who was two years older than me and we were really close at the time. Her sister was a year older than her, and when her sister started we heard all about it. I think her family explained it to us. Her mother, my aunt, was a nurse and my cousin (the one closest in age to me) would go through all of the medical books in the
house. She was really well versed. Later she became a nurse herself. And she was the one, my source.

"When the divorce came through (I was nine) my mother and my step-father secretly got married. With that we moved up North, to where my grandfather lived. I ended up with a whole bunch of step siblings. The marriage to my mother was my step-father's third marriage. From his first he had three girls and one son, from his second he had had another daughter. At this point there was only the youngest girl living at home with him, as the rest were at university. They would visit, so I do know them, but we never lived under the same roof. Now I liked my step-father. I respected him. He was interesting, a philosophical kind of guy. He took nothing for granted, considered and digested everything. The remarriage was not difficult for me but there was a lot of tension in the house. My older brother had a hard time with it because he was closest to our father. There was now a big change in male role models, from the macho to the intellectual. He had also gotten used to being the 'man of the house'. For my step-father's youngest, the marriage was very disruptive. She had been living alone with her father for several years, so they had their own relationship. My whole family just moved into her space. She then left and went to the big city, moving in with one of her sisters or brother, before getting a job and apartment of her own. My step-sister was born when I was ten years old. We moved again when I was ten or eleven because my step-father was tired of the politics at work and he wanted to branch out. We first lived in London, Ontario for two years, then we moved to Toronto. Even though we no longer had to move, our two year pattern remained intact.

"I don't remember what happened when I started menstruating. To be honest, I don't remember much about my cycles because they have never been important to me. If I had a choice, I would never menstruate. I would eliminate the whole business. It's not the bleeding that is so bad, but what it does to your mental and physical state that is annoying. I remember that the group I was hanging out with at the time all got their periods before me. It had already become common jargon. They would carry on about it, it was our high-drama. I know I was living in Toronto when I started and I know that it was considered a normal, girl thing. It was something that you didn't talk about in the household because it was private."
"The only thing about menstruation that I remember well were the Kotex pads. The first time I wore one it felt bulky and strange. They had those crazy elastic belts with them. But we had a whole bunch of nonsense at the time. We couldn’t wear slacks to school, only skirts and dresses. So in the freezing cold your wore slacks under your skirt or dress, and took them off when you got to school. Underneath this you wore bloomers. This was to keep your body warm. And, because panty house was yet to be invented, you also had to wear stockings with garters. The belt was just one more contraption. It was messy, menstruation. You used to get it all over yourself. Those pads weren’t very good.

"I think my mother bought them when I was young. They just appeared in the bathroom and I took them. In high school my cycle wasn’t too bad, I know I didn’t have cramps. I have no recollection of how long it lasted. I knew girls who were bedridden every month because of it, and my periods weren’t anything like that for me. I know we talked about in high school, it had its own slang lingo for, ‘the rag’. Boys talked about it too. I started wear tampons in high school. The first time, it took a while to get the hang of it, but it wasn’t a really big deal to use them, most of the girls did.

"I moved out a week before my sixteenth birthday. We had a history of leaving home in my family. I left because I felt unrecognised I suppose. I had no role. I was also disappointed in how my parents handled my older brother leaving. My brother left home because he couldn’t stand the stress there anymore. When I left I moved in with him in Toronto. I wasn’t going to school, I think I was just working. My brother then went to California, so I went to California. That was wonderful. We lived in commune! You can see, I’ve lived many lifetimes! I lived there about two years. It was a whole different world. People were vegetarians, vegans. It was a whole other culture going on down there. I started to investigate what it was all about. I learned from them. I ate what they ate. I shared in the cooking. I went to a lecture given by America’s No. #1 nutritionist in the sixties. I went to other lectures, I bought books about healthy living, and from there got into herbs. Herbs for life, herbs for healing. This then formed my eating habits for my adult life. I believe in preventative medicine, and my lifestyle is a form of that. If you don’t feel well, or you are getting something that is too small for a doctor to be concerned with, then it’s time to adjust your diet. That’s been my approach on life, and I am always researching this stuff."
“It’s funny, but I don’t remember much talk about menstruation in the commune. I was using tampons then, I think most women there were. I remember that there was a lot of natural childbirth going on. I also got into modern dance in California. I came back to Toronto when I was eighteen and I studied dance/drama at one of the colleges. I met Richard shortly thereafter and we got married in 1971. He was in law school when we met. We were a happy couple. We had gone through a stage where we weren’t going to have kids. We’d look at other couples with kids, and say ‘oh, those poor people!’ I suppose we imagined it a burden. But I got pregnant with Nora in 1976, and by that time I believe we had changed out minds. Richard was working as a lawyer and I suppose we felt more settled. I really enjoyed my pregnancy. I was still dancing, right up until her birth, so I was in great shape. I didn’t work full time, so I had a luxurious pregnancy. I slept through it. I stopped menstruating right away, but I didn’t really keep track of things. Everyone was so obsessed about due dates and I just figured, when it’s ready, it’s ready. Like carrots, it depends on how much sun there is, how much water. I planned a natural childbirth. We went to Lamaze class taught by this great, earth goddess lady - with seven kids of her own.

“Nora was born in Toronto. I was able to find an obstetrician who performed natural childbirth, the only one. He was over 60 at the time, and he was wonderful. You’d go to his office and there would be no one in the waiting room. He’d give you a full hour of his time, and never rushed you out. Unfortunately this was before birthing rooms existed, so I was in a regular hospital room. The labour was long, but even though it was long, not much happened. It took a while, and it was definitely painful, but nothing that couldn’t be tolerated, especially considering its reward. Being in labour is like being on some drug. All of your senses alter dramatically. Your sense of time goes limp. It was either a minute that passed, or two hours. You had no clue. Also, your olfactory glands, your sense of smell, mine at least, changed dramatically with each contraction. I remember that my husband was eating a cherry lifesaver. When I was in a contraction the smell of that lifesaver was so overwhelming, like a dense cloud of cherry, it was making me nauseous. I had to tell him to leave! I went through all of these changes during labour. As soon as Nora was born my doctor put her stomach to my stomach and had her head hanging over my body. He explained that he did this so the
her body would naturally expel of it's fluids, so that she would start breathing on her own. He did this as opposed to holding her upside down and smacking her bottom, like other doctors will do. So it was a really nice experience, the whole thing.

"After Nora was born I had a miscarriage. This wasn't such a big deal, I'm not a person who took that kind of stuff inside. My theory is that it wasn't meant to be. There was something wrong with the pregnancy and my body recognised that and acted upon it. No one wants to have a child with a problem. Four years later I became pregnant with April. At the time we had been living in Waterloo, and when I was six months pregnant with my second daughter, April, we moved to Windsor. Neither Richard nor I had any roots and we decided that we wanted to give our children some. So when we moved here, it was to settled down, and that's kind of what had happened. I've lived in Windsor for 19 years, the longest I've lived anywhere.

"From the stress of the move I did start bleeding, but I went to the doctor and things got under control. April's birth was completely different from Nora's. I found a name of a doctor who supposedly did natural childbirth. My gynaecologist referred him to me as a 'good mechanic', so I should have known then that he wasn't what I was looking for. At my appointment I realised I didn't know if he practised natural childbirth, so I asked the nurses there. Boy did I insult them. Their backs went up and all of a sudden it seemed I was a member of the wrong political party. It's that same thing I've gotten in any doctor's office and asked about herbs. They treat you like you are an idiot. Of course now, years later, doctors are jumping at it. So they ushered me down the hall into a little medical room and told me to strip down and get on the table. I did that. I'm laying there on the table and decided I didn't need to be naked for this appointment. I needed to find out where this guy's head was first. So I put my clothes back on, left the medical exam room, and went into his office to wait for him. He looked a little annoyed with me when he finally came in. I started to ask him about how he practised natural childbirth and he mumble through that he didn't really. In the end I think I had insulted him. He asked me if I thought he had gotten his degree from the Sears Catalogue. I promptly exited. He never did see me stripped down.

"Then I found another name. When I talked with this other doctor he told me that he had been aquatinted with natural childbirth living in the East Coast. I assumed that
he had been doing this all along, but I guess that that was the wrong assumption. The labour was more painful, I wasn’t in as good shape then, but April came fairly quickly. When she came out of the birth canal they quickly wrapped her in cloth and then placed her on her back on my stomach. They were cleaning her and I was looking at her, and they just continued to washing her. Then I finally said ‘the baby seems to be turning blue’. Then they had to hold her upside down and slapped her on the bottom. You have to be an observant customer. This time I decided to stay in the hospital. Everyone had said that they pamper you and you get to relax. I decided to buy into that. It was fascinating. I stayed in a pregnancy ward and there were women there that couldn’t sit or lie down because their bodies had been ruined by their doctors. They’d been sliced and diced and they couldn’t go to the bathroom. I came out and I was famished, that was my only problem. I then decided that I wanted April in the room. That took a lot of politics, to finally get her in the room with me. I think I just stayed two nights, by then I had had enough.

“Richard and I got divorced shortly thereafter. He had been having an affair, and ended up marrying the woman. They have a child just two months younger than April. Interesting. I’ve been single ever since. I’ve dated people, gotten pretty serious with some, but never lived with anyone else. I’ve worked as a secretary, selling real estate, selling insurance. I’ve gone back to school, to college, to upgrade my skills. Richard has paid child support, but that’s it. He has spent time with them, but he probably hasn’t been the father the girls wanted to have. I think the divorce was painful for them, especially for Nora.

“I talked to Nora about menstruation early on. I figured I’d break the Canadian mould and was going to make it festive. I figured I’d take her out to dinner and make it a celebration, but I never pulled it off, and always regretted it. I figured let’s take it out of the closet and onto the table. It was already being celebrated between her and her friends. I think I was just so tired around then, being stressed out, or maybe angry. It didn’t happen with April either. I know with both of them I talked to them about it really young. I had some fantastic kids’ books about it. Unfortunately I have no recollection of when either of the girls started. I’m awful, but I really have no idea what happened.
"I use Tampax tampons, and I introduced my daughters to this brand. I have no idea however, why I use this brand, but I think it is just what I have always used, and it works well enough. I have heard of alternative products, cloth pads and the like, but I never considered them as possibilities. Even when money was tight, menstrual care purchases never mattered. I've never budgeted for them. Six years ago I decided to find a more economical way to buy these things, because they are so expensive for what they are. I called a company that sold in bulk, they supply businesses and hospitals with this stuff. There was a savings, but it was really small. All the same I went down there and bought them. They were the kind you get out of bathroom dispensers, not exactly quality. In the end it wasn't really cost-effective. I'm not concerned about the safety of tampons, I use them all day and at night too. Even with all that nonsense about Toxic Shock Syndrome. I remember when that happened. It didn't make me rethink wearing tampons. I just figured that it was one of those blips on the screen. Tampax is pretty basic, mainly cotton. I'd used them for so long, without a problem. I didn't use the deodorised ones, they are ridiculous. I figured that those women hadn't read the instructions right at all.

April however, got really worried about this. I think she is still concerned about TSS.

"It is interesting how many years it took me to figure out all of those trademarks and triggers that your body shows you. All the indications are there, but you have to recognise them. Every month I have one or two days when I am so tired, I'll need ten or twelve hours of sleep. All of a sudden I'll realise it's because I am going to start my period in a week. I experience PMS, but I didn't always. I would say that its form had also changed over the years. It is definitely connected to other things going on in your life. How well you are taking care of yourself, how stressful your life is. You don't know you've got it until it comes out of your mouth. You know you are tired, you know you are crampy, but all of a sudden fire comes out of your mouth because you've had as much as you can take, and you can no longer be reasonable.

"I know PMS is part and parcel with menstruation, but I don't think of it in terms of menstruation, but rather the life of a woman. It's part of the baggage that goes with it. During Premenstrual Syndrome you become irrational, it's like you don't own your body anymore. You don't own your mind anymore. You don't own your emotions. You temporarily become another individual. Another takes over your body and gives you a
bad reputation. You spend the rest of the month trying to reconcile yourself with the invader. I once bought a book about it and it said that you had to track your cycles and write down your moods and everything. I think I did that for a little while, but there is this other psychological thing you go through where you deny that it happens to you at all. It's like hide and seek. So I tried it, but it didn't work so well for me. I never really kept track of my period. There was a time when I would circle the day I started menstruating in my day planner, so I would know a month down the road if I would be getting my period. It's a good idea because then you can plan around your period, you know, make sure your vacation times don't get mixed with it. But I only did that for a while, and I did it real loosely. I know that my daughters have had a terrible time because of my PMS. It was hard. I was carrying two roles, the mother and the father. That's a lot of stress. You are the breadwinner, the disciplinarian, the driver, and then your body takes over and you have all of this stuff to do. I sincerely regret that PMS exists for the sake of the girls.

"I went to an herbalist fifteen or sixteen years ago, but I didn't go specifically for menstruation. I just wasn't taking care of my body they way I had in the past. My body was my instrument, but now I wasn't really treating it that way. I wasn't reading as much and I didn't have the community here to bounce stuff off of. I went to a health food store and asked if there was anyone I could see. And there was an herbalist there who was also an iridologist. She reads your iris to tell you what going on with your body. It surprised me when she brought up menstruation. I had always taken five to seven days to be a normal cycle. it was my cycle. She told me it wasn't, that three days was a healthy cycle. I later went to a naturopath who told me that three days was not enough, it's a sign that your body isn't digesting protein, and that five days was normal. All this time I thought that cycles varied per person, depending on their body. Anyway, the herbalist gave me some herbs to fortify my body in various ways. As a result my period went down to three days. I took the herbs for about a year and my cycle has stayed at that length since then. I also went to an acupuncturist. I was finding that I would get a dull ache in my lower back with my cycle. I figured I'd have a visit with the acupuncturist right before my period. Before it took over my body and its whole mad cycle, I'd let the
acupuncturist tune it up. But, it is $70.00 per session, so I was never able to co-ordinate it as therapy. It was just too expensive.

"I do consider my menstrual blood. I think that it is perfectly normal, just part of your body. I can remember thinking it was freaky, it was bizarre. The first years I am sure I wondered who dreamed this up? This thick substance coming from my body! I do take notice of my blood, because it changes. It’s an indication of the state of health your body’s in. Some months there will be a lot of clumping, some months not. So you can think to yourself, have I been getting enough sleep? Am I under stress? You can do a sort of physical check of your health. I use it to see where I am at.

"I am comfortable talking about menstruation, but I don’t find that it often comes up in conversation. I don’t tell other people when I am menstruating. I know women who do, but I think that’s a copout. I guess I am still denying the fact that the whole process is in charge of me. I hate it, the fact that it does take over your body. I refuse to admit that verbally. I’ve always given by body a lot of respect in terms of listening to it. When it comes to menstruation I don’t want to let my body speak. It’s just too dramatic.

- It’s too overpowering. I feel no reverence, no amazement. It is an annoyance. How dare I turn into somebody that I am not! Somebody I don’t want to be! I would still be a women if I didn’t menstruate and could still have kids. Still be feminine.

"I think it would be nice to get rid of my period, but I don’t fool myself. I know there will be something else, something new to deal with. I was in a health food store a couple of years ago and I saw some books on menopause. One was really left-wing and very women’s movement. I thought it was intriguing and figured it would make a good reading. It had put women’s life cycles into different stages, and one I had never heard of was ‘the old crone’. The author was trying to make this terminology seem good and romantic, solid and worthy. It was a pretty fascinating read, and a lot of it was true. I am meeting women now who are my age and they can’t believe what they are doing and saying. It just gets to a point where you’ve seen everything and you’ve done everything, and your are nobody’s fool anymore. So when someone tells you something you don’t like, you just tell them where to go. Verbally smack them across the face and keep walking. I have been watching the popular literature about it. I know that the women of the Orient don’t have any menopause symptoms, and that it’s figured that it’s a result of
their diet. So I am really not too concerned about the side effects. I am a vegetarian and I love soy stuff. I don’t think it’s going to bother me. It is going to be an interesting challenge, making that decision between estrogen and natural products, and I am not looking forward to doing all of that research. I know my mother took estrogen therapy. She took it for a while, then she stopped and her face became enormously wrinkled. So she started again and the amount of wrinkles that she had diminished. I’m not too sure what will happen. Who knows if it will be a cause for celebration or not!"

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25 Soy is known to contain estrogen and is often recommended to women who do not wish to undergo hormone replacement therapy.
Nora Hayes (b. 1976)

Menstruation is when the lining of uterus is shed, along with all the stuff inside. Sort of a cleansing of the reproductive system after a certain period of time in which there is no conception. The body has to shed it all and start fresh.

"It is interesting, looking back on my menstrual history. I hadn't realised how much it contributed to who I am, my thoughts about my own fertility. I had never recognised the links it holds with my sexuality, my physical and mental health, and my family. I didn't realise how much my mother had affected my feelings about menstruation and fertility. I think I was maybe three years old when I had a sense of what menstruation was, when I knew that it was something. I remember that my parents had a king-sized bed and I always used to play on it as a child, because it was so big. Some of my parent's sets of sheets had blood stains on them from my mother's period. I asked her about them, and she told me what they were from.

"I remember anticipating my period for a couple of years. It happened in high school, in grade nine, in the fall. I was disappointed that it hadn't happened sooner, before I got to high school. I felt left out and worried that it wouldn't happen. Pretty much all of my friends had started. Development wise, in terms of puberty, I was slower than most of my of the girls my age, with breasts, hips and armpit hair. I was so excited when I got armpit hair. I first noticed that a few hairs had started to grow when I was at school and I rushed home to show my mom. She said 'Congratulations! Pretty soon you'll get pubic hair too!'. I remember that so clearly. It happened in grade seven, and after that, I was on the look out.

"My periods have never been heavy, so I know when I started my underwear was just lightly stained, nothing big. I think it was on a weekend. I know I wasn't at school. I first told my fried Alison, who had gotten her period in grade six. She got breasts early too, but they didn't grow after that. She congratulated me. Then I told my mom. She was very proud, she knew it was a big day for me. She gave me a hug. After the initial start I was kind of weirded out. That was it? This is what it all means? I guess I expected more. I also found pads very uncomfortable. I was certain that other people...
could tell I was wearing one. I kept looking around wondering if people knew, if I was walking funny or just being different from before, because I was feeling different. I thought that you couldn’t wear anything tight when you were menstruating and wearing a pad. But I had a friend in gymnastics, and she told me that she would wear them during gymnastic meets. She told me after the fact that she had gotten her period, which hurt me because we were really close, but that whole time she had been wearing pads with a body suit and I couldn’t tell, so she dispelled that myth for me.

"By the time I started menstruating my parents were already divorced. I didn’t tell my father that I had started, but I was perfectly comfortable telling him that I needed to go to the store to buy pads or tampons. It wasn’t something that I felt I had to share with him. My dad had always been really liberal and let it be known, from when we lived with him to afterwards, that he was very aware about women’s reproductive systems and bodies. He had a talk with me about PMS when I was probably around eleven years old. My parents split up right when I was hitting puberty, so it was kind of a tough time. My mom and I weren’t getting along at all, we were always at each other’s throats. With all the chaos of my father moving out and all the resentment that went with that, when my sister and I would spend time with my father, which I think was every other weekend, I would complain to him, trying to take solace in him. Sometimes he would be really good and understanding, trying to help me relate to my mom, but sometimes other feelings came out. I mean, he left her, so there was a lot of negative feelings there and sometimes he’d tell me that she was a tyrant or a bitch, which made things hard. I remember one time we had gone to river for a walk and he took me aside to have a talk. This was weird because usually he is really frank and direct. He told me that he had to tell me something about my mother. Usually he doesn’t set things up, he’ll just come out and say it no matter how blunt or unexpected it is. So I got incredibly worried, what could it be that he is being so cautious in telling me? He said that he needed to talk to me about a condition that my mother has. Then he started to tell me about Premenstrual Syndrome. Now I had never heard about it, so when he said that my mother has PMS I thought that it was some kind of awful disease! Then he started to tell me about how it happened every month, and that it was prior to her period, and that it was a condition where she got very irrational, angry and irrational. He basically said that during that time when my mother
was feeling very crazy and frustrated and tormented that I should do my best to steer clear and be understanding. I almost appreciated it because I figured that that was part of the reason that she would get so angry with me. I think I was also worried that I would get PMS too. It frightened me because I didn’t realise that it was such a common thing, that there were all sorts of symptoms. It did kind of make me scared for and worried about my mom. For a long time afterward I was worried because I thought that there was really something wrong. I was too young to know when she was menstruating, to recognise tampon wrappers in the bathroom or something, to get an idea of when in the month she would be on her period.

“I don’t know what my period is really like, without chemicals controlling it. I had only been menstruating for two months before I got pregnant. I had been dating this boy for six months, we dated for a year after that. It was an awful time. We told our parents and they had it out because his parents were very Catholic and against abortion, and there was no way my mom was going to let me have a baby, make me go through nine months of pregnancy when I was fifteen years old. When you have an abortion they give you three kinds of drugs. Right after they give you an antibiotic to prevent any kind of infection, then another to drain the milk from your breasts. Then they give you birth control pills to regulate your cycle initially, and it is your choice whether or not you stay on them. Of course, they really push it. So I’ve been on it ever since then, just out of fear and responsibility.

“I don’t think that a menstrual cycle should necessarily be that regular. I think that every condition in a person’s body is affected by their mental health and spirituality, and their environment. Your digestion, your energy, your skin, everything is affected by those factors. Your period should reflect these things. I don’t feel that it is a positive thing that I am taking birth control pills. It isn’t a good thing for my overall health. But I am kind of lacking in the discipline department and I know what I am like in terms of my sexuality. Sex is very important to me. I want it to be a regular part of my life, but I am not disciplined enough to use other forms of contraception, forms that would involve more effort on my part. I don’t have much choice but to use the Pill. It helps make my life a little less chaotic.
“The first thing I used was pads. Always brand. It was what my mom had and I think I was happy with that choice because there were so many advertisements for it. It just seemed the popular and safest choice. They had the coolest colours, they had all this variety, different absorbencies, different packaging. It was catchy. But shortly thereafter I started using tampons. I don’t like pads. They seem to harbour more bacteria. They are sticky and uncomfortable. My mom had always used tampons. She never really used pads, so it didn’t seem an odd thing, or something to be nervous about. Before I started menstruating I would see them in the house and asked her about them. She had explained why she used them and how they worked. She told me that they were more comfortable for her than anything else, so I just figured that it would be the same for me, and it was. I use Tampax. I’ve tried O.B. and I don’t have a problem inserting them, that doesn’t make me uncomfortable, it’s just the fit. O.B.’s don’t feel as right. I am more likely to feel them inside me, and I don’t like that. I like Tampax because they have a cardboard applicator as opposed to plastic. I really don’t like plastic, it freaks me out. It reminds me of being on the beach as a young kid and seeing all the plastic applicators washed up on the shore. I think cardboard is better for the environment, at least a bit better. They also make a smaller tampons, which is what I use now, Tampax slender for teens. My mom used them, so it’s a name I know and trust. It’s like Q-tips for me, I wouldn’t buy a no name brand tampon for the same reason. It’s probably a combination of marketing and familiarity. Advertisements don’t really affect me, they really just support the beliefs I already have.

“My period had gradually become shorter and lighter. Now a box of tampons will last me two periods, sometimes longer. At the end of my cycle I will just wear black underwear, because the flow is so light and it isn’t comfortable to wear a tampon. If I am out of black underwear then I will buy panty-liners. I probably change tampons too frequently, at least for how much is being absorbed. But I feel more comfortable doing this, thought it means I have to buy them more often. I never budget for this stuff, I have no idea how much I have spent on them. They are really expensive, especially for what they are. I think they should be subsidised. Birth control pills too.

“Menstrual blood doesn’t gross me out or anything. I don’t feel the need to dispose of it so quickly that I don’t catch even a glimpse of it. It’s just cells and blood
and skin. It's natural and normal. I don't think of it as being either good or bad. I thought about it when a friend of mine started using a menstrual cup. She used her blood to feed her plants. That kind of grossed me out a bit. I've thought about using alternative products like the menstrual cup, but I don't think I menstruate enough to invest in it. I just use a few tampons, and I am generally comfortable walking around with nothing. I am concerned about the chemical processes involved in making tampons, about the bleaching of cotton. I've read about Toxic Shock Syndrome and I'm not to worried about it. I am very responsive to my body. Every little thing about myself I am extremely, if not annoyingly, aware of. So I would automatically assume a number of things and act on that, if I started feeling a little under the weather and was wearing a tampon. I am not afraid that I will die from using them.

"I wonder if the PMS I experience is related to the Pill or not. For me, it is a period of extra anxiety and emotionalness. I find that for five or six days I feel like I could laugh or cry at the drop of a hat. My reactions become more extreme. I take things way more personally. It is almost as if I get paranoid. I get really insecure and doubtful. It happens every month and varies in intensity. It gets affected by how much stress I have in my life, how many decisions I have to make, but I always feel it. If I am at a point in my life where I am doing exercise, things are better. I'll try to cut out caffeine; coffee, coke, or tea. Not chocolate because that is what I crave most. I know these things increase my feelings of awkwardness. I don't take drugs for PMS, unless I have a headache with it. With a period you know you are not sick. You know that you are going to get over it, so you can deal with it more, not be prone to taking drugs because you know that what you are feeling will end. But I feel extreme emotion in every way. I feel that all of my bad communicative qualities come out, as well as feeling physically off. No matter what I wear, I don't feel that it is fitting me properly. Not just because I feel a little bloated, but because it doesn't feel right. There is always that tiny bit of apprehension right before I get my cycle. Even though I have been on the Pill for so long, there is always that concern of not getting my period. It is an ingrained thing,

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26 What Nora is referring to is The Keeper. It is up to one-eighth of an inch in width and rather than absorbing menstrual blood, it simply contained it. The Keeper is made of natural gum rubber and is manufactured in the United States. It costs around $40.00 and is reusable, lasting up to ten years. It is further explained in Chapter 3.3.
having gotten pregnant so young, I worry about it. I also have had to take so many
different antibiotics over the years, which affect the Pill's effectiveness. So there is
always a tiny bit of 'What if? What if I have to deal with something I don't want to deal
with?' And then my period will start, usually on a Tuesday afternoon or Wednesday
morning. The first day I'll get bloating and headaches. The second is always the worst.
It's the heaviest and harshest. I don't think that my period is really so bad, at least from
talking to other women. There have been times in my life when I just want to sleep, or I'll
have shooting pains in my head, or bad cramps. But in general, you get used to the
cramps, and it's not like I feel them all day. My period lasts six days, which is really too
long. It's not heavy at all, and for two day in-between it's like nothing. The total amount
of blood I lose through the whole thing is really minimal.

"I don't usually explain to other people that I am menstruating, or experiencing
PMS, in terms of explaining why I may be acting a certain way. I'll tell certain people,
the ones I know well. I usually have responsive, concerned boyfriends, so they pick up on
it anyway. I try not to use it as an excuse. Sometimes I'll say it and then feel bad for
having said it. I don't want people to think that I am justifying my poor behaviour
because of something that I should be used to, at least I think I should be since it happens
so often. I always think of my mom. Growing up, looking back, especially after the
divorce and my family situation, I am recognising the personality traits that I am picking
up from my parents, especially the negative ones. I can't help but look at the way I react
when I am PMS-ing as a negative thing. I associate it with my mom and it really bothers
me. I lump it with all the other things that I get from being my mother's daughter. I am
almost ashamed of it. Not exactly ashamed, but frustrated because I lump it in with the
things that can be practised and improved, instead of something that is connected to my
physical health.

"My mother was my first source of information about menstruation. Over the
years I've gotten information from reading cheesy magazines and articles, which I try to
take with a grain of salt. I feel like I am constantly comparing. I will go to the doctor's
or clinic and I'll ask them questions, but I won't necessarily believe them because they
are relying on supplemental medical information that has been given to them by drug
companies. I'm critical of the medical community. An herbalist/iridologist who I saw
when I was younger, and who my mother saw for years, gave my mom some herbs for
general health, to make her body stronger. She did end up feeling in really good health
and her period would then only last two to three days. And she was always adamant that
the healthier you are, the shorter your period would be, and I think I believe that to some
degree.

"I think about menopause every once in a while. I don't know that much about it,
just the typical, hot flashes. I imagine at first that it might be disheartening, at least for
some women. I'd assume that women may want to hold on to some part of their youth
and can't accept that change. I can understand because there is such a social stigma
attached to aging, especially for women. I do know that some women embrace
menopause happily, but it's often presented that the woman is past her prime. It seems
really medicalised and frightening. It's all tied in. I know that menstruation and topics
which surround it seem more open, recognised as natural, but there still are taboos.
PMS is being totally exploited and used to almost degrade women. Sure, maybe some
people have used it as an excuse for irrational behaviour, but it's really been exploited by
men, the media, and advertisers to ridicule women and make it seem an unjustifiable
condition or experience. That bothers me. The typical guy response is 'you must be
PMS-ing'. I think menstruation and fertility are still used to objectify and manipulate
women.

"I'm comfortable talking about menstruation, to anybody really. I won't go into
details if I think that it is just going to be exploited or laughed at. I know that with many
men, a few of the usual comments are going to be thrown in because they feel that's how
they have to react. It isn't so much a common topic of conversation now. At first you just
spoke to your girlfriends about it. Then, at the end of high school, you'll talk to boys
about it too. You'd be with a group of people, boys and girls, and discuss things like sex
and reproduction. It was kind of the cool thing to talk about. At twenty-three years old,
most of the people I know have had serious relationships and most guys are wise to it.
The simple fact that men don't menstruate does affect the way you might speak to them
about it. They can empathise, but they will never really know what you are feeling. If
you are in a relationship with someone who is comfortable with themselves and
comfortable with you, things should be open. This also includes sex while menstruating.
I will have sex when I am menstruating, but so long as my partner is comfortable with the idea. I find myself feeling more aroused at that time. And since I was young I heard that the best thing for cramps is orgasm. It works for me. It’s good for the tension in the muscles. I think it’s a true test of the closeness of a relationship. I haven’t had sex with every boyfriend on my period, but I think I have with those that I have been really close to. I take it as a sincere sign of affection.

“When I am menstruating, in the process of my cycle, I can forget about it. When I go to the washroom to change my tampons, or if I experience cramps or have a headache, then I remember. The perfect way to menstruate would be if it were short and not painful. But I would want to still know that it was there. I wouldn’t get rid of it, even if I could. I don’t like it when I am going through it but I like that it is a total package. It really makes me feel more in touch with my body and my personality. I guess my cycle ensures that I pay attention to that connection, if only in a slight way. I would like to know what it feels like to not be on the Pill and menstruate, but I am too worried to go off of it. What if I am unhappy with my natural cycle? I don’t experience menstruation as an obstacle in my life, but that is because it is easy. I would hate to think that something so natural and frequent in my life could cause a lot of problems.”
Menstruation occurs when your body releases dead egg cells. It cleans out the walls of your uterus so that it can prepare you for childbearing.

"I was born in 1981. I’ve always lived in the same four block radius and I’ve always had lots of friends. My mom calls me a social bee. I always had boyfriends too. I started going out with my first real boyfriend, Tim, in grade five and dated him until grade twelve. But I broke up with him last February which was good. He messed up my mind, playing games. I’ve dated guys since, I’m in a solid relationship right now in fact. I’m pretty close with my mom and my sister, though my sister stopped living with us after high school. My mother and Nora get along much better when they don’t see each other so often, and they both know this. Things got really chaotic for a while. But Nora moved out, living close to the university, and everyone’s lives seemed to calm down a bit."

"So, I’d say that I had a good, happy childhood. My parents got divorced when I was really young, so we were just women in the house. Things were always pretty open. I don’t think anything was ever left hidden or there was anything I couldn’t talk about. I think I always had a sense of what menstruation was, but the first time I really remember the topic coming up was when my sister started. I remember her freaking out about it and turning to using tampons. She said they were the best thing. I would then always know when my mom and sister were menstruating. They talked about it a lot, and they usually menstruated around the same time."

"I pretended to get my period the first time. It was so cool in grade school to get it. It made you more popular, among the girls at least. We didn’t talk to the boys about it. On occasion they would joke around about it. They knew who had it, but that was it. My friend Lori got it at age 12 and we were all jealous. Everybody wanted it and we would talk about who we thought would get it next. There was a group of six of us who were really close, and I was determined to get it next after Lori. I went swimming one day and saw some brownish discharge on my underpants and thought it was a sign that I started or would be starting soon. So I told everybody, but then it didn’t keep happening."
I told my mom about it and she said that it was probably just my body changing, but that it wasn’t my period. That really sucked and I didn’t want to tell my friends at that point that I didn’t have my period, so I kept with the lie. This went on for a year. The girls would ask me if I had cramps, if I bled a lot, usual questions. I knew from my sister all of the side effects, so I just told them what she would tell me about her cycle. I didn’t actually start until a year and a half later. It was nice to stop lying, but I couldn’t share with anyone how happy I was to start. It just started one day and was really heavy. I woke up in a huge mess when I was thirteen. I have always had heavy periods, and in the beginning all I wore were pads.

“I told my mom. I was kind of nervous because it was so heavy and I didn’t really know what was going on. She was really comforting and supportive. She bought me pads, and told me about all the different kinds of products. It was nice because we were all so open. My sister made a lot of jokes about me becoming a woman. I thought it was awesome, and figured I would grow boobs soon. The pads were awful though. They were big and thick. They felt like they were in the way. I wasn’t used to them and they just didn’t feel right. My cycle was so heavy that it would leak sometimes. One time it went through my jeans. My bestfriend told me and I had to take her shirt and run to the bathroom, then go home and change. It was terrible.

“I never told my dad that I started, but a couple of times he had to go and buy me tampons. It wasn’t that it was so private that I didn’t want him to know. It was weird when I was younger, visiting my dad and his new family. When I was there I didn’t want to deal with any of the tension, so I just played with Whitney, she’s just two months younger than me. I never really spent time with my dad. My sister felt left out because she didn’t want to hang out with us, or my dad and step-mom, so she stopped going. I felt comfortable with Whitney. We were really close. We talked about menstruation, trying to figure out who would start first. We are still close now, but for a while we barely spoke. We just disconnected. But now we feel the same, she seems like my sister.

“At first my cycles lasted a long time, eight days. I had really bad cramps and lots of blood clots. I’d go in the bath tub and there would be all of these clots. The first time it happened I got really freaked out. I screamed and called my sister in to have a look. She explained what they were, but I don’t think she ever got them. My sister has
been a big source of knowledge when it comes to menstruation. She actually made me wear tampons. This was a couple of months after my first period. She screamed at me ‘I’m sick of all of these pads! You are going to use tampons!’ She said that I would thank her. But I was scared. I had read in Seventeen and YM magazines about Toxic Shock Syndrome. She told me that nobody got that anymore, that all I had to do was follow the instructions, not leave them in too long. She said I would be completely happy and be able to do anything I wanted when I was menstruating if I used tampons. She pushed me in the bathroom and coached me through the door. She waited outside, and I felt really weird inserting one, but then I felt fine. It worked and I never went back to pads after that. Well, at first I wore pads at night. I was really freaked out about TSS, so I wasn’t comfortable wearing tampons all night long. Now I do, but I am still not completely comfortable with it.

“When I was sixteen I went on the Pill. I wanted to do it because I was having sex with Tim and I though it would make my boobs bigger. I went off of it because I didn’t like it that first time. I kept going to the Teen Health Centre and I felt like I was betraying my mom, because I hadn’t told her. I went back on it when I was seventeen, a different version. I still didn’t tell my mom, but I was older, so felt more justified in my decision. I was always hiding it in this little box on my bookshelf, behind books. One day I came home and it was on my bed, the box open! It’s like saying ‘I don’t want to talk about it, but I know you are having sex and I am not happy’. I freaked out but I didn’t talk to my mom about it right away.

“T have put all of my girlfriends on the Pill. I was the first one to go on it and I swore by it. I told everybody that it makes you in touch with your body, which it does. I took them all to the Teen Health Centre, about five or six of them. They were all scared and didn’t want to do it behind their mother’s back, but I pushed them to go. I went with them to all of their physicals, becoming pretty much a regular at the Centre. The Pill made my cycle much better. It reduced my period to about five days, and made it lighter. The first day is moderate, the second is quite heavy, but not as bad as it used to be, and the last two days is just brown discharge. It reduced the PMS and cramps too.

The Teen Health Centre is a health clinic in Windsor, Ontario. It focuses on the concerns of teenagers and is presented as a place where they can go with any health concerns or questions without their parent’s permission or approval.
“I know all about PMS. It's the side effects and mood swings that happen before your period. You're more emotional, you get cramps, headaches, back aches, things like that. I experience it, it's pretty common in my family. My mom has it too. It doesn't scare me, it's normal. A lot of my friends have it. It makes me comfortable in that if I were pregnant I would know, even before missing a period. I am pretty in touch with my body so I know the different feelings and pains. I listen to my body and menstruation definitely plays a role in that. It makes me feel more secure. If I think I am pregnant it relieves me. I like it because it feels like I am cleaning out my body. If I didn’t get it I would feel really weird. Something's not happening that should be.

“Now that I am on the Pill I know exactly when I am going to start. I start getting really emotional maybe two days before. I'll cry over anything. I freak out. I can't handle anything. The day before I get cramps, sharp shooting pains in my side. I was really worried about these cramps because none of my friends experience anything like them. I usually start around noon, when I am at school on Tuesday or Wednesday, unless I screw up my Pills. Recently I've been starting on Friday, which is unusual. I'll bleed for four days, then maybe have brown discharge for two days after. The cramps aren't as bad as they used to be, they are more of a dull ache now, though I get the sharp shooting pains, they don't come as often and aren't as intense. Usually I just have a sore, achy feeling all over that lasts for about two days. It makes you just want to sit down.

“I do pay attention to my menstrual blood. Sometimes it seems thinner than it should be, which worries me. One of my friends got pregnant and still had her period. She had a light period and the blood was thin, so if it isn't thick I get worried. Pregnancy is a big worry for me. When I was with Tim I always got scared about becoming pregnant, even when I was on the Pill or used a different form of contraceptive. There was one time when I had to take the Morning After Pill28. It was around the first time Tim and I started having sex and the condom broke. I wasn't on the Pill then so I was really really scared. I went to the Teen Health Centre and they were really rude to me. I remember that it was a huge emotional experience. I went by myself and they gave

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28 The Morning After Pill is a birth control method that a women can use to ensure pregnancy does not take place. It is not considered a method of abortion as it prevents conception. It does not induce miscarriage. It must be taken within seventy-two hours of intercourse and is not recommended as a regular birth control method, but rather to be used sparingly.
me painkillers and other pills and didn’t explain them well to me. They just told me that I
could experience a bunch of side effects. There was a health unit down the street and
someone had gone there and liked it, so I decided to go there. I was walking down this
major street and crying because I had been treated so badly. I was so unsure about what
I was doing and I was terrified of being pregnant. They sat me down and explained
everything to me. I finally stopped crying and was able to use the medication properly.
It made me feel so much better. When I took the pills I got really sick. For two days it
was really bad. I would fall asleep and wake up having to vomit immediately. Some of
my friends have had to take the Morning After Pill and they didn’t have any reaction to it.
It felt like it was eating out the insides of me. It might have been because I was so upset
and so young. Maybe if I had to use it now it wouldn’t be so bad. I told my mom I had
the flu. I still haven’t talked to her about it. Talking to my mom about sex is really
uncomfortable. We started talking about the Pill after she knew I was taking them and
she wanted to get me off the Pill and try alternative methods. She thinks it’s bad for my
body. She told me that it gave my aunt freckles. She lectures me about that stuff. I think
we didn’t talk about it until after I broke up with Tim and was dating someone new. She
told me she didn’t want me having sex with him until we had been dating at least seven
months. She said that if I ended up living in Windsor for the rest of my life when I went
out I would constantly see people I slept with. I’m not like that though. I have sex, but
only with men that I know well and am involved in a relationship with. Anyway, it’s an
uncomfortable topic with my mom.

“When I first started using tampons, when my periods were heavier, I would use a
least a whole box or more. But I was afraid of Toxic Shock Syndrome. I would use pads
at night and change my tampons every two hours. Now I probably use 10 or 12 during a
cycle. I still don’t wear them too long during the day. It feels gross not changing them
every time I go to the washroom, even though I may not have to. Originally my mom
bought them for me. She still buys them, but if we run out I’ll pick them up. I’m really
comfortable with that. I’ll go to a male clerk, I’ll carry them visibly. It doesn’t bother
me. If I bought a pregnancy test I would hide it. That, I don’t want anyone to see. But I
don’t care with tampons. I don’t budget for them or concern myself over the price. I
probably spend about $14.00 a month on my cycle, because I’ll buy panty-liners to wear
the last two days. I buy the multi-pack because my flow changes a lot, though it had been getting more even. I use Tampax. I don’t like the other ones at all. If I have to use a different brand it feels noticeably different. Maybe I have a different inside, but the other brands feel awkward. I’ve tried O.B., but it expands in a circle form and that really bothers me. I can feel it all day. I don’t like the ones with plastic applicators because they feel so wasteful. You can’t flush them down the toilet. The only thing that I ever worry about with tampons is TSS, but I try to be really careful with that.

“I think about menopause in terms of my mother. She is not open to talk about some things. Once I talked to her about breast cancer and she freaked out. My mom is a naturalist and she doesn’t want a mammogram. My mom said that she’d get breast cancer from getting a mammogram, from the radiation on your breasts. This really worried me, and I am scared about menopause because of this conversation. I do see that she has some books around the house about it, which is good. I just don’t know how it is going to be for her, and I know she doesn’t trust doctors, so I’m not sure that she will take care of herself through it, if she’ll see a doctor. I know she takes care of herself, eats healthy food. She’s good to her body so it might not be so bad. I figure I’ll determine what I can expect from what she experiences.

“I’m really comfortable talking about menstruation. It comes up all the time, whenever my friends are on it. They’ll say they’re on their rag, or PMS-ing, or having cramps. I came up with the term MS-ing, for when I am on it, after PMS. It’s a really open topic. Everybody knows everybody’s cycle. I could tell you which friends have it in what week without even seeing them. I have my period at the same time as certain friends and I always know when my mom has it. It doesn’t make a difference talking to boys about it anymore. About a year and a half after I got my period I started talking to Tim about it. I wanted to explain it to him, I felt like it was my role to explain the whole woman thing. He didn’t understand cramps, and one time I actually whipped out a tampon and said ‘See! See what I have to go through!’ It just pissed him off. But I feel that it is important to share and explain how my body feels. My boyfriends always know when I am menstruating now. I’ll tell them if I have cramps or to leave me alone when I am really irritable. They also know just in case I thought I was pregnant. I’ll tell them when I am done, or if there is anything weird with it. I have had sex while menstruating.
but I am not too comfortable with that. I'll talk about it openly but I don't want it all
over my boyfriend. It kind of hurts and feels like it disrupts the whole thing, so that's
something I prefer not to do.

"I think menstruation is a really open subject now. That's good. People need to
understand it, guys too. It totally changes a woman, it makes her more sensitive. Guys
don't go through it so they should at least take time to understand it. Guys can be
grossed out buy the commercials, they might make stupid comments, but I think as they
get older they become more understanding. They shouldn't be shut out from it just
because women experience it. The perfect way to menstruate would be three days long.
One day heavy because it would feel like it was releasing what it should. The other two
days should just be the preparation. I don't mind experiencing cramps, so long as it's
not the sharp shooting pains. The cramps make me feel like I know what is going on. I
don't even mind the achy feeling because I am so used to it. If I could choose to
menstruate or not to, I definitely would choose to menstruate. It is supposed to happen.
People talking that way is just the stupid technology taking over. Women have been
having periods for a long time and that's how things are supposed to be. Menstruation is
a natural woman thing. It makes me more in touch with other women, at least my friends.
I know I am lucky because I have always been able to talk about menstruation and sex
with my friends. I give advice about it because a lot of my girlfriends don't really have
anyone else to talk to because their mothers aren't comfortable with the subject. I've
always been there to do that. It's made me feel like I can help other women. When I first
started I felt like a woman. It was the best."
Isabelle’s Family
Charlotte MacIntyre (b. 1925, England)

I don’t know if I could describe what menstruation is. I’ve got to go back so many years. When I first started, to me, it was a horrible thing. A really horrible thing.

“You never spoke about those things. Never. My mom never said it. That’s why I am so backward in all of this. I can’t even say the word without feeling very uncomfortable. You never said the word, you might say ‘the thing’ or ‘that time’. But you really said nothing. Then it happened and I just got on with it. I was twelve when I started. I was in school, in a class. It was all coming through my pants. I got paranoid, I thought there was something wrong with me. I went to the teacher, she was very nice but even she didn’t talk about those things. She told me to go home to my mum. I just cried and cried and cried. I was upset about this terrible thing! Then my mum sat me down. I had a lovely mum, such a lovely mum. We were very close, but she never spoke about that. She told me then, for the first time. She wasn’t comfortable telling me. It is very private. She explained that this is what happened to young girls. I knew nothing about it. I knew nothing about men. I knew nothing about anything.

“We had nothing like they have now. My mum tore pillow cases up. That’s what we used. When you finished with them you put them in a bucket of water. You just had a bucket and you cleaned them. By the time you hung them up they were clean, so you didn’t see anything. We bleached them. I did that because I didn’t know any better. We reused them. That’s how I grew up. And we never spoke about it again. We were all closed up and there were things you didn’t speak about. You couldn’t bath during this time. It’s an old wives tale, but you just didn’t do that. Eventually I did because I really wanted to, but I didn’t tell anyone.

“My dad died when I was five years old so I grew up with my mum. I had two sisters, but we weren’t close. They didn’t tell me about menstruation, they were 10 years older than me. I was the baby. We never had money. I lived in a house, the house I was born in, and we had no bathroom, no hot water, and no furnace. I lived there until my daughter was three years of age. We had two bedrooms upstairs and two rooms downstairs. All the houses were connected. I had nothing, but I was with my mum. I
finished school when I was fourteen and I got a job. That was when the war broke out. I worked at Jacob Biscuits from three years, and then I joined the army when I was 17.

"I joined because all of my friends joined. It was normal for women to do so. I joined the land army. I had always suffered from anaemia. I had to take these bloody tablets all of the time. I was skinny, like a stick. And six months after I joined the army you wouldn’t recognise me. If you’d seen me before, you’d never believe it was me. It was great. Fresh air, no problems. We tracked animals. I cut trees down. We worked with the Canadians. Canadian Lumberjacks came over to show us how to do it. I had a ball! And I had a boyfriend! He was from Nova Scotia, Cape Breton. He passed away a time ago. We get a book with the news about WWII veterans, his name was in it. It’s quite sad, but that’s part of life.

"After the army I came home and went to work in a factory making guns. It was for the war. My cycles were never regular, they were always different. It would go over or start two weeks early. Some girls know when they are going to get it. I never did. That’s how it always was, so I could never plan ahead. It was heavy and lasted long, and the cramps were agony. I was always in agony. I would go to work and I would have to go to the rest room because I couldn’t do anything, I was in so much pain. You never stayed home from work because of it. You couldn’t do that. You had to earn your money. From the time I was fourteen I got my wages, and I gave my mum the package. She gave me a shilling and she bought everything I needed with the rest. After the army I bought things for myself, but I always gave my mum money for looking after me. That’s how you did it in my day, so you had to earn you money. When I was feeling bad I would to go to the nurse’s office and she would give me something. In a plant there were always nurses there. I would be all cramped over and the foreman would send me to them. That made it better.

"We couldn’t buy Kotex, the disposable pads until I was 16, maybe 17. With the cloth pads things could be messy. Every time you sat up you had to ask your friend if your skirt was okay. You leaked, we all did. You’d go to dances and you always had an extra pad. And then you’d get that feeling, you know that feeling. You’d ask your friend and she’d tell you that you’d stained through to your skirt. You wouldn’t go home, but you’d have to put your coat on. When we finally did get the disposable ones, they were
huge. You'd have to be careful what you wore, so it didn't show. I was always slim, you wouldn't believe it now, but I had a great figure. 24 inch waist and 39 inch hips! What more could you want? I always liked to wear my skirt really tight, so you could really see my figure, but when it was that time of the month I couldn't. You could see it bulging out.

"I met William when I was twenty-one, and I engaged to someone else when I met him too!. But when I met Grand-Dad, well, that's all I needed. William was in the Navy. I saw this big guy and I fell for him right away, but I wasn't very good with men. I was a great comedian. I had a great singing voice. But I was never sexy. I was too into myself. Too reserved. He didn't even know I was there. I loved him for all of those years, from twenty-one until we got married when I was twenty-nine. We lived in the same neighbourhood. He used to joke and send me letters and I'd send them back. We were a pair of screams, laughing all the time. He was a great dancer, he dressed like a dream. But I'd look at him and William didn't look at me. And then, all of a sudden, it just happened. People said I was too good for him, even his own family said that. And who lasted while they all got divorced? Forty-six years we've been together and we've had a ball, him and I. We are completely different, opposites. William is the volatile one and I haven't got a temper. I don't get angry, I absorbed everything. That's why I think we get on so well. I understand him. I know how far to go with William and he knows how far to go with me. We balance each other. And we've both got compassion. If you haven't got compassion you've got nothing.

"We got married and William moved in with me and my mum. I got pregnant soon after and my cycle stopped right away. The pregnancy was terrible. I was in the hospital at seven months and nearly died. My kidneys were nearly finished. When I went into labour things got worse. Even the nurses who came in to dress me for the morning said that they had never seen anything like it. They said I looked like a bed quilt, I had been cut that much, stitched that much. It was a long labour and Catherine was a breech birth. She came with her bottom and her leg. So I had a terrible time, they put me down because I was in a state. But then I had Catherine and God, she was lovely. Absolutely lovely. By the time I was better Catherine was seven or eight months old."
“I couldn’t breastfeed with any of my children. I fed them the National Milk Company. With Catherine I couldn’t do anything. I didn’t see her for three days. And then I went back to the old me, menstrual time. It was a shock when I got pregnant again. I was three or four months pregnant and I didn’t know. One day I started to feel awful and I went to my bedroom and locked myself in. I was having a miscarriage and didn’t know it. My sister came upstairs to speak to me and saw some blood. They sent me to the hospital. The doctors took a look at me and said they couldn’t believe I had gotten pregnant in the first place, given the state I was in. There was no way I could have carried. It was a little boy. I recovered after a month, and my cycle went back to its usual irregularity, and the terrible cramps came back with it.

“I had two more kids, two boys. Phillip was born in 1958. The pregnancy was horrible again. They sent me away for two weeks. Phillip was a big baby. He could have killed me but he was so beautiful. John, our youngest, was born in 1960. He was smaller than Phillip, but I had lost a lot of blood with him, so I had to have a blood transfusion. It was the worst with Catherine. With all of my pregnancies I gained a lot of weight. People couldn’t believe it was me, given how skinny I was usually. I got huge! And after the births my weight went down right away. I lost every bit of it. You wouldn’t have known that I had had a baby.

“William had lived in a house that had hot water, three bedrooms, and a bathroom. When he moved in with my mum and I, he never complained about it. I can’t believe that when I think about it. When I was 33 we decided to move into his father’s house. To me that house was lovely. I had bedrooms, a backyard, and a garden. William’s father lived there and the poor man was ill. Catherine remembers this differently, but I’ll tell you, he was no bother to anyone. He stayed in his bedroom all day. I wasn’t with my mum, so that was hard, but I could go to the bathroom and have a bath. At thirty-three years old I could finally have a bath in my own bathroom! I felt like I had gone to another country. It was such luxury.

“You were able to buy disposable pads and the belt when I was sixteen, I think. It was Kotex. I bought them myself, with the money I earned. I hated to buy them. They were kept behind the counter and you had to ask for them. You’d hide them in a bag and never let anybody know anything. Isn’t that terrible? I remember a story about William,
from when he was little. William’s elder sister had given him a note and told him to go to the chemist with it. So he went, and it was for that. So he’s got it and he’s walking down the street and his dad runs into him. His dad asks where he has been and looks in the bag. William didn’t even know what it was, but his dad was fuming. He yelled at William and his sister because he knew how disgraceful it was that she sent her little brother to pick those things up. When you bought Kotex you didn’t let anyone see that you were carrying them. When you disposed of them you put them in paper so that nothing could be seen. I always kept them in a drawer that William never looked in.

That’s how is was. William and I have been married forty-six years and I have never gotten undressed in front of him! Never! It’s just the way I am. I can’t even watch it on television. I think it is disgusting. It’s not what I am looking at, but how can they allow camera men to look at what they are doing there with their love! You do it in the bedroom with the person you love. You don’t have to show everybody. They can make movies without putting all that in there. I think it’s a very personal thing. But I am old-fashioned anyway. When I see a pad or tampon advertisement I just change the channel.

“We moved to Canada in 1966. William got a job here, and we wanted better things for ourselves and our children. Now I love it, I love Canada. We are cut in half because we were born abroad. I still love where I came from, but I wouldn’t be in any other country where I am right now. That was not how I felt when I first got here. I hated it. I was so lonely, everybody was so into themselves. I came from a little island where you come out of your house in the morning and you’d have a joke with everyone who was there. you’d knock shoulders. Then we came to this vast, beautiful country and everything seemed so far apart, and I didn’t know anyone. I went out of my mind. It took me five years to feel comfortable. I felt so bad for William, he was working so hard. He is such a good man. Every time he came home I’d be a mess. It wasn’t too good. But I was also going through menopause. I had hot flashes, and now and again I got short with William. He would look at me and tell me I looked awful. I did. I’d ask him if we could go home, back to England. I never had any tempers or anything. I just had some flashes and felt bad.

“It started when I as thirty-eight. I went to the doctor because I hadn’t been feeling well and they said I was starting menopause. I went home and told my mum, I
told her that I've got 'the thing' (that's how we spoke to each other), she told me not to believe them and that I was too young. But then we came to Canada when I was 41 and I was miserable. I missed my period for two months and all I could think of was that I didn't want any more children, especially since I was in a foreign country. I had never been regular, so I wasn't too worried until another two months went by. Every time William came home I was crying. I'd ask him if I could go home, if I could take the kids with me. Then one day I told him that I thought I was pregnant. I went to a clinic in Sarnia the next day. The doctor told me that I wasn't pregnant but going through menopause. I was forty-two when it stopped.

"I never took anything for it, though I've heard of some friends who have. I heard that that stuff is dangerous. It can give you blood clots. No doctors recommended anything to me, but it wasn't so bad for me. I've heard of other women's experiences and they went through hell and back. I didn't care going through menopause. I didn't care when I turned forty. When I turned fifty I didn't care either. It's when I turned seventy, at seventy I completely changed. I always thought that I could grow old gracefully, but I haven't. I am happy and I've got my William, who I love. I've got my three kids who I loved all my life. But I'm not the same. I want to get up and I can't. I want to lift something and I can't. I go to bend down and pick something up and I can't get up. But everybody goes through it, people younger than me go through it. It's just hard to experience that yourself.

"I think Catherine was twelve when she started menstruating. I didn't talk to her about it, I'd never do a thing like that. It was so hard for me because you are supposed to change, but you can't. You are supposed to change for your kids, but it's who you are. I get so embarrassed talking about these things because you learn about the world a certain way. My mum was a lady, and I wouldn't say things to my mum because I loved and respected her. I learned about how to behave from her and the time we lived in. It is who I am and it became what I am. It is very difficult to speak to people about things you believe are private when they grew up in different time and expect something different from you. It is hard to accept the behaviour of others, even when they are just acting in what time allows them. I never spoke to my husband about menstruation. I never spoke to my sons about it, because I was acting in the manner that I believed was right. Now it
is just old fashioned, and even though I know this, I can't change myself to better fit today's ideas.”
**Catherine Gibson (b. 1955)**

*Menstruation is the body's way of handling the blood flow surrounding reproduction. It's the blood that lines uterus and it flows out of the body when it's no longer needed every month. It's monthly cycle, hopefully its just once a month.*

"I was born in a very old house, it was built in 1760. This was in Liverpool. We lived there with my Nana, so there was my mother and father and I, and my Nana and her sister. There were two rooms upstairs and two rooms downstairs, and no bathroom. The toilet was at the end of the yard. We lived there till I was three and my Nana was brilliant. She was a totally, totally, totally amazing women. She was an Irish women, a wise women that used to lay out the dead and bring in the new living people. She was very gifted, psychically and so forth. She brought all of her brothers and sisters from Ireland. She chased the priest with a poker. He damned her mother into purgatory. Her mother had died and they didn't have any money, so he damned them into purgatory. Nana went after him, and she was only fourteen, with a poker. The townspeople turned on Nana and all of the kids, so she put them all on a boat and went to England. She raised all of her brothers and sisters. She went into service so that she could take care of them. She was just that type of amazing woman that everyone loved. But when I was three we moved in with my father's father and my Nana stayed in her home. We were still within walking distance of her, but I loved my Nana dearly, and she raised me. My mother couldn't raise a fluff ball. She was pathetic. But my Nana could do everything. Nana could sew, cook, do everything. And then we went to live with my grandfather, and he was horrid. He was just very very controlling. They had a much bigger home, three bedrooms, a bathroom in the house, and a garden. They had a living room and a parlour, and a kitchen that you could actually cook and clean in, as the house also had indoor plumbing and everything. It was a really nice home in comparison to the home my Nana lived in. But Nana's home had history and character. You used to be able to go down into corridors where they did hangings in the 17th century. All the houses on her street were connected, or used to be. It was just an amazing home. They had only
got electricity four years before I was born. They used to have the gas pipes running through all the walls. You couldn't take a bath, you used to have to go to the public baths to have one. There was no sink, no hot water. So it was very archaic, but it was really neat.

"We moved into my grandfather's home and things weren't as nice. Dad totally respected his father and mum was scared stiff of grand-dad. Grand-dad couldn't stand my mother, because she was weak, not like his eldest son's wife, who he saw as being the rock of Gibraltar. He liked his first son because he was a war hero. I guess he used to throw that in my dad's face an awful lot. Dad was in the war too, but he was a merchant marine. He was more in the South Pacific, whereas his brother was a parachutist, which Grand-dad saw as a very dangerous job. And auntie Agnes could handle anything. Whereas mum couldn't handle a bit of fluff. So that didn't go over too well. Grand-dad died when John was a year old and we stayed in that house. They are all rented off a council, so we kept the house until we came to Canada in 1966.

"We still saw Nana a lot. We were there all the time. Dad would get home from work and there would be nobody there, because mum would have all the kids over at Nana's house. I don't know why we were always there. It was just everything was Nana's, everything was Nana. Dad would have to come home to our place then had to walk all the way over to Nana's to pick us up, and we'd all have to walk home, and then he'd get his dinner.

"We left England when Nana died. Mum went round the bend, she just lost it. Nana had forecast her own death. My auntie Emma had been over for a vacation. My auntie Emma is my mother's older sister. We were all sitting there at the airport and auntie Emma was going over to the stairs to get on the plane. Nana turned around to my mum and says 'I'll never see our Emma again'. Mum did not like hearing that and told Nana to never speak that way. I overheard the conversation and asked what was going on. Nana told me that she would never see auntie Emma again, but that it was alright, and not to worry. I was John's birthday that day and we were all sitting around the table. Mum, for his birthday, had made these little jelly flans. I still remember, where everyone was sitting. Mum was going to sit down when Nana says 'I've got some news.

29 Nana is an English term for Grandmother.
for you Charlotte. I just want to tell you that I had the dream and I’m going to be dead in two weeks’. She told us exactly when it was and everything else. Mum went nuts. And Nana said ‘Charlotte you’ve got to make sure that I am carried out of my house feet first. You’ve got to make sure of that Charlotte, cause it’s very important’. So, in other words, she wanted to be laid out in her parlour in the coffin so that people could view her. So mum told her ‘Okay’. That Friday at 10 o’clock in the morning Nana was going out to get some shopping done. It was raining and it was October the 3rd. Nana got hit by a van that lost control and it smashed her into a cement light, and it sent her yards. She’s eighty years old and she survived. Well, mum phoned our auntie Emma to tell her what had happened and auntie Emma said she’d come home right away. But mum could only think about what Nana had said, ‘I’ll never see our Emma again’, so she told her not to come and that everything would be fine. So aunt Emma put it off and put it off, and Nana was getting better. Nobody could believe it. In the hospitals back home they dropped the worst cases off right by the door. The better you get the further they moved you away from the door. They’d moved Nana right to the very back of the room. Auntie Emma decided to come home, but didn’t bother telling anyone. Exactly one week to the day, to the hour that she got hit by that van, auntie Emma, without telling anyone, came home, and walked up those hospital stairs. That same day the nurse had read the wrong chart or something and went and gave Nana the wrong medication, a mistake that ended up being fatal for Nana. And auntie Emma just walked through the door. We were all there and just before she would have seen her, Nana died. All of Nana’s bones were broken, her face was all over the place. Mum was just beside herself and ended up deciding on a closed casket, and so there was no viewing. Stupid bloody idiot that she is, and she got haunted and haunted and haunted. They drain all the blood so there is no bruising. When they went to see her laid out in the casket Nana looked gorgeous. Nothing looked broken because they just stuff everything. Mom did not handle this well and she already had nerve problems after John was born, this just sent her off the deep end. The doctors told us that we could either get her away from here or we’d lose her. She didn’t have my Nana there anymore to hold onto.

“So we moved to Canada. When we came here Dad had $500.00, and that was it, that’s all we came with. No money, no job, nothing. He finally got a job in a plant as a
foreman and we moved to Windsor. I was twelve when we got here and it was awful. Mum was just terrible. She didn’t want to stay so she wouldn’t let us buy furniture. We weren’t allowed to buy drapes. We were only allowed to buy plastic drapes to cover the windows. We weren’t allowed to buy dresser drawers so we had to live out of suitcases. Finally, we bought two sets of dresser drawers, one for the parents and one for the kids. That was it, nothing else of any permanence. It was like that for five years. During this time my relationship with my mother was pretty strained. She was so unhappy. She didn’t make any friends, she didn’t go to any of the school meetings. She never went to anything.

“What a time! I started my period when I was thirteen years old. I had a difficult time with it. I started during the summer break. I didn’t know too much about it before I started. I didn’t blame mum for that at all. I’d rather not have discussed such things. I was really embarrassed to tell her, as we weren’t close. When I mentioned it she just seemed upset, like she had to deal with something she didn’t want to. She just went and got me the Kotex and the belt, and didn’t say anything really about it to me. I remember thinking that the pad/belt contraption was really neat. I remember taking care of it really well, making sure that it was washed and pressed properly. This only lasted the first few months. The novelty of it soon faded and it just became a pain in the butt. Yet at first I made sure that every single stain came off it.

“I didn’t tell anyone I had started. Only the cheap girls did that. It was a private thing and if you were ‘feminine’ you didn’t discuss it. Even if the adverts came on, men averted their eyes. From the beginning my periods were very heavy. That’s when the dizziness started. Four days beforehand my vision would go and I’d have these dizzy spells. Every other month is worse, depending on the ovary.30 That’s when my seizures started, right around my first period. At the time we didn’t put the two and two together, the seizures and my menstrual cycle. They were treating me for hypoglycaemia, for nervous disorders. They were treating me for everything. It wasn’t till they ran out of things to test me for that they figured that I was an epileptic. Anyway, I’ve had to take

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30 Usually ovaries take turns releasing eggs, one ovary will release one (or sometimes more) egg at a time (O’Grady and Wansbrough, 1997: 30). Some women, like Catherine, can feel the ovulation occurring. It is also not uncommon for one ovary to be different from the other, therefore a woman may experience a different feeling from each ovary.
seizure medication since that time. I’ve got a seven year cycle. Every seven years my body completely changes. Every seven years my seizures come and go and totally alter in the way they manifest themselves. Every seven years my periods change. It’s the same with all women. Every seven years their periods should change, so long as they aren’t using the Pill or anything.

“My first time, it was all very embarrassing. My mom was so uncomfortable talking to me about it. We kept it short. She bought the pads and belt. She always bought the pads. I don’t think my dad would have ever purchased such a thing. They were Kotex. You’d buy a pack of 40, and they stuck in an extra four, I remember that. They were really uncomfortable, but it was kind of the hip thing still. You’d get girls accentuating their ‘discomfort’. They’d be showing off that they menstruated. I remember being happy that I caught up with the other girls, but at the same time thinking that menstruation wasn’t a nice thing. It made me feel dirty, unclean. I don’t think I realised that this would be happening until I was fifty, for such a long time. I don’t think I understood the immensity of it.

“At fourteen I met Ken, my first husband. I had a girlfriend who was dating this really wild older guy and she asked me to double date with her. I felt sorry for her and figured I’d go and be able to control her. So her boyfriend brought Ken, who was really nice, but I was fourteen and he was nineteen. At the time we didn’t know this. They had told him that I was seventeen, and they had told me that he was seventeen. Anyway, we worked out and started dating. We hadn’t done anything really, but a week before my sixteenth birthday, we had petted heavy. At that same time I had changed my seizure medication which changed my period, so I was late. I went to the doctor hysterical, thinking I had gotten pregnant from heavy petting! I hadn’t even had sex! The doctor had to sit me down and explain everything to me. She asked me how far I had gone with him and then decided to put me on the Pill. Of course I did not tell my mother, and I stayed on the Pill until I got married. It did nothing to my cycle except keep it regular. I also had very clear skin when I was on it. You didn’t talk about sex, but it was common. It was definitely around, but people used condoms, you didn’t take birth control pills. I knew some of my friends were on the Pill, but most weren’t. Young girls would never admit that they were sexually active, they were just with their studies. And the way they
approached sex was different. They’d say they were only doing it for the guy, like sex wasn’t theirs to enjoy. I had a totally different outlook. I was just aghast with their attitude.

“When I was sixteen my parents decided to move back to England. They picked us all up, and they said ‘that’s it. We’re going back’. We were just thrilled, we wanted to go back so bad. So we go back and after two weeks dad tells us we’re going back again to Canada. Meanwhile I told everybody in Windsor that we were gone for good. Phillip and I, we seriously considered hijacking the plane. In Windsor we were just renting the house that we were living in. There was no permanence. Dad had been offered a job back in England, but when he got there he didn’t like it. So we all came back and my parents bought a house in South Windsor, the suburbs. I hated it.

“Tampons came out around then, late in high school. Until then I wore the pad and belt combination. I don’t think that the ones with adhesive tape came out until much later. I think I was pregnant and still wearing the belt. I didn’t rush out to buy tampons when they first became available to me. I was a bit apprehensive. I thought that they were going to go in the wrong way and get stuck. When I finally did try them, I tried them for a while and they were fine, but then my flow just got too heavy. I’d use a tampon and still have to use a pad. What benefit was it giving me? But we didn’t talk about it. If you were a virgin then you couldn’t wear them because the hymen would be broken. You weren’t supposed to use them until you were married. What would happen on your wedding night if the bloodied sheets weren’t there? That sort of crap. I was the same when the Toxic Shock Scare came out. People were leaving them in too long, or forgetting that they were already using one and would put in another. They were idiots, it’s the same idea. My mom bought them for me so she must not have cared either.

“After high school I worked for a year. I could do whatever I wanted so long as I handed over a year’s paycheque first. All I my girlfriends got married out of high school, but I couldn’t. My dad got me a job in a factory, painting hubcaps. I made $128 a week and handed over $40 for room and board. After the year was up Ken and I got married. We moved into a house right away, we were renting. But we’d fix the place up and the owners would sell it. Sometimes I’d change my mind about a place too. We had seven

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31 The history of the commercial tampon is provided in Chapter 3.3.
homes in the first two years, and Ken put up with it every time. So it was just me and Ken. We had a fantastic wedding, and started trying to have kids right away.

"I was allergic to Ken’s sperm. It gave me a rash and made it very difficult to get pregnant. I had a lot of miscarriages. Some would happen in weeks, and others months. The first few times were really very hard. I would always know when I was pregnant. I was really regular so if I was a day late I knew. Isabelle was conceived through lots of work. I stood on my head for Isa, I did everything, hot packs, cold packs. I knew I was pregnant. I waited until the day I should have started my period and when I didn’t I bought the pregnancy kit for $16.99. I was happy but I was told I would have to be in the hospital for the full nine months because I kept losing the babies. My uterus is attached to my spine. I have a totally tipped uterus, so that’s why they just fell out of me. The seizures didn’t help much either. So I had a choice of going into the hospital for the whole thing, hiring a nurse, or moving in with my parents. We chose my parents

"We built an apartment in my parent’s house in the basement. It wasn’t fun. But the pregnancy was okay except for the fact that I gained enormous amounts of weight. That happened with all of my pregnancies. I was gaining 20 to 25 pounds a month! I was huge. The labour was awful. I was induced and put on the drip. I found out later that the doctor induced me because he wanted to go on his vacation. But the baby wouldn’t come. I was in labour with Isabelle for sixteen hours. The doctor pulled Isabelle out so fast that he popped all of the blood vessels in one of her eyes. He put her on my stomach and walked out of the room, and didn’t clean up anything. The next minute my blood pressure went down to 80 over 50 and I had a massive haemorrhage. There was blood everywhere. One of the student nurses fainted. It was awful. Ken got really angry. I passed out but I guess by the time they got the doctor back in the room he had already changed into his street clothes. Ken went nuts. He grabbed him and threw him in the blood and told him to fix whatever had gone wrong. This is what the nurses told me afterward. I was in intensive care after that. It was calculated the Isabelle was six weeks premature. She had no eyebrows or eyelashes when she was born. She was in the ISU for a week. But she really was so beautiful.

"My cycle didn’t start for a while because I had to go back in for surgery. When Isa was pulled out my uterus had been ruptured, so they had to fix it. I think it wasn’t
until three months later that I had a period. It came back very light and very irregular. I had also been put on different drugs for my seizures. By this time Ken and I had moved into our own house, and I loved being a mom. Ken however, didn’t know anything about being a father. He never changed diapers, never fed her. He’d forget she was there. I could never leave him with the baby. He left Isabelle out in the sun once and she got third degree burns on her legs. We had to take her to the hospital. I think that this must have been stressful, but at the time I don’t think I felt he had such a responsibility as a father. Now I think it was probably one of the reasons we ended up splitting up. But this was a really happy time for me.

“After Isla I had a whole bunch of miscarriages. We had one that was nearly alive. The cord was wrapped around her neck. We named her Stephanie. I lost a few that were four or five months. It was hard, but you got used to it. I finally got pregnant with Jason. At this time Ken had stopped drinking and gambling so much. He had a problem with those things. He was working in a plant, my dad had gotten Ken a job with him. Jason, our next child, was a great pregnancy, though a long labour. He had a huge head, and as a result I ripped. He couldn’t hold his head up until he was five months old. They circumcised him in the hospital which really upset me. I didn’t want him to be circumcised and they hadn’t asked my permission with that.

“Our marriage dissolved when Jason was two years old. Ken had never been abusive when we were married, but he took the separation really badly. First I decided I wanted to try to live alone, I wanted space. So we did that. Then I knew I couldn’t be married to him anymore. He really wasn’t a horrible man, but he became a monster after that. He would come to my house at all hours, yelling and screaming. He’d hit me in front of the kids. That was probably the hardest thing to deal with, having the children see that. He had taken all of our money and left me with a house to pay for. It was a bad state. I had to work a lot of different jobs and take care of my kids the whole time. Somehow I did it, somehow I worked through it.

“I had a couple serious relationships and then I met Jeffery. Jeffery was coming door to door with another man introducing people to the Mormon religion, of all things. He was from England doing some sort of missionary passage. I let them in. I talked to them, and I joined the church. It was fun, there were activities, it was like a family. I just
wanted to see what it was all about. But when Jeffery and I started having a relationship there was big trouble because he was not allowed to have one until his missionary term was up. The other members wouldn’t let him see me. It was all really crazy. Jeffery ended up running away from them and we ended up getting married! On top of that, I’m ten years his senior! It was pretty hard on the kids, this new person in their lives. Isa was ten years old, and Jason was seven or eight. Jeffery didn’t know anything about being a father figure, he was a terrible step-father. My kids are pretty independent and out spoken. They didn’t make things easy for him.

"I was on an IUD when I first got pregnant after we got married. The doctors told me that they couldn’t remove the IUD after I had become pregnant, but then I miscarried. After that I was put on the Pill to be regulated, but I got pregnant again, while on the Pill and IUD. This was with Haley. I gained the most weight with her, but it was a pretty good pregnancy. She was born in 1987. My period came back soon after. And I had a couple miscarriages. When I went in for Jacob, my fourth, I was told that he was my 17th pregnancy! Pretty awful. He was the worst pregnancy because I was allergic to his blood and ended up with a huge rash on my arms and legs. Jacob was born in 1989, and after that I got my tubes tied. I had always wanted five children, so I was a little hesitant about the surgery, but my body had gone through so much. Four children was a lot of work, and in a way I got my fifth child in Jeffery anyway.

"After Jacob I stopped menstruating for seven months. I think it was a mixture of the surgery and the fact that there was a lot of tension in the house at that time. The seizures went away with the periods. I think that was the first time I was really certain of the connection. I wasn’t working outside the home but I had two young kids and I also babysat others. Jeffery was a horrible parent. He always provided. He was reliable and hard-working, but he knew nothing about being a parent, he doesn’t have parental instincts. I’ve always made excuses for this, but it’s true, he has never had it in him. No one ever taught me to cook, go to school meetings, clean the house, dress the kids. It’s just something you do, and the only way you learn how to do it is by making mistakes.

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32 There is a recorded correlation between epilepsy and menstruation. Neurologists believe that seizure activity is linked to the lower levels of progesterone release during menses (Coutinho and Segal, 1999: 87-88).
“My cycle had seemed to be getting lighter, but two months ago it started changing again. I’ve been getting more emotional and my seizures have increased in both intensity and quantity. It’s like I’ve just gotten to the edge of the cliff. I haven’t quite gone over it, but to the point where my speech is a bit garbled and it is very hard for me to carry on at work. I get tired very fast and the flow had been unbelievably heavy. It got so bad that I had to use the superheavy Tampax and the superheavy pads and changing at least every hour and a half. I work at a chiropractic clinic. I was hired to be more of a secretary, but now it seems I am doing the job of a secretary and chiropractic assistant. It’s quite hectic. Lately my periods have been falling at the end of the month, when I’ve got billing to do at work. It is the busiest time and requires the most concentration, so it’s hard. I can’t call in sick because they depend on me. Even if I could, I probably wouldn’t because I am not the type to do that.

“If I am not on medication for my seizures, or if the medication needs to be changed, what happens is that four days before my cycles I’ll have seizures. They only last a minute or two, but I can have up to nine a day. If things are really stressful in my life and I am not able to care for myself I’ll have more. One time I had twenty in a day. That’s awful. My lips go numb and my eyesight starts to go funny and then I get this feeling of not really being in my body. It’s like I jump back into my head, so I am looking through a face, not part of it. Sometimes that is all that will happen, but in the worst ones, my face will start to hang. I might start drooling, it’s not a pretty site. Haley can handle it, but Isabelle gets really angry. She’ll yell at me to go to the hospital. She gets spooked. Afterward I feel exceptionally tired. It is an incredibly draining experience.

“I had to stop using tampons a couple of years ago because they just don’t cut it. I’ll use them sometimes, but they don’t seem to help so much. I use any brand of pads but the no name ones, because they never stick properly. I used to use Always brand, but they’ve got these really obnoxious commercials right now and I don’t want to buy their products till they wise up a bit. My cycle is really heavy and there isn’t any precursor or anything. Before it started slowly, but now it starts with a bang. The first three days I feel like it will never stop. It was lasting four to five days, but the last two cycles have been six days long. I’ll get some bloating before, I usually gain five pounds when I menstruate. I try to cut down on my salt and caffeine intake, so it’s not too bad. My
dreams become more vivid too. But I don’t really suffer from any PMS. So the only thing I’ll buy is pads, and tampons for Isa, if she is at home. I’ll go to the local drug store. It’s close and it gets me out of the house. I can look at all the bath beads and hair products. Do a little extra shopping.

“When I first started menstruating you couldn’t go swimming or horseback riding. You couldn’t have sex. No hard physical activities. I think that that has changed, it isn’t as taboo, which is good. It seems to be a bit more normal, not so much a ‘ladies subject’. You can mention it in front of your father and he won’t cuff you on the side of the head. Needless to say, now things are going the opposite way and I see people putting too much emphasis on it, like the women’s movement, people who will do special things on the first day of their period. Or going back to cloth pads or the cup33! I’ve heard way too many stories for that, especially from my mom’s sisters and their daughters. I washed cloth diapers and that was gross. Leaving them in bleach bucket with the lids on top! I care for the environment, I do, but there would be no way you’d see me doing that! I’d get rid of the whole thing if I could, it’s not much fun. I don’t like having cramps and I’m not too keen on changing things all the time. I don’t think that my cycle is necessarily harder than anyone else’s. It doesn’t make me think about my body or my health or anything, it is just routine. So these women coming with their rituals and moontime, I think they are bloody idiots! It’s just your menstrual period. Get over it and get real!

“I don’t think of menopause too much. I never really think about the future. One day I’ll be there. I do know that I’ve got to be careful because I can’t go on the estrogen. We have a certain cancer that runs in the family, and the estrogen will make things worse. I had to have numerous polyps removed before, some pre-cancerous cells. I’ve got to be careful of those things. I don’t want to go through what my mom went through. I remember her going nuts. She went through it early. My dad just stayed at work, lived at work. She slept non-stop and watched soap operas. She didn’t get off her butt. Now I never saw her go through hot flashes or anything. Some of my friend’s mother’s had a really terrible time, nothing I saw mum go through. I’ll be happy to stop menstruating, but menopause doesn’t sound like too much fun.

33 See Chapter 3.3 for a discussion of alternative menstrual care products.
"I never talked to Isabelle about menstruation before she started. I’ve done it the English way with both of my girls. With Isabelle I knew she knew, given the company she kept. Her girlfriends grew up a little fast. She knew she could talk to me if she wanted to. I never worry about Isa, never did. She’s strong, she takes care of herself. I don’t remember exactly what happened when she started, but I remember that it was more a case of sadness for me than anything else. I thought ‘now she’s going to have to grow up’. I didn’t see adulthood as a good thing I guess. I haven’t sat Haley down to talk about it either, but I have never hid it from her. She knows I’m there and she can talk to me about it if she wants to. She did have two women in the house that would both be on their periods, so it came up. I am worrying like hell about her starting. She is trouble enough now, then there will be no stopping her. She won’t be my little girl anymore, I’ll have to worry about things like pregnancy. I’m a bit concerned about seizures. I have an aneurysm in my right temporal lobe, and this past Christmas we discovered that she has one too. It is very small, but it is exactly the same location. So who knows. They can’t do anything about it, we just have to wait. That’s a little scary. We’ll see how it goes, and how we treat her first time. If she is lucky I’ll give her cleans pads! Or I’ll give her my old elastic belt! She’s so lucky having me as her mum! I’ll let her find out for herself, she’s a bright girl."
Menstruation is something that happens to you when you begin adolescence. It is the sign that says that now you can have babies. The actual menstruation part is the lining from your uterus coming out because you have not fertilised your egg. It doesn’t need a home to grow so it flows down. It is shed for about a week.

"I come from a family of strong women. We are all very much our own persons and sometimes that leads to conflict between us. There is tension there, between my mother and grandmother and I think it has a lot to do with the relationship they both had with my great grandmother. They both loved her in different ways, and probably took in her wisdom differently. The tension has always been there, from what I have known. I think my mother has never really confronted anything in her life. She thinks a lot of life is just taking it. For her the lesson of life is in that way of living, and she doesn’t see her mother as being that type of person.

"One of my stronger childhood memories revolves around my mother. She was this very blood, beautiful, sexy diva. I remember sitting on her bed while she was getting ready to go out or go to work, and she had this process of taking her hair out of curlers, putting on make-up and getting dressed that I always loved to watch. I know I had a good childhood, but it was hard. My parents got divorced when I was five and my father took it really badly. He was abusive and mean. He didn’t pay support for us all the time and he ended up screwing her over in a house they had bought, so she was left paying for the whole thing. So my mother had to work all day and we’d be with babysitters a lot. When I was younger we spent time with him every other weekend or so. It was weird. As I got older we spent less time with him. I just had nothing to say to him. He was more receptive to my younger brother than me. I think he saw me as my mother and that hurt him. But we had a lot of love, my brother and I, from my mom and grand-parents. It was just rough when we were little. I think in the eighties divorce was happening, but was still something bad. You didn’t talk about it.
"I don't think I knew anything about menstruation until I was pretty old, closer to starting myself. I would see my mom's pads and things in the bathroom, but I just thought they were something for adults, nothing that I needed to know about. You don't play with the kettle for the same reason, it's something for grown-ups. I think I was in grade six. I remember the first time anything about menstruation came up was when walking home from school and there were these bad girls, girls that had failed a year or something, and they were talking about going to the beach. One of them said that they wouldn't go into the water without using a tampon. I had no idea what a tampon was. I asked my friend Amanda and she didn't know either. They asked us if we knew what they were talking about and we said we did, of course. But all I was thinking was; 'What the hell are tampons?'

"I think I figured it out through bits and pieces. One of my friend's mom was really lewd and open. I think she'd tell us she was bleeding when she was menstruating. Some of my friends probably filled me in a bit. I don't remember anyone ever sitting me down and talking to me about it. I know my mom didn't. By the time I started some of my girlfriends already had, so I wasn't surprised when it happened. I woke up one morning and there it was. I went downstairs to talk to my mom about it. She was in the kitchen. I told her I needed to talk to her and took her downstairs into the laundry room for some reason, maybe privacy. I told her I had started and she said that that was great and gave me a hug. That was weird because my mom isn't a huggy-type of person. It all felt a bit uncomfortable. I think I told her that I knew where the pads were and we went back upstairs. I treated the whole thing like it was no big deal, as if I were in denial. I had to give it time to sink in, go through a few cycles before I was comfortable with what it was, then make a decision on what I thought of it.

"I told my close friends that I started. I remember telling Samantha, she hadn't started yet, she started late. Even before I hit adolescence I had some curves in my figure, and I had this skirt that accentuated them. When I started my period I think my body changed further and that skirt really made me feel like a woman. I was changing into that skirt and she was coming into the room, but I hadn't put my underwear on yet, so I grabbed it really quick. I thought she made a strange face and figured she had seen something, maybe a stain, and would know that I had started my period. So I just blurted
it out. I remember her face showed utter disbelief. She couldn’t believe it, and she seemed frightened and didn’t want to talk about it. Our friendship began to dissolve around this time. Around the start of my period I experienced a strong shift in my interests. I had always been a tomboy. I liked playing in mud and being dirty and all of a sudden I was very interested in boys. Samantha didn’t want to. She’d suggest that we go to her house or read or something. I couldn’t keep still anymore. I wanted to run around and play tag in the park with boys.

“Somewhere, from TV or magazines, my friends and I believed that if you used tampons you wouldn’t bleed the first time you had sex. I remember that when I started using tampons that was one of my reasons. The first time you have sex you have enough things on your mind, you don’t want to be concerned with staining the sheets. My mom didn’t buy tampons then, so I went to my fried Amanda’s house the first time. I read the box and she coached me through the door. It was really easy, I had no problem. I really didn’t like pads, but I still used them because my mom wasn’t buying Tampax. I didn’t have a job, so I just used what was in the house. As I got older I would ask her to buy them, but I never did. I don’t think I bought my own until I went away to university. I used Tampax because that’s what everybody used.

“In high school I remember that we talked to boys about it. We felt like pioneers, making sure they understood it. I had a very open relationship with my high school boyfriend and he knew all about my cycle. He even inserted a tampon once. I didn’t really pay attention to my cycle until we started having a physical relationship. Not just because of sex, but he always knew when I was on my period. He became a meter to read when I would menstruate. He said he could tell from my actions, and because he had come to know when we couldn’t be intimate. When you are spending your life with someone in that way they notice your mood changes and you don’t. I’d tell him that he was making it up, but I would always get a bit moody before my period.

“My cycle is pretty regular, starting somewhere between 28 and 34 days. Sometimes I may miss a cycle and I don’t think that’s a bad thing. I just think that I needed to stop for a bit. That will happen if I am running around too much, working too much, stressed out too much. It’s all the too muches. Two and a half weeks before I start one of my sides will develop a massive cramp, then I’ll know I have two more weeks.
A week before I’ll notice, if I am not already in a relationship, I’ll end up bringing someone home from the bar or something. I’ll end up meeting a whole pile of guys, like I’m on fire. This always happens to me right before my period and I am always worried that I’ll bring a guy home and actually start! Apart from that I’ll get some silly food cravings and I’ll break out right before, which I don’t do at any other time. I know I experience some PMS. As I have gotten older I’ve also experienced back pain and breast tenderness. I do find that I become more emotional, I’ll cry more easily. I get a little bloated, my belly gets bigger. That doesn’t make me feel fat or unattractive though. I think it’s neat. It makes me think about being pregnant because I imagine that is what I will look like.

“I get cramps, just before I start and maybe the first day. Sometimes I feel like I am going to pass out. I feel weak in my muscles, really weighed down, then some cramping, then it will stop, and then some cramping again. I won’t feel well for maybe two days. I have to walk around a bit bent over. The cramps go from a dull pain to feeling that the layers of my uterine lining are being ripped away. Maybe I think this - because I’ve seen and heard this image so many times, but it really feels like a pulling, turbulent rip. The pain stays in my belly and lasts about five seconds. This feeling may occur until the third day of my period. My whole cycle lasts about five days. Three days are heavy and then it slowly ends. I went through a period when I was taking birth control pills on and off, forgetting pills, changing them. When I stopped taking them, and after the six months it takes for them to get out of your system, this is how my cycle ended up. Before it would be the same heaviness for the full five days, then would be gone. I didn’t experience as much cramping either.

“It is difficult sometimes it you can’t take time off work, because I would if I could. I never missed gym class or would stop myself from doing something important, something I wanted to do. I don’t rearrange my schedule for anything. But if I am working an unsatisfying part-time job, being there isn’t so important. If I can’t get the time off, I’ll spend those days at work being less productive, productive in the work sense. My cycle will sometimes affect my ability to concentrate, but it will depend on what is going on in my life. It is just that my priorities shift. I become more introverted, more aware on my environment, I take more time. I don’t pass the time or spend time, I take it
in. I become more in tune to what is going on inside of me. Never in your life can you look at yourself bleeding and say that it's okay, that there is nothing wrong with that. It is a time where I can bleed, but it is not a bad thing and that is so strange. On top of that there's the pain. I think when you are in pain we automatically think it is bad and has to be stopped. Maybe we don't necessarily have to associate it with something that is negative, maybe we do more times than we should. Menstruation is one of the only times when I can feel pain and know that it is okay, that it's good. I really think my cycle is magical. I love it. It reaffirms for me that things don't have to be logical or tangible to know that they exist. I look forward to it.

"I've gone through stages, hearing different things about menopause, and changing my ideas about what will happen to me. I have friend's mothers who have had an awful time, and I get worried when I hear those stories. Other people take it as if it were a breeze, like it was nothing. I am a bit frightened of it, but not because of the side effects. I think it will be a really strange thing to have absent from my life. My perception of menstruation has of course changed through my life. It's like getting to know a friend or something, with time it has become more endearing. I just feel like it's a process that continues to grow as I continue to grow. That's probably why I don't want to finish. For my mother menstruation has been a cloud. She had lived her life with illnesses that have been related to her cycle. When I was younger I was always very watchful of myself, in case these things developed with me. I think for her menopause will be a very positive thing. I think it will balance out.

"I think that it is ridiculous that we have to pay for pads and tampons at all. When you think that one box has only twenty-four tampons that are made out of relatively cheap materials, it's pretty absurd. For years now I've really wanted to get a Keeper. I am very aware of the amount of waste that tampons produce. I am not sure how the products are made, how the cotton is cleaned, and what touches them. It's something that you are directly putting into your body and I just want to feel more in control of how I deal with my cycle. I had read in Ms. Magazine about the Keeper and then one of my friends got one. She told me that you can use your blood to water your plants. I think that would be wonderful, you connect your cycle back to a natural cycle. So I really want

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34 The Keeper is explained in Chapter 3.3.
to get one, but I don’t know where or how to get it. It’s not like you can walk into a drug store and there they are on the shelf.

“I would consider using cloth pads, but really you end up using just as much from the earth to clean them, so I don’t know how good they would be. I think that there would be something gratifying in cleaning out the cloth yourself, and seeing it, as another affirmation that it is actually going on. It validates the fact you are bleeding, rather than being able to tuck it all away and never acknowledge it. I’m not grossed out by the blood. I always try and find the egg, though I know I can’t. I don’t like the brown blood, because it looks like dead flowers. It just doesn’t look healthy, even though I know it is normal.

“If I stained my clothing I would feel embarrassed. It is taboo, really. I suppose I wouldn’t care so much if I were with only women, but if it were men that I knew I would probably feel discomfort. There are things that you are taught not to do, that’s one. I haven’t heard of too many things that menstruating women can’t do, but there definitely are some. I heard that women with severe PMS shouldn’t drive. I had a gym teacher - who would let is sit out of class if we were on our period, like we weren’t well enough to participate. Now you do hear that women shouldn’t have sex while they are menstruating. I don’t think that that should be the case for all women, but I won’t unless I am at the very end of my cycle and the flow is light. I have done it, but I just don’t like to. It isn’t the blood so much as it is a time for myself. A time when I am in myself and don’t want to open up to another. I find I shower less too when I am menstruating. It’s as if I don’t want to wash it off me or something.

“I think that women are starting to confront what is actually going on with their bodies. Prior to now, I think people didn’t talk about it. Now, with a re-instated women’s movement, women are talking about it and thinking about it more. I think that there had been a swing away from feminism, but I see that more women, like the working class bulk of women, are talking about it. I am finding that men are becoming more mature about it, more respectful, and opening up to their curiosities about menstruation. I am not so sure if that is a change in society, a change in my generation, or a bit of both. I think women in their everyday lives are thinking about it more. For me, menstruation allows me to stop and really look at myself. It’s what happens to me physically,
emotional, and mentally. It's a way of speaking to myself. It turns around a part of me, so that I may reflect on who I am."
Haley Gibson (b. 1987)

Menstruation is when once a month you lose blood and it helps you produce eggs and part of the blood inside of you just drops off or something.

"My name is Haley Gibson. I'm twelve years old. I play soccer. I really like it. I am on the school team and part of a city league. This year my team is first in the overall season. When I grow up I want to be a photographer or a journalist, or maybe both. I am a good student. I like school and find it easy. I just started liking boys. I had crushes on them before, but now I really like them. I'm not dating anyone though, because I don't want to do that just yet. But a boy asked me out, only he's a year younger than me.

"I think I first heard about menstruation when I was really young because I'd see the commercials. I used to think they were for older people, diapers for adults. As I got older I started to realise what the commercials were really about. My mom hasn't really talked to me about it and I don't want her to. It's really embarrassing. I know I could talk to her if I needed to, I'd just rather not. I learned about it in school, from magazines, and from my friends. We say 'period' or 'menstruating' when we talk about it.

"The first person in my class to start was a girl named Penny. She started really early, in grade five. We were in math class and it happened and there was blood everywhere. Everyone saw and everyone was so shocked. Nobody said anything about it because we all felt bad for her. I don't think most of the boys knew what was going on at the time, and most people have forgotten about it already.

"My friend Gwen is the most open about it. When she started it was at camp. It was really embarrassing because she was totally unprepared for it. It was a big public thing because she had gotten blood all over the bathroom. Nobody knew that it was her, but her mom had to clean it up, so I think people probably figured it out. Why else would her mom be cleaning the bathroom? Gwen gets cramps from it. She has to take Tylenol for them. And everybody knows she's started, so the boys will pick on her most. If she is in a bad mood they'll say 'guess it's that time of month'. She either tells them to shut-up, or jokes about it and say 'no, that was last week'. So she's pretty good with it.
“Most of my friends have started, but I haven’t. It seems to me that most people think about menstruation as a bother. Something that happens once a month, unfortunately. I’m not excited to start. I consider myself lucky that I haven’t started yet. I don’t think menstruation is a very big deal. If I knew I could still produce eggs without it, I would rather never start. But those two things go hand in hand. I don’t think menstruation is important to other people. You don’t hear people talk about it like other things. I have no idea what it will feel like. I don’t know how you know when it’s going to happen. I know some people get cramps, but not everyone. And I know that PMS is related to having your period and not a good thing. I always hear ‘Well, someone is PMS-ing’ when someone is in a bad mood.

“I am comfortable talking about menstruation so long as it’s only to females. I had to explain it to a girl in grade two. She didn’t get it. She thought you could die if you lost too much blood. She had so many questions! I explained them as best I could, and with every detail I gave her, she had another question! Her mom was really thankful when I told her about our discussion. Now she has something less to worry about.

“The only thing I really worry about is knowing when you will start, and how much you might bleed. I just don’t want to be caught off guard. What if I’m in the middle of math class! It would be so embarrassing if others saw. I also don’t know what happens overnight. I’m scared of starting and leaking when I am sleeping over a friend’s house. That would be awful. I really hope I don’t get it during the summertime. My friend Stacy had a pool party and she told me she couldn’t go swimming because she had started her period. I asked my mom about that and she said that your period stops when you are in the water, so I didn’t have to worry about starting while I was swimming. I told Stacy this and she said that wasn’t true. So I’m not too sure and don’t know who to believe. What if it is different for every person?

“I’m going to use pads when I start, but I’m not sure which kind. If I have to buy them myself I guess it will be okay. Not such a big deal. I don’t think I will use tampons for a while. I heard a rumour that if you leave a tampon in for more than five hours you can get a bad disease. I don’t think I want to deal with that at all.

“I’d rather start in the winter or fall, so I don’t have to worry about swimming. I am not looking forward to it, and the later it comes the better. At the same time, I
wouldn't mind getting it off my back. Not worrying about that first time. I don't think I will tell anyone, except maybe my closest friends. It won't make me feel like a woman, but maybe like I am on the way to becoming one, because you are passing puberty. I don't think it will make me different, or make other people think of me differently. I am sure it will be annoying. Having to worry about it, about leaking, or having cramps. I guess that as soon as you start you can't wait until you are past menopause. At least, that's how all of my friends think of it.”
Part Three:
Analysing Menstrual Culture
3.1 Summary of Life Histories

The framing and shape of the life histories are a result of the methodological and theoretical framework that I have previously outlined. The interviews did not follow in the way they are presented. Within each life history, the theory and analysis of menstrual culture is woven throughout. I wanted my framework to be visible to the reader as they enjoyed the stories that women shared with me. However, I do believe that the task of anthropologist is not simply to collect and present research. I must also provide a more direct analysis of the women’s menstrual lives. This next section is such an analysis, but it will remain somewhat minimised. I do not simply want to reiterate these life histories using the language of anthropological discourse. It is important that I do not reduce the experience of the women by separating their life events from the people that they are, -taking their voice from the context of their description of their experiences. I chose the methodology of the life history in order to better present the women in my study as whole persons. My background in feminist theory and methodology had made me critical and cautious in reducing lived experience into patterns and categories. By doing so, the women move from being subjects of study to being objects of study.

Finding a starting point with which to discuss these life histories seems a bit of an immense task. There are so many things that can be discussed and focused on. First, it is important to look at the different topics and ways of understanding menstruation this methodological technique brings forth. Most striking to me, is the amount of difference in this relatively homogeneous group of women. I intentionally chose a group of families that seemed. at least on the surface, to be relatively similar. While it is important to recognise that experience differs in terms of class, race, and sexual orientation, I wanted
to show the diversity that existed between the experience of menstruation within a group of relatively similar women. All of the women are Caucasian with an Anglo-Saxon ethnic heritage. All are relatively middle-class, with some families lying closer to wealth, and others at times, closer to poverty. There seem to be fewer patterns and consistencies than differences. Beliefs and experiences seem shaped by much more specific and individual circumstances than generation and society. What is presented is that menstrual culture is diverse and varied. Women's responses to their menses are shaped by cultural and family heritage, biology and their personal and individual experience of their own bodies, their friends, their age cohort, and their own personalities and individuality.

Further, some popular ideas about women's lives and beliefs come into question. Many of the women presented here come across as sexually aggressive, rather than submissive or passive. They like sex, they buy condoms, they decide against or for sexual promiscuity based on their needs. Not all of the women seem all that interested in motherhood, or are focused on fertility. Menarche wasn't necessarily a defining moment in their lives. They don't all hate menstruation or love menstruation, and their feelings about menses are based on personal experience and circumstance.

From the life histories also comes different understandings of menstrual rules and taboos. Take for instance, the idea that women should not have sex while menstruating. From these life histories it seems that most of the women have been informed of this menstrual sanction. Some follow it, while others do not. Further, why a woman submits to certain ideologies can be recognised. The sanction against sex while menstruating is believed to originate and continue with beliefs of menstruating women being dirty and unclean. From these women's accounts, Charlotte followed the sanction because she
believed that it was not appropriate behaviour, while others, like Isabelle and April, choose not to have sex while menstruating because it is something that they do not enjoy. Others feel it shouldn’t matter at all. Nevertheless, most of the women seem aware that there is an idea of abstinence during menstruation, whether this be common sense, proper behaviour, an old wives’ tale, or complete nonsense.

Much of the life histories are descriptions of the physical experience of menstruation. This allows for a rethinking of ideas of a universal menses and, not incidentally, provides a wonderful source of knowledge and comparison for other women in learning about their own bodies’ cycles. The pluralisation of menstruation becomes apparent. Cycles last different periods of time, occur with different regularity, are accompanied by various symptoms (both negative and positive), have different levels of blood loss, and on the whole, are viewed in various ways by different people. Many cycles happen among these women. And with that, so many different beliefs regarding what a “normal menses” would be. Even with a large portion of the women having been on the birth control pill at some point in their lives, the cycles differ and cannot be understood as universal. More than that, menstrual cycles also changed over the course of their lives. Menses is a process which is individual and not necessarily consistent over time. The experience of the process also affects the beliefs which surround menstruation. Lindsay says, I don’t think it is a big deal. I might if I had more symptoms. Then perhaps I’d have to think about it more.

Another interesting observation that arises from these life histories is the connections menses has with other aspects of life. Menstruation was often discussed in terms of sexuality, as noted above. As well, the popularity of the birth control pill as a
form of contraception came up often as the Pill has an effect on a women’s menstrual cycle. Connections to family, relationships to daughters and mothers and fathers are made visible in discussions of menstruation. In many cases I did not have to ask about other family members, they appeared simply by virtue of the connections they shared with a woman’s menstrual history. It was surprising to me how much daughters often knew of their mothers’ menstrual cycles, and the different roles (or lack of) fathers played in understanding and sharing responsibilities of menstruation (buying pads and tampons). Also fascinating was the role the family plays in affecting menstrual beliefs and the experience of menstruation. Certain biological conditions seemed hereditary, such as the reactions both Melanie and her mother had to the birth control pill, or perhaps Nora’s familial experience of Premenstrual Syndrome. Many of the women look to their mother’s experience of menopause, to prepare themselves for this biological transformation. Moreover, while some families, as in the case of Emily’s, shared a similar conception of menstruation, others had variation. For instance, Catherine understands menstruation as nothing more than a nuisance, while her daughter enjoys her menstrual cycle and views it as an important time of reflection. Topics came up that I wasn’t expecting to hear about: miscarriages, epilepsy, health food, breast cancer, and divorce. A woman’s menstrual cycle, her beliefs and experience of menstruation are ultimately and intimately linked to other aspects of her life. The life histories argue that in studying menstruation, menses cannot be isolated from other life experiences as has traditionally been done.
The Family

Some attention must be paid to the different family units presented in this thesis. By shaping the life histories into families of women, the richness of an ordinary person's life becomes salient. It is not just the menstrual life history of an individual that is read, but that of a woman who is also a mother, daughter, wife, grandmother, and sister. These women are presented within the complexities of their family relationships, their identities becoming more full upon reading the experiences of other family members. For instance, Christine is not simply a surgeon with her own personal views and experiences of menstruation. She is also a daughter, a wife, and loving mother of two girls. She has shared aspects of menses with these other women.

In looking at the literature on the mother-daughter relationship, especially in relation to menstruation, most of what I found was similar to the following passage:

*Mothers pass on their own limitations to their daughters by defining menstruation as 'dirty'—in accordance with the predominant view in our culture. The bleeding body has to be made invisible. In our culture, the mother's envy of her daughter, including the wide range of options available to her as a young woman of today can be linked to the predominant views of menstruation...from the mother's perspective the bodily development of her daughter confronts her with the upcoming separation and her own aging process. It can remind the mother of her own unsatisfied sexuality.* (Flaake, 1993: 9)

Mothers seem to be held responsible for a lot things involving their children's actions and self-esteem. Parenthood was not taught to any of the mothers involved in this study, and it is clear that many of the women learned how to parent their children through trial and error. As I found a lot of works that echo the same sentiments as the above quote, I felt this to be quite disturbing. The perception of menstruation as a negative, embarrassing, dirty process is being presented as part of a mother-daughter cycle of
knowledge. The mother expresses menstruation negatively to her daughter at menarche, and when her daughter grows up she passes this view on to her own children. There seems to be an underlying assumption that mothers should be able to distance themselves from their environment, from the messages they have received all their lives, from their doctors, from television and magazines, from the society in which they live. There also seems to be an assumption that motherhood is a defeating, unsatisfying role for women, that when they see the futures their daughters can have they look upon their own lives with the regrets of unfulfilled dreams. Yet, fathers also set an example of how menstruation is framed in a household, and their participation (or lack thereof) also affects a young woman’s perception and experience of menstruation. Additionally, daughters do not simply take in information word for word, with the exact sentiment in which knowledge was passed. They use their own conceptions, opinions and experiences in shaping their beliefs about menses. Of the relationships present in the life histories, none fit the model provided by the literature on the mother-daughter relationship. I would like to take the opportunity to explore in more detail, each of the families involved in this study.

Margaret explains that her mother never made her feel embarrassed about menstruation. When she finally did tell her mother that she had started, she seemed quite open with the topic. She treated menstruation as a fact of life, something natural. She showed Margaret how to clean blood stains and gave her a space in the bathroom to keep stained clothing out of sight. She taught Margaret that menstruation was private and natural. And throughout Margaret’s life history, that idea resonates. Even as Margaret explains her very painful experience of menstrual cramps, she remains quite pragmatic in
her understanding of menstruation, and is very open in discussing this topic. Her daughters, however, remember their household differently. While Margaret explains that she never kept menstruation hidden, and taught her children about it at a young age, Melanie’s experience of menarche was quite difficult as she did not know what was happening to her body. Tara didn’t even tell her mother that she had started, she explains that I told Megan’s mother because when Megan started her period her mom made a big deal about it. She was becoming a woman and it was this wonderful thing. In my house it was always a curse that I heard about because my older sister would complain about it.

I do not doubt that each of these women are recounting their histories truthfully and honestly, they simply remember things differently. It is possible that Margaret started to explain menses when her children were too young to really understand what she was saying. As Melanie’s peer group was also not discussing menstruation, it was not something that Melanie was thinking about or planning for. It is also quite possible that Margaret’s pragmatism and openness has become stronger over time, as Melanie explained, spurred by her career as a nurse. As Margaret states that she never hid anything from her children, so possibly her experience of a very painful menses was something that Tara saw, and shaped the way Tara felt menses was viewed in her home. Tara also explained that she began to menstruate during a time when she was not all that interested in her mother, when she wanted to rebel against her parents, so this could also be a factor in the way she understood menarche. There is no sense of envy in Margaret as she watches her children grow up: she did not treat her life as ending with motherhood. She went back to school in her thirties and approaches aging positively. We can see that the process of aging is not viewed as an inherently negative experience by her daughters.
either. Melanie explains that with age she has become more comfortable with her body: 
when I go through menopause it's not going to be a problem either. It is just going to be 
a natural progression in my life. Going through menopause and the cessation of my 
period is just as important as having it. It is part of the cycle and I am glad that I feel 
comfortable with that. But society did not help me get to that conclusion at all.

Claire explains that her mother was not very willing to discuss menses with her 
when she started, it wasn’t something that was open for discussion in her household. 
However, within her peer group, and as a result of the sex-education she received at 
school, she approached menstruation pragmatically, and positively. She explains that it 
was important for her to talk to her own daughter about menstruation, she was 
determined not be like her mother in that respect. But it wasn’t the easiest thing, and I 
think that that is important to note. Discomfort in discussing menstruation is not a bad 
thing. It does not make a mother inadequate, or backward. It is clear that over the past 
century, menstruation has become more public. It is easier to find information about 
menses, and it is more likely for any person in society to become aware of menstruation, 
simply by virtue of the advertisements found in magazines and on TV. As sex education 
becomes the responsibility of society rather than parents (by being included as part of 
grade school curriculum), parents today expect that their children already have some 
knowledge of the bodily changes that occur during puberty. It is difficult for an 
individual to change as quickly as society at large. While it is clear that Claire felt 
information and discussions of menstruation should be more open and public, when 
confronted with talking to her own daughter about menses, she found it difficult, but still 
did it. And Christine’s memory of menarche is not laden with embarrassment and
disgust, or focused on her mother’s discomfort in talking about menses. She too was very pragmatic in her understanding of the menstrual cycle.

While neither Emily nor Lindsay appear extraordinarily comfortable and open in talking about menstruation, they both share in a pragmatic view of menses. For them, menses is a natural biological function of the body, and nothing more, and therefore, not an important topic of discussion. Their mother had an important role for both of their experiences of menarche, though Christine did not treat it as a rite of passage or celebration. She explained menstruation to her daughters as she had understood and experienced it. Her daughters share a similar perception of menstruation, though the different perspective on menopause between Christine and Emily is interesting to note. Emily looks at menopause as a possible cause for sadness, the loss of one’s period seems in some way to dampen the sense of womanhood. This may also be the result of her age. None of the women involved in my study who have experienced menopause, or expect to do so soon, felt any remorse in the loss of their menstrual cycles. While none of the women in this family have an overtly positive attitude toward menstruation, they do not express an inherent dislike for their bodies. What is clear is that for them it is important that they not be limited in their activities because of their biological processes.

Nora and April both had positive experiences of menarche. In my opinion this was a result of several factors, one being that their mother was quite open in discussing body matters with them. While their father is described as being comfortable in discussing women’s reproductive biology, the fact that there were only women living in this household made menstruation a more common and public topic. What is particularly
interesting in this family is the experience of Premenstrual Syndrome by each of its members.

Judy explains that while she knows PMS to be linked with menstruation, she does not think about PMS in this way. She understands it to be more a part of the total experience of womanhood. For her, Premenstrual Syndrome has made things difficult, and she regrets that it affected her parenting. But she explains that her experience of PMS has changed over the years, as a result of other factors in her life. It was hard. I was carrying on two roles, the mother and the father. That's a lot of stress. You are the breadwinner, the disciplinarian, the driver, and then your body takes over and you have all this stuff to do. Both Nora and April recognise PMS as part their mother's cycle, as well as part of their own, to varying degrees.

The relationship between Charlotte and her daughter, Catherine, is the most visibly strained of all the mother-daughter relationships in the life histories. Catherine has strong views about motherhood and she does not believe Charlotte to have lived up to that role. I think Isabelle explains this strain well. As a result of the relationship both Catherine and Charlotte had with Isabelle's great-grandmother. I want to make clear that the strain between Catherine and her mother is not visible in their daily lives. They both love each other. They speak to one another, they visit one another, and Catherine's children know and love their grandparents. I was hesitant in including this aspect of family relations with the life histories, but found it difficult to exclude without omitting important portions of their stories. Neither woman is to be blame or villainised. They are both wonderful people who have experienced life quite differently.
While Charlotte’s experience of menstruation may seem far removed from those of women who grew up in Canada, it is not. I was able to interview women of Charlotte’s age who grew up in different areas of Canada and found many similarities, for instance they also were first introduced to cloth pads. Charlotte’s experience of menstruation appears to be the most difficult and closed of all of the life histories. She is aware that her beliefs about menstruation do not coincide with the beliefs of younger generations. She explains that she was very close to her mother, but still, menses was not an issue discussed between them. This highlights another commonality I found in conducting this research, that there is silence within the intimacy of familial relationships. This silence is a way of sending messages about how to treat menstruation, and about the respect you show others. Further, it can allow for bonding, by keeping menstruation silent it becomes a secret shared by few. Charlotte explains that her actions later on in life were a result of the way she was brought up (by both her mother and society). By not talking to Catherine about menstruation she was acting in the way she understood to be appropriate. Charlotte has had to struggle between her beliefs and the changing attitudes and perception of menstruation and sexuality in society, in her children, and her grandchildren.

Catherine did not blame her mother for not speaking to her about menstruation, and she has largely taken the same approach with her own daughters. However, while she has not sat her children down and explained menses to them in detail, she is open and does not hide menstruation from her kids. Menstruation does not make her uncomfortable, and all of my interviews with her took place in her room, with other family members carrying on with their daily activities in the adjacent rooms. She was
always candid in describing to me her experiences, and never lowered her voice or began to whisper if Haley or Jacob (her youngest children) walked into the room. Her experience and perception of menstruation is not positive. She suffers from epileptic seizures in conjunction with her cycle, which has made the experience of menstruation quite disruptive in her life. But while she considers it a nuisance, she does not perceive menstruation to be an illness or a reason for shame. It is interesting that Isabelle has come to enjoy her cycles, sharing a very different conception of menstruation from her mother. Haley’s perception of menstruation seems equally shaped by what she sees in her household and what she learns from her friends. It will be interesting to learn how her perception may change over time, and what her experience of menarche will be like.

I do not believe that any of the mothers were responsible for passing negative views of menstruation to their children. There are many factors which shape a woman’s perception of menstruation. The different family relationships and units do however, play an important role in how menstruation is perceived and experienced by women. While the role of the mother in their daughter’s understanding of menstruation varies through these life histories, it is always in some way, part of the women’s experience of menstruation. For each, there was an importance or belief that menstruation should be shared with their mothers at menarche, even if they already knew about menstruation, or understood their mother to be uncomfortable with the topic.

The Generations

There are a few patterns which appear throughout these three generations. Many of these women do believe menstruation to have become a topic that is currently more
public and open. There are differences between the experience of openness for the
genesis of menstruation becomes a greater part of public discourse. Sharing beliefs about
menstruation with peers appears a common practice of the younger generation, if only at
menarche. As well, a belief that menstruation is nothing more than a biological process
that can be ignored has increased as biological definitions of menstruation become more
important, and menstrual care products become more comfortable and absorbent.

What is observable is the greater control women have over their bodies, as well as
a greater importance placed on this control. Modern reproductive technologies have
helped women discipline their biological processes. The birth control pill, estrogen
therapy, hysterectomies and other procedures have become more common and inherent to
a woman's experience of her body. This aspect of bodily experience will be expanded on
further. I simply wish to note that the ability to discipline one's body through
reproductive technologies is not a shared experience across the generations.

It was my intention to employ current critical approaches in theory and
methodology, to present complexities in the way we as anthropologists can conceive of
the biological process of menstruation, and by extension, can conceive of and analyse
women's bodies. An astonishing amount of data emerged from the life histories, and I
deliberately included this data in full. I wanted to present menstruation in a way that
forces the re-examination and re-evaluation of previous approaches to this topic. The
incredible richness presented in the life histories is the result of my methodology. This
was how the women in my study experience menstruation in their daily lives. So there
are many possible paths to take in analysing menstrual culture through these particular
life histories. In an effort to keep the issues at hand specific and direct, I will focus my analysis on two major aspects of menstruation: the experience of western menstrual taboo, and menstruation as an experience of the lived body.
3.2 The Experience of Western Menstrual Taboo

What would happen, for instance, if suddenly, magically, men could menstruate and women could not?
The answer is clear - menstruation would become an enviable, boast-worthy, masculine event:
Men would brag about how long and how much.
Boys would mark the onset of menses, that longed-for proof of manhood, with religious ritual and stag parties.
Congress would fund a National Institute of Dysmenorrhea to help stamp out monthly discomforts.
Sanitary supplies would be federally funded and free. (Of course, some men would still pay for the prestige of commercial brands such as John Wayne Tampons, Muhammad Ali's Rope-a-dope Pads, Joe Namath Jock Shields - "For Those Light Bachelor Days," and Robert "Baretta" Blake Maxi-Pads.)
Military men, right-wing politicians, and religious fundamentalists would cite menstruation ("men-struation") as proof that only men could serve in the Army ("you have to give blood to take blood"), occupy political office ("can women be aggressive without that steadfast cycle governed by the planet Mars?"), be priest and ministers ("how could a woman give her blood for our sins?") or rabbis ("without the monthly loss of impurities, women remain unclean").
Male radicals, left-wing politicians, mystics, however, would insist that women are equal, just different, and that any woman could enter their ranks if she were willing to self-inflict a major wound every month ("you MUST give blood for the revolution"), recognise the pre-eminence of menstrual issues, or subordinate her selfishness to all men in their Cycle of Enlightenment. Street guys would brag ("I'm a three pad man") or answer praise from a buddy ("Man, you lookin' good!") by giving fives and saying, "Yeah, man, I'm on the rag!" TV shows would treat the subject at length. ("Happy Days": Richie and Potsie try to convince Fonzie that he is still "The Fonz," though he has missed two periods in a row.) So would newspapers. (SHARK SCARE THREATENS MENSTRUATING MEN. JUDGE CITES MONTHLY STRESS IN PARDONING RAPEST. And movies. (Newman and Redford in "Blood Brothers"!))
Men would convince women that intercourse was more pleasurable at "that time of the month." Lesbians would be said to fear blood and therefore life itself - though probably only because they needed a good menstruating man.
Of course, male intellectuals would offer the most moral and logical arguments. How could a woman master any discipline that demanded a sense of time, space, mathematics, or measurement, for instance, without that in-built gift for measuring the cycles of the moon and planets - and

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1 Taken from Gloria Steinem's *If Men Could Menstruate*, in Steinem, 1983: 338-339
thus for measuring anything at all? In the rarefied fields of philosophy and religion, could women compensate for missing the rhythm of the universe? Or for their lack of symbolic death-and-resurrection every month? (Stienem, 1989, 339-340)

I have needed to return to Gloria Stienem’s *If Men Could Menstruate* many times through the writing of this thesis. Sometimes I forget that my perception of menstruation is culturally shaped. Conducting these interviews and surveys, I often felt like I was collecting information about menstruation that was linked more to common sense, rather than practice and beliefs shaped by culture. Of course you don’t want to leak on to your clothes. It is embarrassing and difficult to wash out. Of course you want to use the menstrual care products which are the least bulky, which minimise the amount of attention you have to pay to your cycle. You do not want menses to get in the way of your activities. Of course you want your cycle to be regular, you need to be able to prepare and plan for it. Everything the women would tell me made perfect sense. But what if, a blood stain on your pants was a good thing, and expected? What if menstrual care products were designed so that menstrual blood could be examined, celebrated, or acknowledged? It is not just common sense guiding women’s understandings and practice of menstruation, but rather their responses to menstruation are guided by specific cultural ideas. These ideas are shaped by history and ideology, they are not simply the result of biological truth or fact.

One of the strongest cultural associations with menstruation is the notion of “taboo”. I have seen it associated with menstruation so often, yet rarely defined and often misused. Buckley and Gottlieb (1988) explain the difference between “rule” and “taboo”, where a “rule” originates from practical consideration and “taboo” is linked to a
spiritual foundation, what is sacred/forbidden. While much of what I will be discussing in this section may seem to fall under the category of a rule, I have made a decision to employ the term “taboo”. I do this hesitantly as the women who I interviewed would more likely refer to their actions as based on practical concerns, rather than an underlying cosmological order. Their agency is important to me and I do not want to deny them agency. I want to stress therefore, that I do not believe that all of the women involved in this study would view their actions in the way I will be presenting them. I have chosen the term “taboo” because I understand a specific ideology to be working to present menstrual practice as common sense. The more I focus on this issue, the more I am certain that aspects of menstruation are “taboo”, because they are a danger to a specific cultural order.

The issue of taboo in this western context rests directly on a concept of private/public dichotomy. Certain aspects of menstruation are acceptable in the public domain of society, while others are considered private or personal aspects of menses. That is not to say that the boundaries of these two domains or categories are concrete or fixed. As the life histories show, they are dynamic and change. Women interpret and negotiate these boundaries differently, depending on their circumstances and experience. Most of the women expressed a belief that menstruation was becoming a more open topic of discussion, that menstruation is no longer hidden, and that this change was good. Yet, many of the concerns women had between generations are the same; not letting menstruation slow you down, get in the way, and a concern about leaking. I believe the concern is a result of private aspects of menstruation becoming public.
Menstruation as a biological function is understood by all of the women in these life histories as normal. It was not presented by them as a sickness or disease. They did not have to avoid touching wine because it would ferment, or flowers because they would wilt. They could discuss menses with their doctors. They could find information about menstruation in magazines, the internet, and from other women. Many felt comfortable discussing their menstrual cycles with other women, and sometimes men. But were they allowed to menstruate? I contend that within public space (work, media, school) menstruation is allowed to exist as a biological process, but not as something women experience. Within the public domain menses is a natural process of the body reduced to biological language in order to remove any obvious negative or positive values. In as shown in Chapter 1.3 Emily Martin (1987) illustrates that biological explanations and definitions of menstruation are not neutral. Menstruation is presented as production gone awry, producing only waste. However, the women I interviewed use biological explanations of menses in order to present menstruation as normal and natural. My concern lies more with what is omitted from biological explanations of menses: the experience of menstruation. Medical models do not deny that blood is somehow involved in menstruation, but they do not include the experience of that blood, or blood letting. Furthermore, feminine hygiene products are produced in order to minimise the feeling and process of menstruation, to keep menses as an experience out of women's public lives.

The life histories reveal that many women express distaste for those who choose not to do things because of their menstrual cycles. They articulated a need to not let menstruation get in the way of their daily lives. And blood, in public menstruation, does
get in the way. It is not permitted. *Leaking* is not acceptable. Haley explains how the first time her friend Gwen started to menstruate was really embarrassing because she was totally unprepared for it. It was a big public thing because she had gotten blood all over the bathroom.

"The blood was always very fresh red, arterial". "I was swimming one day and saw some brownish discharge". "I'd go in the bath tub and there would be all of these blood clots". "I'm not grossed out by the blood. I always try to find the egg, though I know I can't. I don't like the brown blood, because it looks look dead flowers". I hesitated before including these passages with the life histories. I still don't feel comfortable with them. I still fear the response of academics wondering, *Is this really necessary? Is this anthropology?* But I think my concern over these passages reveals the taboo operating within anthropological discourse regarding menstruation, linking anthropology itself to a wider western context and ideology. Menses can be discussed in terms of its relationship to culture, and even in terms of biology. But blood, blood that is experienced, blood that comes from *down there*, that can be red or brown, blood that can be felt or smelt or seen, this is private. This stuff does not need to be considered in analysis. It is unnecessary, shocking, or gross. And for those exact reasons, I included these description of menstrual blood. I include them in order to make visible the conventional understanding of menstruation within anthropology in a clear way. To make a point in terms of what is considered too private to be made public. Moreover, I include them because I want to present menstruation as an experience. The way women describe or understand their menstrual blood is part of that experience, and therefore part of menstrual culture.
The life histories themselves belong to both the public and private domains. They are private because the interviews took place between individual women. They are public because the interviews occurred and are presented within the context of academic research. Just because we are women (myself and my research subjects) does not mean our relationships belong to the private sectors of society. Many of the women I interviewed do not talk about menstruation in their daily lives, and would not ordinarily discuss their menstrual experience with other women. Aside from this, the relationships between women are not always based on friendship, and family ties are not always open. Many of the women I interviewed expressed to me that they felt comfortable in discussing menstruation because their conversation was within the interview context, because of the relationship between the researcher and subject. It was like talking to a doctor or a nurse, they told me. That does not mean that other people were not around during the interviews. Many of the interview occurred with husbands, children, parents or siblings in the same room, or nearby. My interview with Lindsay took place in her family dining room with both of her parents coming in and out of the room. Her father even sat with us for a portion of the interview to eat his dinner. Haley, Jacob, Isabelle and Jeffery were all present during some point of the series of interviews I had with Catherine. Isabelle accompanied me on my interview with her grand-mother because she thought Charlotte would be more comfortable if she were there. For Charlotte, Isabelle’s presence made her uncomfortable because she felt that having to listen to her grandmother talk about menstruation would make Isabelle embarrassed. April’s interview took place with Nora and her boyfriend preparing dinner in the adjacent room. For the most part, the presence of other family members made me more uncomfortable
than the interviewee. Equally important, all of the women knew that the interviews were being recorded and would probably find their way onto paper, making them quite public. The life histories themselves provide an example of menstruation as both public and private, and they were understood by the women in this way.

**Negotiating the Public/Private Dichotomy**

What is private and what is public about menstruation changes and is negotiated by each woman in her varying contexts. Here the differences between generations become visible. The older women often did not talk to their husbands about menses. They may have spoken to their mothers about menstruation only once. Charlotte remembers, *you never spoke about those things. My mum sat me down. We were very close but she never spoke about that. She told me then, for the first time. She wasn’t comfortable telling me. It is very private.* For many of the these women you didn’t speak to your peers about menstruation either. *I didn’t tell anyone that I had started. Only the cheap girls did that. It was a private thing and if you were “feminine” you didn’t discuss it,* recounts Catherine.

But what is private (and “feminine”) differs between the women. For Judy menstruation was considered a normal, girl thing. It was something that you didn’t talk about in the household precisely because it was private, meaning individual. But she would talk to girls her age about menses. Margaret however, felt that one didn’t discuss menstruation with other girls because it should be their mothers talking to them about it. She felt comfortable in dealing with menstruation at home because her mother never made her feel like it was a bad thing, but rather that it was a fact of life. However, she
has a clear memory of the time her father found her menstrual *leftovers* in the washroom and expressed his disgust.

For women in the younger generations, what is public about menstruation seems to have expanded. Many share their menstrual experiences with their peers. Nora recounts how boys and girls would discuss sex and reproduction at the end of high school. Her sister explains how all of her friends know each other's cycles. April says that menstruation makes her feel more in touch with other women, at least her friends. She did not tell her father that she had started menstruating, but it wasn't because it was too *private* a topic to tell him. Tara explains that she never spoke to her father about menstruation because it would embarrass her. On the whole it does seem that more aspects of menstruation are becoming acceptably public. Younger women have been given fewer restrictions regarding menstruation. They are not told to avoid baths or physical activities during their cycles. They have had an easier time in gathering information about menstruation. Their experiences of menarche often included their peers. And they do seem to associate menstruation with shame far less then their mothers or grandmothers. But there are still spaces in society that when menstruation *leaks* in, discomfort is felt. And each woman has a different conception, though a clear one, of where and how menstruation can be visible and public.

**Let's Go Shopping**

When commercial menstrual care products were first manufactured they were generally kept behind the counter in drug stores. They had to be asked for. This act can be considered very public, and for some women, very uncomfortable. Charlotte explains
that she hated to buy the products for that reason, while Claire remembers that buying
pads and tampons could take a long time, because you had to wait until the store was
empty, or at least all of the men had left. A lot of women told me that they felt
uncomfortable buying them at first, when they were younger, but as they grew older their
comfort level increased.

*It's like buying condoms. You know that everybody buys them. It is a normal,
natural thing, but it's still a private thing made public.* Both get inside your body and in
some spaces that's embarrassing, states Emily. It is interesting that for some women
buying tampons and pads is embarrassing, while others are completely comfortable with
this act. Women who express to me their comfort with menses, talking openly on a
variety of issues surrounding menstruation, will still tell me that they are not comfortable
buying tampons or pads. Lindsay felt too young and ended up using all of the pads in a
hotel's bathroom dispenser. Sometimes having to ask another person to buy menstrual
care products is just as difficult as going there yourself. Many of the women I
interviewed continued using their mother's products even though they disliked them,
because they didn't feel comfortable asking for a specific brand. But other women have
been quite comfortable in asking their fathers to pick up some tampons or pads.

It is clear that there is diversity in the responses women had to buying tampons
and pads, however they all had a sense that this was a possible space for contention. In
the next chapter I will illustrate how the marketing and selling of these products has been
difficult, because of the difficulty in negotiating which aspects of menstruation could
become public, and which could not. Often, new products are sent to homes through the
mail in banal and inconspicuous packaging. There is a sense that at one point in a young
women's life, the act of purchasing tampons or pads will be embarrassing. Not because of what these products are, not necessarily because of what these products represent either. But because everyone in the room, in the store, waiting in line, will know what they are going to be used for and where they are going to go. Some never feel this embarrassment, but are aware that they have been able to transcend this embarrassment, while others never quite do.

Including Men in You Menstrual Cycle

The extent to which men are involved in a woman's menstrual cycle varies. The difference between generations is that younger women have included, or perhaps expect, their male peers to know something about menses and treat it respectfully. Though not expected when they are just starting to menstruate, eventually it is felt that men will have appropriate knowledge about menstruation and can treat it as a natural biological process. Some of the young women express a feeling of needing to tell their boyfriends about menstruation, it was their responsibility. Others felt that men did not want to know about menstruation, and discussion about it would be superfluous.

For their grandmothers and mothers there seem stronger boundaries between men and women in terms talking about menstruation. Charlotte never spoke to her husband about it. Eventually Claire's husband would pick up some tampons. For Christine and Margaret, we get a sense that their husbands were more active in their menstrual lives, buying menstrual care products without hesitation. Christine also explained that her menstrual cycle does not get in the way of her sex life. While the level of openness between women and the men in their lives regarding menstruation varies, there is always
a sense of discord. Even if a woman feels comfortable speaking to men about menses, they have a sense that the male may not react positively, or that society in general questions this behaviour.

There seems a growing sense that men need to know what happens during menstruation. While many women felt that men must respect menses as a normal biological process, few articulated a need for men to know about the experience of menstruation, and even participate in it. In conducting this research, most women didn’t question me on the fact that I was not interviewing male family members. It seemed that men’s voices did not need to be heard; they considered men’s perceptions and understandings of menstruation insignificant. What can men bring to a conversation about menstruation other than curiosity? For other women, hiding menstruation from men is more important, at least initially. Tara wonders about what she will do when she gets married because wearing big bulky pads to bed is not attractive. Nora will guard her discussion of menstruation around men if she suspects that they will belittle her experience. But April explains that men need to be informed about menses, that they shouldn’t be shut out from it just because women experience it. The concern women feel or have felt talking or admitting menstruation to men seems linked to ideas of what is proper “womanly” behaviour, but their perceptions of that vary.

None of the women recount telling their fathers that they started menstruating or having their father explain menses to them. I am quite aware that men can and do play important roles in the menstruating lives of their daughters, mothers, wives, or girlfriends. However, the majority of women involved in this research shared a belief that menstruation is not important to men because it is an experience of women. In
general, men lie between the public/private dichotomy, as they and the women in their lives negotiate those boundaries. Even within the intimacy of familial relationships, men can represent a boundary in which certain private aspects of women’s lives should not enter.

**Conclusion**

In the next chapter I will further explore western menstrual taboo in relation to the feminine hygiene industry. Before I do so I would like to place emphasis on the issue of women’s agency. In the first two sections of this thesis I refer to women as actors in the creation of menstrual culture. I chose to approach menstruation in the way that I have because I wanted women to provide their beliefs and understanding of menstruation. I wanted women to be presented as key actors in shaping menstrual culture. However, I appear now to be returning to what may seem like a language of submission: presenting women as unconscious participants in continuing negative representations and beliefs of menstruation, and by extension, women’s bodies. This is not my intention, and I would briefly like to outline my approach to resistance, submission, and agency in women’s everyday lives.

Lila Abu-Lughod, in her article *The Romance of Resistance: Tracing Transformations of Power Through Bedouin Women* (1990), looks at the problematics which surround theoretical approaches to resistance. Abu-Lughod explains that increasing importance has been placed on exploring resistance to power structures, recognising power as a creative force rather than simply a destructive one. However, she argues that with this approach, analysis has largely been focused on documenting
resistors and examining resistance, rather than examining power. She states that the problem with this approach is that it romanticises resistance and does not critically examine power structures in societies, this approach instead tends to ignore them.

Abu-Lughod calls for using resistance as a diagnostic of power, of recognising that resistance can never exist outside of the power relations which create it. This is my approach to women's practice of menstrual culture. I am not judging women's choices, beliefs, or actions. I only wish to recognise that women's agency is limited by particular social structures and power relations. That is not to say that women are outside of the relations of power, rather that are part of these relations.

In the case of menstrual culture it is not so much resistance that I wish to emphasise, but rather that women are continuous and important actors in its formation. Women, as the life histories illustrate, perceive their choices and needs differently. Some women resist feeling or being confined by their bodies. For them, menses is limiting and they work to overcome its power. For others, it is the medical definitions of menstruation or the ideologies carried in commercial menstrual care products that they find oppressive, and try and act against. I do not wish to present the choices women make in their lives as carrying different values - to be either resisting stereotypes or submitting to them - I understand that every act carries with it elements of both resistance and submission. I have structured my analysis to show that women are actors in the experience and understanding of menstruation (through their creation of menstrual culture), and do so within certain power relations which limit their choices and affect their beliefs. However, these power relations do not take from the value of women's agency. Women make choices within structures of power, they do not make choices because of them.
3.3 Taboo and the Feminine Hygiene Industry

In *The World of Goods: Toward an Anthropology of Consumption* Mary Douglas stated that “goods in their assemblage present a set of meanings, more or less coherent, more or less intentional. They are read by those who know the code and scan them for information” (1979: 5). Commodities do more then satisfy needs and desires, they are symbols used to mark cultural categories. Their value is based on judgements made about them by their subjects, and this value changes as tastes, needs and technology change (see Bourdieu, 1984). It is in this sense that commodities can be said to have social lives (Appadurai, 1986). Therefore, by studying this relationship between culture and object, commodities-in-motion, we come to a deeper understanding of the world in which we live.

This chapter is divided into two sections. The second section will be an exploration of how the feminine hygiene industry negotiates and shapes the public/private boundaries surrounding menstruation. The first section provides a history of the Tampax tampon within the context of a growing feminine hygiene industry. I will be employing the theoretical approaches of both consumption studies and feminist researchers. I am approaching the analysis of the industry using Igor Kopytoff’s biological approach (1986). A study of this industry is important because it has played and continues to play a significant role in shaping cultural conceptions of menstruation in North America, and around the world. By unravelling the assumptions held within their products we can understand the messages they transmit to the women who use them.

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*For an in-depth definition and analysis of commodity see Appadurai, 1986: 6-16.*
Through an analysis of the feminine hygiene industry, what is often considered to be a private issue is recognised as part of the global political economy.

**Menstruation as Material Culture**

*I used to think a lot about blood — about bleeding, really. I spent my twelve year old days dreaming about it. I would imagine walking slowly forward, in the school washroom full of watchful eyes, some malevolent, some congratulatory, as I released the dime that had been trapped in my more-than-sweaty-palm. My right hand would reach forth with mechanical perfection to grasp the dime from my left hand, forcefully pinching it between my index finger and thumb — I must not let it drop! My right arm would reach up and out in crane-like gestures until — clink — the dime was swallowed by the machine — and clunk — it issued forth a box weighted with necessity: mission completed. I used to have this daydream repeatedly, varying only in the characters of watchful eyes, but never in the movements. It was an elaborately planned procession for purchasing my first sanitary napkin, or, as I called it then in short bursts of consonantal force: pad. (O’Grady and Wansbrough, 1997: 76)*

The origins of commercial pads and tampons reach far back in history. Women have used rolls of grass, wool, cloth and cotton to collect and contain menstrual blood. The reasons for this containment differs between cultures and throughout history. For some, the use of materials to collect blood resulted from a need to conceal the fact they were menstruating, or protect their world from powerful menstrual blood (Buckley and Gottlieb, 1988). For others, it was a matter of convenience, allowing women to remain comfortably active. For most women, as in the life histories, the use of products to collect menstrual blood has been both to keep their blood from other’s view, (allowing)
and allow for a certain “freedom” of movement while menstruating. It was not until the 1800’s that products were manufactured for the sole purpose of collecting and containing menstrual blood.

The first products manufactured were cloth pads and underwear. These products were advertised in women’s catalogues as sanitary step-ins or sanitary aprons with no mention of menstruation or blood. They were made with cloth or cloth and rubber and were laundered for reuse. By the 1890’s disposable pads were being manufactured for use with a sanitary belt. The pads were made of “surgically cleaned” cotton, cellulose and other “enhanced” fibres. They were advertised as easily disposable, allowing for the latest in comfort and protection and as the result of “untiring scientific research”. Again, there was no mention of menstruation, blood, nor where the pads will be placed. All of these products were available by mail order to avoid embarrassment (Houppert, 1999; MUM, http://www.mum.org/med_sci.html).

It is clear that the feminine hygiene industry was born from a culture which held beliefs about menstruation as being unclean and unmentionable. The goal of these products were to “protect” and allow women to be less affected and controlled by their bodies. So, what does it mean that menstruation was treated more like an illness and deficiency rather then a cause to celebrate? Why is it recognised as an inconvenience, rather than a source of power?

Studies presenting western thought to have historically viewed the female body as inherently diseased and anomalous are many (see de Beauvoir, 1972; Martin, 1987;)

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3 Unfortunately, this history is focused mainly in the US. While it does seem that American producers have had the strongest impact on the industry globally, other countries have been active in the industry as well. However it is difficult to find sources that are not American.
Peise and Simmons, 1989; Spelman, 1999). The dichotomies of male/female, mind/body, culture/nature have been an integral part of this thinking and to a western worldview (Pandian, 1985). The female body had been a battleground for defining western sexuality, menstruation being a symbol of such and through western logic, needing to be repressed and hidden. The $8 billion industry of feminine hygiene came into existence within this cultural conception of the female body (Houppert, 1999).

Yet, the industry did not just play into these ideas. It has worked to subjugate women and fuel the culture of concealment surrounding menstruation. It has also provided a space in which menstruation could be discussed as well as promote women being active in their lives. By focusing on the history of the Tampax tampon we can reveal some of the contradictions and intricacies of this cultural symbol.

The tampon, as manufactured today, was invented by a physician (read: scientific discovery) Dr. Earle Cleveland. His concept did not come from knowledge of the homemade tampons used by women since antiquity. Rather, the design came from the plugs of cotton used by physicians to absorb secretions during surgery and his motivation was based on the discomfort his wife and female patients felt when wearing the bulky cloth pads or uncomfortable sanitary belt. He created the tampon out of compressed cotton, with a removal cord attached. He also wanted women to be able to insert the tampon without touching themselves, and so created a cardboard applicator. This tampon allowed women to carry out their daily activities without anyone knowing they were menstruating, even allowing themselves to forget for a time. He filed his first patent for "a catamenial device" (later named Tampax) on November 19, 1931 (Tampax, http://www.tampax.com).
Gertrude Tenderich was the leader of a group of investors who bought the patent, creating the Tampax Sales Corporation in 1932, and produced their first tampons in her home basement. They immediately came into difficulties. Priests in the Catholic Church objected to the use of tampons for fear that women would find them erotic (Houppert, 1999). Drugstores wouldn't stock their product on shelves for fear that the Tampax box displayed would offend customers. Stores would not carry their product unless a demand was created for them. Yet, newspapers refused to print Tampax advertisements. The company needed to inform women of their product in a manner that corresponded to the culture of concealment surrounding menstruation. They took aim at three different audiences: physicians, the drug trade, and consumers (women) (Tampax. http://www.tampax.com).

In trade magazines, Tampax advertised to drugstores focusing on the possibility of profit that seemed inherent to the product. Advertisements in the American Medical Association Journal and various nursing magazines would feature anatomical diagrams and technical explanations of the tampon design. They also offered to send a free box of tampons to interested physicians. The goal was promote the Tampax tampons through science, to have the product endorsed by the medical community (MUM. http://www.mum.org; Tampax. http://www.tampax.com).

They managed to get some advertisements printed, stating clearly that Tampax was approved by the American Medical Association. In some publications they placed blind-ads in which women were invited to write for further information. Possibly the most important aspect to their advertising was their "educational campaign". It started with registered nurses commissioned to give public lectures on menstruation and tampons
and other women were hired to go door to door in residential neighbourhoods and talk to housewives about the product. They also created and distributed pamphlets explaining menstruation through western biological models and providing descriptions of the products the company manufactured.

Through this approach Tampax entered the curriculum of high schools and colleges, sending "Tampax ladies" as consultants. Their aim was to dispel myths about menstruation and tampons, and in doing so, attract consumers. The Tampax company explained that this was not an easy task. Circulating information about tampons was difficult when there were so many topics and words which were unmentionable in public. Making women aware of their product and comfortable discussing, buying, and using them caused further difficulties. Advertisements had to be written in a coded language: "for "sanitary protection worn internally". This product was promoted as eliminating odour, being dainty and comfortable, so much so that even when playing sports one can be completely unconscious of the fact that one is menstruating. Further, it was modern and innovative, no sooner would a woman go back to the old-fashion napkin than they would to the method used fifteen years ago. Approved for use by doctors everywhere, this product was available by mail order, to further free one from embarrassment. On the very first advertisement there is a drawing of a women riding a horse, playing tennis, dancing in an evening gown and sitting on a beach. There is also a drawing of a box with TAMPAX written on it. Boldly it states 'Welcome This New Day of Womanhood'.

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Not too much has changed since then. Advertisements remain cryptic. Words like clean, dry, protection, fresh and discreet are still used. The word menstruation is never used, although sometimes the word “period” can be found in those ads directed at young girls. And never, ever, will there be any mention of blood. Pads and tampons absorb fluid, moisture flow or liquid. Pictures are of boxes, rose petals, women in athletic wear running, hiking, or swimming. Or perhaps it is a women dressed in a tight business suit. Her hair bounces as she runs across the street. She is active, she’s busy, she is in charge of her life. She doesn’t get slowed down by that time of the month. She is carefree.

\[1\] Taken from Houppert. 1999, p. 2
Television ads are played only during certain shows, in order to capture the largest female audience and offend the smallest amount of people. The companies often have great trouble in finding actresses and models to act as spokespersons. Even the Spice Girls, that group of women who claim themselves leader in gurrl power did not want to be associated with menstrual care products when they were approached by Kimberly-Clark in 1997. It seems no one wants to be associated with blood. Johnson & Johnson doesn’t even attach its name to the product they produce and sell. These
products are associated only with the name of the parent company, Stayfree™ (Houppart, 1999). Claire explains the first advertisements for feminine hygiene products that she saw on TV: *I remember thinking that people were probably educated enough that they didn’t need to see this on TV. At this time I was probably offended by them. It was black and white TV, so around the 50’s. I’m not offended anymore, but I think they are unnecessary. They never showed the product in the commercial. A woman would either be speaking to a female doctor or friend. Never a mother and daughter, not then. One woman would complain about a problem and the other would say she should try such and such a product. They are still doing that now. It was very discreet in terms of language, it still is, but back then they never said ‘period’ or ‘menstruation’, and they never showed the product, especially to show its absorbency.*

Advertisements to young girls, often found in teen magazines, probably send out the strongest message. They focus on a need to be free of embarrassment, free from odour, free from anyone being able to tell that you are menstruating. These advertisements discuss discreet packaging, *products so small you can hide them in the palm of your hand. No one will ever see you take them into the bathroom.* They tell young girls that their products can free them from, or at least make more bearable, the anguish experienced from a period. They tell young women that menstruation is not normal. It is something that is dirty and smelly and painful. It is something that they must hide from the world, they must learn to control, through the purchase of these absorbent salves. The life histories however, do reveal that young women today have not approached or experienced menstruation as such an dirty and shameful thing. The young

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women in this thesis recognise a need to control their cycles, but they did not articulate a feeling of disgrace simply because they menstruated.

And through this culture of concealment, the feminine hygiene industry's "education campaign" thrives. Each of the four major companies; J&J, Kimberly-Clark, Playtex, and Tambrands all feature web sites with sections for young girls, as well as helpful hints for moms (mothers pass the menstrual care torch). All of them provide a medical description of menstruation, as well as answers to frequently asked questions. And all of them feature a section on Choosing Feminine Products, a protection selection of sorts. They all provide free samples and pamphlets (see Always, http://www.always.com, Johnson & Johnson, http://www.inj.com, Kotex, http://www.ca.kotex.com, Tampax, http://www.tampax.com).

Today, much of the sex education or "puberty education" taught in schools is the product of the feminine hygiene industry. They provide teaching kits and movies (Houppart, 1999). Within the genre of sex education menstruation is taught as a natural and normal part of growing up. Some of the sites explain that as a result of the anatomical knowledge they can now provide to young girls, menstruation and menstrual blood does not have to appear as powerfully dangerous or evil. Women don't have to remain prisoners of menstrual huts anymore, hiding out from the rest of the world, they can remain active participants in society. They explain that science has allowed them to challenge and destroy old menstrual taboos. But somehow, there seems to be more of an analogy between the menstrual huts described and the box of tampons they are trying to sell. The process of menses must not be visible.
This aside, discussion is often open and progressive. For many women, these educational “tools” have been very important in teaching them about their bodies, and making them comfortable with the changes that they will experience. In this space the words uterus, vagina, and blood can be used. Menstrual calendars are provided, and girls are told to keep track of the menses, to listen to their bodies. I am sure that most of those hired by the industry to create sex education tools believe this education to be important and valuable source of knowledge for young girls. I am certain that they believe menstruation to be natural and normal and want women to be comfortable and proud of their bodies. But the very same company which may treat menstruation like a treasure, will also advertise it as an embarrassment. The industry still capitalises on the conceptions of menstruation and the female body in Western society. They capitalise on the fear of being “found out”, of leaking, and in doing so promote this fear.

The driving force behind the industry’s "education campaigns" is to gain the trust of perspective clients and advertise their products. That is why the “education campaign” was developed in the first place. And the relationship between menstrual care products and consumers is interesting. Most women stick to the first brand that they were introduced to. Of 100 women interviewed, 79 told me that they have a favourite brand, and 21 told me that they never “try out” different brands or products. While a test conducted by *Consumer’s Report* in 1995 revealed that store brands like Janet Lee and Rite Aid are the most absorbent and cheapest of all available brands, most women (73 women in my study) will not use a no-name brand, they don’t trust them. Many women develop a strong sense of product loyalty and companies know this and advertise their products to foster this loyalty.
The feminine hygiene industry produces a variety of different messages for women. They should be educated about and comfortable with their bodies. Women should feel free and empowered. Take, for instance, one of the latest Tampax advertisements. The scene appears to be Woodstock. Women are dancing and swimming. They are naked and muddy and natural. The music in the background is rebellious 60’s rock and roll. These women are affecting the world. It’s about love, respect and tolerance. And then, a bold white stamp stating that Tampax was There, as I am sure it was.

The industry teaches women that they should understand their bodies enough to control them. These products were created to help women do so. And they do. They allow women to participate completely in society. they can make menstruation nothing

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6 “Tampax was There” advertisement taken from Chatelaine magazine, December 1999: 83.
7 “Tampax was There” advertisement taken from Mademoiselle magazine, February 2000: 120.
but an inconvenience. And for many women, this is very important. *Consumer Reports* (1986) named the tampon one of 50 inventions that has revolutionised the lives of consumers. And from talking to women, this product really has. The industry tells us that menstruation is natural, but that doesn’t mean that it is good or pleasant, or mentionable. The feminine hygiene industry tells women, men, and children, through a very public medium, that menstruation should remain under wraps.

**Women and the Feminine Hygiene Industry**

Because of the public/private dichotomy of menstruation, the feminine hygiene industry has been able to act in certain ways. The industry has been an important agent in making menstruation a suitable topic in public discussion. However, not all aspects of menstruation are included in this public discourse, and the industry has also been an important actor in shaping the public/private dichotomy toward their own benefit. The feminine hygiene industry has been able to exploit menses in a certain way because of its *private nature*. The following section is the result of both the life history interviews and the 100 completed menstrual product questionnaires. It is structured around particular questions that I asked women and makes visible the public/private dichotomy through which the feminine hygiene industry operates and which women negotiate as they live their bodies.
What do you look for in menstrual care products?

The most important characteristic women look for in menstrual care products is absorption. It seems like common sense, why wouldn’t women want to keep their clothing stain-free? But it is more the choice of words used by both the industry and women which are revealing. It is not just absorption or reliability, it is safety and protection. Protection from what? Protection from the visibility of menstrual blood. Women are expected to be feminine: fresh and scented, clean and feminine. They can be active, they can work, they can be empowered. But they cannot bleed. Even though the onset of menarche generally turns unsexed girls into “Women”, for menstrual blood to leak onto their clothes is embarrassing. It reflects poorly on them. (Houppert, 1999; O’Grady, 1997). Products have improved in their ability to absorb menstrual blood. Women explain that having to use cloth pads or the pad and belt combination was invariably messy, “you’d get it all over yourself”. What is interesting is that while in the past menstrual care products weren’t as able to control or contain menstrual blood, as the women explained in their life histories, older generations are presented by themselves and others as having stronger restrictions around menstruation. Tampons are described as freedom. Tampons ensured menstruation did not interrupt their daily activities. It freed us to do more sports. Before we still played, using those heavy pads, but you would always worry about something breaking or leaking, explains Claire. Menstrual blood is also described as something dirty and the choice to use tampons is often linked to a particular sense of hygiene. Women told me that tampons make them feel cleaner. Nora says that she doesn’t like pads because they seem to harbour more bacteria. The goal for most women appears to be menstrual care products that you don’t have to feel, and that
won’t allow menstrual blood to pass through, that can allow one to ignore menses as much as possible.

Are you concerned about the prices of pad or tampons?

It could be construed as odd that women are expected to pay anything at all for tampons and pads. It is, however, a $8 billion dollar industry (Houppert, 1999). Companies know that once they have a loyal consumer, she will be buying their products every month or so for her menstrual life, approximately 35 years. Let’s say she buys a box of tampons at $7.99, and it lasts her 2 cycles, that’s over $1500 dollars. But, she’ll probably buy a box of pantyliners “just in case” and a box of regular pads, for sleeping, or one of those off days. That’s an added $3.00 a month, bringing the total to approximately $2621.00. Spread over a lifetime, it is not a noticeable amount. However, considering that there were 85 million menstruating women in Canada and the US in 1992, that’s a lot of money for a market that doesn’t fluctuate (Armstrong and Scott, 1992).

In western society there isn’t an inch of the female body that can’t be improved, enhanced, highlighted, diminished, or removed through the purchase of one product or another (Wolfe, 1990). It is not surprising then, that menstruation has been commodified. The majority of women I spoke to did not approach commercial menstrual care products as anything but normal. These women (myself included) are conditioned to using commercial pads and tampons. The continuing secrecy and privacy surrounding menstruation just allow this industry more immunity from being asked to justify the sale
of their products. For each box of 32 tampons a company will profit over $1.70\textsuperscript{8} (Houppert, 1999). This is a significant mark-up for a product that most women consider a necessity. In 1990 The Tambrands Inc. Annual report stated that “the demand for Tampax products is not affected by the vicissitudes of the economy” (taken from Armstrong and Scott, 1990, 45). The companies can therefore ensure a consistent demand (an increase as the world’s population increases, women’s menstrual lifetime increases, and the companies expand into new markets). Alternatives are hard to come by. There may be many choices in terms of absorbencies, plastic or cardboard applicators, wings or dry weave, but they are all owned by the same four companies. Products other than tampons and pads may hold less than 1% of the market (Houppert, 1999).

From the interviews I conducted, women do not concern themselves much with the cost of menstrual care products, unless they must buy pads and tampons for several family members, and/or are living on very limited funds. Price was rated the third most important aspect women look for in these products. Yet, few would ever try a cheaper, no-name brand. When asked if they had ever been concerned about the cost of these products most replied that they hadn’t because tampons and pads are a necessity that they don’t think about. Only a few mention a concern as to why the products were taxed, or that they would budget for them. In general, it is not an expense that is questioned. The majority of those who did feel concern about the price of menstrual care products were young women who had recently left home for university, perhaps because they had just begun to pay for these products themselves.

\textsuperscript{8} This amount is given in US currency as Houppert did her research largely in the United States.
Have you thought about using alternative menstrual products?

When I ask this question I often get a particular look from women. A look that is both surprised and fearful. For the most part it seems, women do not really know what alternatives there could be, but are pretty certain that they don’t like them. It is really difficult to get information about other products that are available. There just isn’t so much space to advertise as these product often need to be thoroughly explained, nor would drugstores necessarily carry these products. And in truth, most of these alternative choices are alternative for a reason. They generally make menstruation a bigger part of a women’s life, rather than provide more freedom or absorption.

As young women are often taught about menstruation by the very companies that produce menstrual care products, they are not informed about the other choices available to them. The products, commercial pads and tampons, are presented as the natural and only options. To think that there may be others, can also require one to think of menstruation in different terms. Alternative menstrual care products are a response to the pads and tampons available in drugstores. They generally are less discreet, less disposable, and require some sort of acknowledgement of menstruation and menstrual blood. They are difficult to advertise because they often cannot meet the requirements of the code of silence surrounding menstruation. They can’t be understood by simply saying “worn internally”. And some of them aren’t for sale at all.

Cloth Pads

Women choose disposable pads over cloth pads for a number of reasons. Disposable pads tend to be more comfortable, dryer and less likely to leak. They are also
less work, they do not have to be cleaned. And they can be easily thrown away, leaving little or no trace of menstrual blood. When I tell women who began their menses using cloth pads that some women today are turning back to cloth, they tend to shudder. *The ideals of the young.* Why would anyone want to put themselves through such a thing? Listening to Charlotte, it seems understandable, what a messy, time-consuming hassle! But some women do choose to wear cloth pads and this choice is often associated with the amount of waste produced by disposable pads and tampons, as well as a belief that commercial products are an unnecessary expense. These women make the pads themselves, or buy them from small co-ops or women’s groups. Of the few women who told me that they use cloth pads, they told me that if they had been introduced to cloth pads when they first began to menstruate that they probably would have thought them gross. As they became more comfortable with menstruation and their bodies, they began to view it as a more important process that needed to be treated with greater care. Of the women I have spoken to who use cloth pads, most tell me that it has enhanced their experience of menstruation. They feel more involved with their bodies and their menstrual blood seems cleaner. Isabelle explains, *I think that there would be something gratifying in cleaning out the clothes yourself, and seeing it, as another affirmation that it is going on. It validates the fact that you are bleeding rather than being able to tuck it away and never acknowledge it.* For most women interviewed however, they do not feel connected to their menstrual cycle, and would rather not acknowledge it any more than they have to. Catherine says, *now things are going the opposite way and I see people putting too much emphasis on it, like the women’s movement, people who do special things on the first day of their period.* Or going back to cloth pads or the cup! I washed
cloth diapers and that was gross. Leaving them in a bleach bucket with the lids on top! I care for the environment, I do, but there is no way you'd see me doing that!

Menstrual Cups

The commercial menstrual cup is a device that was invented and patented by Leona W. Chalmers. Its function is to collect, rather than absorb menstrual blood. Very few women bought the original Chalmer's cup, and it was made of a hard rubber. The patent was later bought by Tassette Inc. The company had a very difficult time advertising, as they were unable to show the actual cup, and fully describe the product, especially since it meant women using fingers to insert the cup, and possibly exploring "down there". One of the ads was headed "New – Monthly protection as dainty as a Dew Kissed Flower", with a picture of a tulip to illustrate the cup. The Tassette cup did not make a profit and by 1963 disappeared. The owner of the company, said the failure of the product was due to a reluctance of the public to clean and reuse the cup (which was good for 5 years), as well as its reusability. Satisfied customers would not have to buy another one for some time (MUM. http://www.mum.org).

The direct descendent of the Tassette cup is the Keeper. It is a reusable, natural gum rubber cup made by Lou Crawford of Cincinnati, Ohio. There are two sizes, one for women who have had children and one for women who have not. The Keeper has been around since 1987, but can be difficult to get a hold of. It is advertised through pamphlets that are sent out mainly to different women’s groups as well as in some women’s magazines such as Ms. Generally, information about the keeper is passed on through word of mouth. Costing $40.00, the Keeper lasts 10 years. Its mandate
expresses both feminist and environmental concerns. There have been no medical
problems associated with the cup. The Keeper, although made of soft rubber, is still thick
and not the easiest to insert. It must be cleaned, and therefore makes public washrooms a
possible problem. Also, it is not individually shaped, they are only two sizes which can
be problematic for some women. It was not developed for the purpose of monetary gain.
Women are actually given a three month trial period with the Keeper, during which time
they can return the product for a full refund (MUM, http://www.mum.org).

Instead™ is a new product that can be bought at some drugstores. It is a
disposable menstrual cup made of plastic. It is thin and easy to insert, looking much like
a diaphragm. It is not meant to be reusable, so a package of six costs about between $6-
$7, and can last approximately one cycle. It does require that women go exploring
"down there". The campaign for the Instead cup started in 1996 in the north-western part
of the US. The makers of the cup, Ultrafemm, had determined this area to have the
highest percentage of non-applicator tampon users and figured that apprehension to their
product would be the lowest (MUM, http://www.mum.org).

Instead of what? Well, tampons and pads of course. But why? When I first
discovered this product on drug store shelves it didn’t seem clear how it was being
advocated. It wasn’t reusable, so it wasn’t environmentally friendly. It is made of some
sort of plastic, though a full ingredient list is not available on its box. Could it be safer?
It doesn’t say. It does require women to have some level of comfort with their bodies and
menstrual blood, that much is certain. Flipping through the magazine Images I
discovered the advertisement below. Instead is advertised as allowing women to have
sex when they are menstruating!
This is quite remarkable, though you will not see the product advertised in teen magazines this way, only in women’s magazines. Advertised as feminine protection, holding fluid rather than blood, it doesn’t fully deviate from the norm. But to be advertised as allowing for the fullest sense of freedom, freedom to have sex, is rather dramatic. Although, as the life histories show, many women have no qualms about having sex while they are menstruating, many do. The company seems to be capitalising on a menstrual rule, and yet presenting women as agents with desire. It actually says “...it won’t interfere with anything you do – including sex”. It will be interesting to see what

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9 Instead Advertisement taken from IMAGES: Fashion, Beauty & Style. Fall 1999: 34.
happens to this product. Will it survive, and how will it be advertised in the future?
Currently it seems a large number of its users are women who tried the Keeper but found it too difficult to insert. A lot of these women are choosing to reuse the Instead cup. Many women do seem to be noticing it on the shelves of their drug stores, as a lot of the women I spoke with had never heard of it. Drug store owners tell me it is not selling well, and actually is a product that is often stolen of the shelf.

Other Alternatives

Other alternatives include an all natural brand of tampon called Terra Femme. There are also sponges manufactured for the purpose of absorbing menstrual blood sold in Australia, difficult to find elsewhere. Some health food stores will carry them along with cloth pads and the Keeper, but that is rare. Women may also use the sponges sold for the purpose of putting on cosmetics, but information about how to use these sponges is generally hard to come by.

I have met a lot of women who use or have been seeking alternative menstrual care products. I do believe the alternatives must be made more available, that these alternative should be more visible. But then I look at my notes. I look at the answers to my question – Have you ever considered using alternative products? “No, never heard of it”, “No – Yuck!”, “Never”, “No, I am happy with my routine”, “No they just sound messy and unhygienic”, “No. I don’t want to be bothered washing pads. I’d rather put in a clean tampon”, “No, gross!”. The four major companies have worked to highlight and stress certain menstrual norms. Women’s menstrual care choices reflect these90 norms, allowing alternatives appear unhygienic, time consuming and messy.
Could you tell me what pads and tampons are made of?

Of the women I interviewed, 50% had no idea what tampons and pads are made of. Forty-five per cent believed cotton to be the main ingredient, but told me that they had never given it much thought, and did not know if there were any other ingredients. What does this say? It could seem strange that most women are not aware of what they are putting in their bodies. For the most part, women seem to feel that they can trust these companies, that the products sold are well researched and tested. This faith is also intertwined with the culture of concealment surrounding menstruation, with the private/public dichotomy. Women are not expected to think anymore about the products beyond choosing between tampons and pads. They are taught to be concerned with absorbency and leakage, not to check an ingredient list. They are not taught, at the onset of menstruation, to think politically about the changes their bodies would be experiencing.

In 1980 thirty-eight women died of tampon related toxic shock syndrome (TSS). The deaths were linked to Procter & Gamble’s Rely tampon. This tampon was made of superthirsty synthetics such as carboxymethylcellulose and polyester, making Rely the most absorbent tampon ever made. Released in test markets in 1975 and the general public in 1980, the Rely tampon quickly stole 24% of the market. And then strange things started to happen. The Centers for Disease Control in the United States saw an increase in cases of toxic shock syndrome, primarily in young menstruating women. Fingers began to point at tampon manufacturers as the cause of TSS in these young women (Armstrong and Scott, 1992; Houppert, 1999).
The feminine hygiene industry responded with cover-ups. It has been reported that Procter & Gamble knew years before that there were some safety issues with their Rely tampon. She states that an internal memo dated for 1975 illustrated that some of the synthetic fibres and chemicals used in the Rely tampon were known to be cancer-causing agents. It also stated that the Rely tampon altered the natural levels of bacteria in a woman’s vagina. After the FDA threatened to force the Rely tampon off the market, Proctor & Gamble “voluntarily” withdrew it (Armstrong and Scott, 1992; Houppert, 1999).

It was not until 1990, after 60,000 women were hit with toxic shock syndrome, and commercial pads and tampons had been part of the economy for almost 80 years, that the FDA placed certain standards on these products and began to regulate them. Until

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10 Taken from Forbes, 1980: 40.
then, tampons and pads were not being tested. Companies were manufacturing them without any real responsibility to women’s health. Even Procter & Gamble received nothing more than a slap on the wrist from the FDA for producing a product that was responsible for the deaths of 38 women (Armstrong and Scott, 1992; Houppert, 1999; Terra Femme, http://www.biobiz.com/terrafemme/prelease.nyc.truth tamp.html).

In asking women if they had any concerns regarding the safety of commercial menstrual care products most cite TSS as a concern, but it is slight. So long as they change their tampon regularly, they feel safe using tampons and have no safety concerns about pads. Most assume that the industry and government work to ensure that what happened in 1980 does not happen again. Tara explains, I know that they do a lot of testing on these things, so I pretty much trust those tests. The FDA now requires that tampon manufacturers advise consumers to use the lowest possible absorbency, and that manufacturers standardise their ranges of absorbencies. They do not require complete ingredient labelling, nor that new products be tested. In the life histories, the women who were using tampons during the Toxic Shock scare place more blame on the customer than the manufacturer. Catherine states, people were leaving them in for too long, or forgetting that they were already using one and would put in another tampon. They were idiots.

Most sanitary napkins are made from fluff pulp. This requires that wood is processed through a mechanical pump and treated with steam-heat and sulphur-based chemicals, or Chemi-Thermo-Mechanical Pumping (CMTP). Chlorine gas is then applied to the unbleached pulp removing any of the natural beige colour (Armstrong and Scott, 1992). Rayon and cotton are the main fibres used in tampons. The more absorbent
tampons use more rayon, up to 100% rayon. This fibre is made from cellulose derived from wood pulp. In order to extract cellulose, wood fibres are subjected to a complex chemical process involving chlorine gas and chlorine dioxide. Cotton is a difficult crop to grow and today has 170 different insecticides registered to use on it, as well as numerous herbicides. The bleaching sequence for it includes the use of formaldehyde. It too must be bleached for that a “whiter than white” appearance of cleanliness (Armstrong and Scott, 1992).

The result is the use of many trees, an increasingly vulnerable resource, the release of harmful chemicals, and the creation of waste as plastic applicators, excess packaging and mounds or used rayon and cotton product. A class of chemicals knows as organochlorines, these include dioxin and furies, are released into the environment. They enter water systems, the air and earth, and are highly toxic. What’s more, a woman throws away ten thousand pads or tampons in her lifetime. 1.3 billion pads and tampons were landfilled or incinerated in Canada in 1990, and that doesn’t include the plastic applicators which show up in water treatment plants (Armstrong and Scott, 1992), or perhaps along the beach as Nora recounts.

Clicking on the Tampax web site, their “body matters” page. I find a section on health risks of tampon use (see Tampax, http://tampax.com/bodymatters.com/questions/myths/index.html). In the corner there is a pictures of Dr Anne Hochwalt. She’s worked for Procter & Gamble for 11 years now, and has a Ph.D. in environmental medicine. She looks cosy sitting beside her friend, registered nurse Elaine Plummer. She’s been at Procter and Gamble for over 18 years. These trustful faces tell us that tampons are safe. Rayon is explained as a natural fibre that has
been extensively tested. Anne and Elaine explain that the bleaching process as necessary to purify and eliminate impurities. *Whitening is a result of the process, not a goal.* The site is linked to the Centre for Devices and Radiological Health site (www.fda.gov/cdrh/cdr/tampons.html). There we are told that the cellulose used in tampons does not produce dioxins, yet there may be some trace amounts of this chemical. We are reminded that the FDA has determined that dioxin poses no health risk so long as it occurs at an extremely low level.

Turning to Karen Houppert’s *The Curse,* I am struck with different information. While levels of dioxin may remain extremely low, this is a toxin that needs to be more fully researched as trace levels may remain remarkably dangerous. The American Environmental Protection Agency released a report in 1997 stating that there was no acceptable level of dioxin. Dioxin is slow to disintegrate. The real danger then, comes from repeated contact because these trace elements accumulate. Considering that a women may use five tampons a day for, five days a month, for 35 menstruating years, totalling 10,500 tampons a lifetime, repeated contact should be a concern.

Tampons are also linked with chronic and recurrent vaginitis. The plastic applicators have sharp cusps that can lacerate the vaginal wall during insertion. All brands have been found to cause temporary dryness, cell peeling and even tiny ulcers (O’Grady and Wansbrough, 1996). Fragrance-laced tampons may cause skin irritations and disrupt a woman’s microbial balance, making her more susceptible to bacterial and yeast infections (Armstrong and Scott, 1996). Christine explains, *as a doctor I would tell people not to use the ones with powder in them. There is research that shows that women who use talc have a higher risk for gynaecological cancer.*
The secrecy surrounding menstruation, particularly its more public counterpart, pads and tampons, has enabled the industry a freedom in how and with what these products are made. On the market for 80 years, only now are absorbencies standardised. Today, new products do not have to be tested, therefor there is not strong insurance that a tampon like the Rely tampon will not resurface. The detachment between the processes of production and the actual product has become part of (twentieth century) consumer society. It is not so surprising that women are unaware how tampons and pads are made, or what they are made of. And because the industry is geared toward profit earning rather than costly consumer interest (safety), the latter often gets brushed aside. We need only turn to the tobacco industry to see that consciously putting unsafe products on the market is not something new. But is there any excuse for the fact that 6000 women have been hit with tampon related TSS? How could this happen and not affect the demand for tampons? Or a sense that these companies need to be responsible to their clientele?

Women are taught that aspects of menstruation, the blood of menstruation, is private. Menses is natural, but messy and gross, so what could be better to contend with it then a cottony soft plug? The majority of women that I interviewed did not believe that they needed to know anything more about the products, simply whether they work well or not. I asked women if and why they use tampons. Fifty-five per cent told me they only wear tampons (rather than pads) because they are cleaner, quicker, more invisible and they don’t smell. They provide more freedom from menstruation. Of these women, all said that they felt safe using the products, so long as they changed them regularly. Whatever harmful side effects there might be, it seemed women were willing to take the risk. In the short term they benefit more using them then otherwise. Of those who were
considering alternatives, and who had begun to question the production and safety of these products, most were young women in university.

**Conclusion**

Advertisements publicly illustrate what aspect of menstruation are the private concern of women. That is the experience of menstruation. The feminine hygiene industry has been able to develop publicly, making it possible for women to conceal their menstrual cycles. Products go unregulated. They are taxed and costly. Women are not expected to question this, because it would mean that they are thinking about menstruation in terms that politise their bodies. It would make evident the fact that they menstruate, and that menstruation affects them. What’s more, many women feel little connection to their menstrual cycle, and do not have the time to question how it is understood.

Nowhere in advertisements is there a mention of blood. Menstrual “fluid” is simulated with bright blue liquid providing an image of purity and cleanliness. Tampons work like plugs, absorbing menstrual flow, keeping it internal. The products can be quickly wrapped in toilet paper and disposed of. If menstrual care products were simply designed to absorb blood because it was messy, I do not think that advertisements would be so disinclined to mention it. I do not think that I would have felt such discomfort in presenting passages which describe menstrual blood. Turning to Mary Douglas (1966) theory of pollution I must ask, who is the dangerous actor and what is the “matter out of place”? 

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In this western context the dangerous actor is the body. Not just the body, or the female body, or the biological body acting through the mapped processes science has recorded. It is the body acting on its own, the body out of control, the body ignoring the tampon, the birth control pill, the estrogen supplements. Menstrual blood is a signal of this loss of control. It is anomalous when it becomes public, but to women, within their private sphere, it is normal and natural and not out of place. Not being able to contain menstrual blood from public display signals inappropriate behaviour or a body that cannot be controlled.

Who or what is in danger? From reading the life histories and my review of commercial menstrual care products, both society and the women are in danger. To society, menstrual blood and other inappropriate signals of menses in public allow for the recognition that science and technology have not properly controlled a body. I believe it is a signal of failure. And, it is not so much that women alone represent menstruation. On a daily basis menses seems quite concealed. Some women can ignore their cycles completely. Others are able to at least disguise and hide their menstruating bodies. Women explained the way that they protect themselves from allowing their menses to become public. They wear tampons which help them ignore their cycles. They use birth control pills to regulate their menses, so that they can plan and prepare for it. They take aspirin to subdue the cramps and headaches. They are not responsible for the menstruating body because it is a biological function that they do not control. They conceal it because the menstruating body made visible, represents uncontrolled nature and sexuality. It means that you are controlled and victim to your body, I don't tell people when I am menstruating. I know women who do, but I think it is a copout. I guess
I am still denying the fact that the whole process is in charge of me, Judy tells us. It seems important to many of these women that they be much more than bodies.

It is clear the women in the life histories experience the western taboo of menstruation in different ways, and consistently negotiate the boundaries of what is private or public. They are also actors in defining menstruation. For many women it suits their needs and lifestyle to ignore their menstrual cycles. Commercial menstrual care products do allow many women to enter and act in society without meeting friction. For others, this may be more difficult to do. Many women defy the logic of western menstrual taboos and work to make menstruation a more public act. And some women find power in the restriction surrounding menstruation. They feel that the secrecy surrounding menstruation and menstrual blood signals that there was power there.

Isabelle describe menstruation as a time for herself, as something that was hers alone. For some women, keeping menstruation private is a way of creating power for themselves. The experience of menstrual taboo in this context is varied and will change over time as women define their world, experiences, and actions in different ways.
3.4 The Body Tells a Story

Menstrual narratives provide an important lens with which to analyse women’s experiences and perceptions of their bodies. As I discussed in the prologue, the use of feminist approaches in analysing the body is challenging. In this thesis I have approached menses as a biological “fact”. However, because I have used women’s experiences as the entry point into menstrual culture, the diversity of the process of menses, as well as its contingency on historical and cultural context, has emerged to destabilise notions of completion to the biological “fact” of menses.

In this chapter I will be exploring the ways in which biological models of menstruation influence women’s experiences and understandings of their bodies, as well as the ways in which women use these models to meet their own needs. From reading the life histories there is a sense that science and technology increasingly provide women with a greater control over their bodies. And yet, this control is articulated within a particular configuration of power relations which limit the freedom women have to be both body and mind in all societal spaces.

Menarche and the Making of a Woman

Menarche is often understood as the beginning of womanhood. The marking of when the young female, androgynous body transforms into the sexed body of a woman (Golub, 1983; Houppert, 1999; Lee and Sasser-Coen, 1996). In a society in which women are viewed as limited by their biology, in a society that is patriarchal, the signal that womanhood beckons, may not be acknowledged with happiness and cheer. For a young girl, the onset of her menstrual cycle can be met with the feeling that her body is
betraying her, that she cannot control her body and she is not fully a part of it. As womanhood is wrapped around ideas of fertility and sexuality, for a twelve year old girl, the responsibilities of menses may seem too heavy a burden to bear. Previous studies have presented menarche as a crisis in identity and hygiene (Golub, 1983; Houppert, 1999; Less and Sasser-Coen, 1996). Sharon Golub explains in her work that once a girl reaches menarche she suddenly has a different body image. Girls may become more self-conscious, embarrassed and secretive about their very physicalness. Golub also found that self-esteem levels drop in recent “victims” of menarche, in comparison to pre-menstrual girls and those who have been menstruating for over two years. It seems that menarche is often met with a sense of estranged bewilderment. One’s body begins to act separate from one’s will.

“I was mortified”. “I felt a bit shocked”. “I was embarrassed”. “I woke up in a huge mess”. “I was upset about this terrible thing”. “I had to give it time to sink in”. “After the start I was kind of weirded out”. All of the women involved in this study experienced some sort of discomfort with the onset of their menstrual cycle. Whether it was the experience of bleeding, the task of telling one’s mother, the discomfort of wearing a pad. or simply assessing the body’s transformation, no experience was completely positive. Lack of knowledge about menstruation greatly affected the menarcheal experiences of both Charlotte and Melanie. They met menarche with much fear because they did not expect it. The sight of blood furthered triggered to them that their bodies were not functioning properly. Even for April, who was happy to start, the experience of menses frightened her because she didn’t know exactly what to expect, what to feel. Her cycles seemed too heavy to be healthy. The biological explanation
young women receive often in school, from company pamphlets, from books or parents, often do not include a description of what menstruation feels like. In the life histories, for those who were able to discuss menstruation with their peers, the physical experience of menstruation emerges through the course of those discussions. What do cramps feel like? What menstrual blood looks like? Is it like going to the washroom? Can you feel the blood coming out? What does it feel like to wear a pad? A tampon? Even with the more descriptive, experiential explanations of menses, it can be hard to describe. We are not taught about menstruation in that way. As Emily said, it is really hard to describe what menstruation feels like. It’s like having a slow leak of thick fluid coming from you. I know that sounds really bad, it sounds like I am talking about a car or something. I suppose I don’t think of menstruation as an experience. It’s something my body does, nothing more.

For some women, the material experience of menstruation remains memorable. It was the menstrual care products that went with menses that highlighted the experience of menarche. Generally a nuisance, the pad and belt combination was uncomfortable and didn’t always stay in place. They were messy. They would pinch the skin. Still, Catherine tells us that girls would accentuate their discomfort when they walked through the school halls, to let others know that they had started. She also explains that she found the pad and belt neat. She wanted to care for it well, at least for the first few cycles.

“It was no issue at all”. “It didn’t feel like a rite of passage”. “I didn’t feel happy, or scared, or anything”. “It wasn’t a big deal”. For some of these young girls, menstruation was not important to them. They treat it as carrying no value, biology has rendered it powerless to them. It is interesting that in these cases, menstruation is looked
at as simply a biological process, yet these same young girls did not view menarche as a symbol of womanhood. Where arguments that focus on biology might view menarche as “the great change”, the female body forming the reproductive capabilities that define women as “Women”, here biological arguments and understandings of menses, have allowed these young women to distance themselves from bodily processes. Their body menstruates and will menstruate. They do not have to change because of this, they do not have to participate in the body’s biology. This belief is accentuated with women expressing distaste for those who link themselves with their reproductive powers, or who allow themselves to be affected by their cycles, missing work or skipping gym class. These women often wish to deny the female in their body, because they understand it to carry negative or limiting characteristics for women (or a body that they are not in control of).

“When I was twelve, it was this big victorious moment”. “I was looking forward to it because it meant I was growing up”. “It was like a prize”. “When I first started I felt like a woman. It was the best”. Though often met with a sense of bewilderment, many young girls are happy to start. What is interesting is that this happens in association with becoming a woman. Whether it be that menses was understood by one’s peer group as a positive sign of maturity, and the young girl was happy to join in those ranks, or that the girl actually felt like she was now a woman, the symbolism is there. And the symbolism is positive. Margaret explains that when she started to menstruate, she didn’t feel like she was becoming a woman. That wasn’t on her mind. First, what does Margaret mean by “woman”? Is it simply meaning adult? She continues on in explaining that perhaps young girls today have more of a sense of menarche making
womanhood because they are inundated at a younger age with images of romance and heterosexuality. It seems that what Margaret means by “woman” is strongly linked to ideas of heterosexuality and a sexed body. I think for many of the young girls who experience menarche as a positive step toward womanhood, becoming a “woman” is linked to those same ideas. Many studies have shown an increasing attention and commercialisation of the female body toward making a “perfect” female form (Bordo, 1999). This is link to an idea that sexuality is laden with power, so power can be achieved in the sexed female body. Armpit hair, pubic hair (though one must control it properly), breast size, hips and curves, birth control, and a box of tampons, are all symbols of a female maturity that can be sought after. Menses might be met with apprehension, but as a young female learns to master her growing sexuality, she can also find it a space for power and control, so long as she grows into the right body and sexual orientation.

It is interesting that the majority of those in this study who met menstruation with the positive outlook of becoming a woman were of a specific generation. It may be that certain aspects of womanhood are increasingly becoming linked to ideas of power, though within the confines of patriarchal power structures. However, there are also more life histories from this younger generation. It could also be that these women’s perceptions of menstruation and menarche may change, as did Tara’s. As well, while it is important to note that the sexual power of women is often limited by a patriarchal culture, I do not want to reduce the experiences these different women had of menarche by this logic. I want to view it in context, but not take away from experience. These young girls were happy to start menstruating. They also felt openness, at least among their peers, to
celebrate it. In a society that generally views the female body as inferior and female reproductive biology as limiting, the fact that these young women could create a space to positively view the changes of their bodies is important. The common belief women have that menstruation has become a more acceptable and open topic today, may have had an effect on the way menarche is generally experienced. However, Haley tells us that she is not looking forward to starting. She supposes that as soon as you start you can’t wait until you are past menopause. It is clear that a feeling of openness and comfort is not experienced by everyone, and does not necessarily mean that menarche will be met with happiness.

**The Experience of a Biological Body**

For most women, their experience of menstruation changes throughout their lives. Their cycles change in terms of duration, flow, and side effects (not always negative). Their comfort levels change in terms of their abilities to talk about menstruation, experience their cycles, of sex, and having others know or see that they are menstruating. The processual nature of menses came out quite easily in discussing one’s menstrual history. These women understood change as part of menstruation, and spoke of menses in those terms. Isabelle says, *my perception of menstruation has of course changed through my life. It’s like getting to know a friend or something, with time it had become more endearing. I just feel like it’s a process that continues to grow as I continue to grow.*

It is interesting that many of the younger women, though they may view menstruation as a hassle, imagine menopause to be a crisis in identity. They imagine
sadness linked to the *shutdown* of one's reproductive abilities. They also fear those nasty side effects that are becoming more commonly discussed in the media and popular literature. However, for the women who have already experienced, or expect to experience menopause soon, the cessation of menstruation does not appear to be a time when they feel less, feel a loss of power. While their reproductive capabilities may have been very important at one point their lives, it is no longer linked to their perceptions of themselves. I think that this highlights a way in which perceptions of menstruation change as one's context changes. While concerns over hot flashes and estrogen therapy appear, there is a positive feeling that lingers in their voices. It may be that one's reproductive abilities were never linked to their identities, and menopause then allows them freedom from just going through the motions of reproductive biology. It may be that, as in the case of Catherine, menstruation has been quite difficult, and menopause may allow her to feel less debilitated by her body. Though Judy remains critical of the medicalisation of menopause, she too believes it to be a possibly positive change. Though youth is praised in western culture, the experience of these women tells a different story, that the experience of aging is not always met with sadness and apprehension. As in other cultural contexts, post-menopausal women may experience greater self-respect and self-worth when their knowledge and experiences are valued.

Do you have a body, or are you a body? I believe that most women experience both. In compartmentalising one's body, a woman can participate in western society with the least amount of friction. The life histories provide example of how women experience and participate in the Cartesian mind/body split. Women can ignore their menses in order to work or play, because their society doesn't make time for
menstruation to be experienced. It just happens, and no one has to participate or see it. In the case of most of these women, they have a body, and their body menstruates. They have a cycle, but they do not necessarily participate in it. It is their body speaking to them. Sometimes they listen. Sometimes they ignore it. They can hush the body, lower its volume with tampons and Midol and the birth control pill. This is a form of resistance. If women have been defined by their bodies and thereby limited in their options because of their bodies, why not defy their bodies and surpass the limits they create? It’s important to recognise the resistance in the act of using a tampon. It is freedom. It does allow a woman to participate in the physical activities once denied to her because she menstruated. The ability to ignore the biological process of menstruation has helped women become more than bodies.

But this freedom also occurs within a specific relation to power and constraints. Could the way society perceives time be contingent on the experience on menses? Could there be an expectation that women did not need to participate in a 9 to 5 work day because they were busy menstruating? What if men might take a specific few days off as well, in a mimic of this female physiological process? Or what if women had a choice, and neither had negative consequences for them? What if women saw themselves as participants in the process of menstruation? How would that affect the experience of menses? Why is it so beneficial for women to ignore their bodies? Because in order to be equal participants in society, they must experience a body that doesn’t “slow” things down, or stop “progress”, like a hot flash might, or a menstrual cramp could, or a pregnancy would have to. They must experience a body without reproductive functioning, or reproductive functioning that can be controlled.
Some women can easily ignore their menstrual cycle. They do not experience and cramps, bloating, or headaches. Their flow is not heavy, and if they wear tampons, they do not have to necessarily see any blood. Lindsay explains that she didn’t miss her menstrual cycles when she did not menstruate for a year, because there wasn’t anything to miss. There wasn’t a lot of extra time all of a sudden. It just wasn’t happening and I wasn’t connected to it. For some women it is simply the pain that has forced them to consider their menstrual cycle, like Melanie. April explains that she is happy to feel menstrual cramps and Premenstrual Syndrome. Those are signals to her that her body is healthy, and that she is not pregnant. For her, menstruation is the experience of release and cleansing. She wants to feel her body working. Isabelle explains that her cycle affirms a way of looking at the world, it is a way of speaking to myself. It turns around a part of me, so that I may reflect on who I am.

Menstrual Pain as a Way of Experiencing the Biological Body

Two comments brought me to discuss the experience of menstrual pain in detail. Isabelle states that never in your life can you look at yourself bleeding and say that it’s okay, that there is nothing wrong with that. It is a time where I can bleed, but it is not a bad thing and that is so strange. On top of that there is the pain. I think when you are in pain we automatically think it is a bad thing and has to be stopped. Maybe we don’t necessarily have to associate it with something that is negative, maybe we do more than we should. Menstruation is one of the only times when I can feel pain and know that it is okay, and that’s good. Coupled with Lynda Birke’s statement that culture shapes our
internal experiencing, it was clear to me that I had to take a good look at the way these women were experiencing menstrual pain.

Menstruation is often expressed and understood in terms of the pain and discomfort that it causes women. Many of the women I interviewed, both those presented in the life histories and those I did not include, expressed menstruation in terms of the pain they felt when menstruating. I asked women to describe menstruation for me as if I had never heard of it before, and many of the descriptions included pain as part and parcel of menstruation. The work Emily Martin (1987)\textsuperscript{1} has conducted on menstruation shows that menses is defined by medical textbooks as failed reproduction. Biological definitions and understandings of menstruation are shaped by this view, that menstruation is the product of a productive system that has failed. That the menstrual blood is the \textit{decline} and \textit{deterioration} of the endometrium lining. That it involves \textit{constriction} and \textit{spasms} and \textit{degeneration}. As women are often taught about menstruation from a biological perspective, at school, through educational books for young girls, by doctors, it seems that to some extent this thinking has become ingrained in the experience of menstruation. It is through menstrual pain that women become most descriptive about the internal workings of their biological bodies.

"I could always feel when I was ovulating, it was a clinchy clinchy, kind of grabby feeling". "It felt like someone had just grabbed my ovaries and squeezed them and squeezed them for 15 seconds. My cramps were the feeling of the rapid growth of a large cyst and then a sudden shrinking of it". "The cramps felt like ripping. Like a wound that was throbbing". "There are times when I can feel my uterus tearing. It feels

\textsuperscript{1} Emily Martin’s \textit{The woman in the Body: A Cultural Analysis of Menstruation} (1987), is discussed in Chapter 1.3.
like someone is pulling at my insides". "The cramps were agony". "The cramps go from a dull pain to the feeling that the layers of my uterine lining are being ripped away. Maybe it is because I've seen this image so many times, but it really feels like a pulling, turbulent rip". Through the discourse of biology women can imagine the internal workings of their body. Through menstrual pain, women can feel their biological physiology in motion. I think that there is a link. For one, menstruation has been taught to most of these women as a biological process. Given that biology is shaped by culture, the biological understanding of women's reproductive systems is framed within a patriarchal ideology of the body (Martin, 1987). What if the layers of the uterine layer became rich with nutritional blood that when ripe was miraculously expelled to become the sacred product menstrual blood? Would then, the experience of cramps sound more like, it feels like my uterine layer is growing, I can feel it becoming full. The cramps feel like the release, when the menstrual blood is let go. I can feel that my uterine layers are being mended. My ovaries feel like someone is embracing them, like they are being hugged tightly. Would this, in turn affect the feeling of menstrual pain?

The only time I have ever really heard that pain is subjective was on a program about back pain. The doctors were explaining that although the cause of back pain often cannot be narrowed to a physiological problem, the pain is real and debilitating. I've never heard anyone speak of menstrual cramps in this way. Then again. I never have complained to my doctors about the menstrual cramps I feel each month. Many of the women I interviewed did not. It seems a pain that is normal, and isn't to be complained about. Nora says, with a period you know you are not sick. You know that you are going to get over it, so you can deal with it more, not be prone to taking drugs because you
know that what you are feeling will end. Many women associate the cramps that they experience with other the activities in their lives, the stress that they feel or level of health they are in. And there are definitely some positive aspects to menstrual pain that were expressed because, menstrual cramps allow one to feel the internal workings of their body, the cramps make me feel what is going on, says April. It can also be a cause for unity, sharing in the pain together. As Catherine explains the public display of the discomfort created by the pad and belt combination, April explains that giving advice to other women has made her feel like she can help women and is in touch with them. Claire explains that they would tell each other ‘oh I’ve still got the curse’. I found women to express the hassles of menstruation with a lingering underside. Menstrual pain could be shared between women and be a secret from men. A burden that makes women stronger together. Though it was clear that the women I interviewed did not always feel this way, there was definitely a sense of pride in bearing the weight of menstrual cramps.

However, I do not want to belittle the pain that can be experienced. While some women may agree with the above statements, others will certainly think it ludicrous. Why would anyone find joy in a debilitating cramp that does not allow you to stand straight up? I suggest that some women do not so much mind the cramps, because that’s what they told me. In my experience, the agony of menstrual pain was something my peers and I shared and this agony would nourish a sense of pride in us. But it is also important to view the pain that many women experience during menstruation as something very exhausting. Melanie’s experience exhibits this strongly. She experienced incredibly debilitating menstrual cramps that she could not bear. They got to a point where she felt that her body was not undergoing basic menstrual cramps, but
signalling to her that something else was going on. She was acting on what her body was
telling her, and she had a very difficult time with the medical community in
understanding what her body was doing, in translating her experience into something
tangible, even having a name for her condition, Polycystic Ovarian Syndrome. She
didn’t feel unity by her pain, she felt very alone, I felt like a deviant, I was told that the
pain was in my head. I have a high tolerance for pain. I know what pain is, and I can
ignore most pain. I couldn’t ignore this, and I told them that. I felt dehumanised. I think
that the medical profession, in general, does not perceive a woman’s problem as a
problem. They want to make it yours. And I don’t think that there is enough data to
draw from. They just decided arbitrarily that it was in my head.

And why should women feel pain, any pain in the first place? Menstrual cramps
that are not linked to a disorder are still very real. Charlotte explains that she was in
agony. She could not take time off work. She had to earn money. So she took breaks in
the washroom or went to the nurse’s office. Many women describe the use of different
tactics. Melanie would do work that allowed her to sit down. Margaret could play with
her schedule or just feel dumpy without it getting in the way of work, and Isabelle is less
productive in the work sense. If she is working a job that does not matter to her. But most
women expressed that they would not or could not isolate themselves from their daily
workloads. They did not want to admit the effect menstruation had on their lives, they
wanted to do the things they wanted to do, or they couldn’t take a break. I asked
Catherine if she would just stay in bed on the days she was menstruating when she was
homemaker. I couldn’t take a day off even when I broke my leg, she told me.
It is also important to note that taking time off work has a very different meanings and consequences for different social classes of women. The ability to negotiate time and activities at work, vary. The luxury of taking “sick” days is not possible for everyone. It therefore makes sense that women would view their menstrual pain in different ways, as something they can experience, or as an exhausting bother that gets in the way of their lives.

**Will Menstruation Become Obsolete?**

On April 8, 2000, an article entitled, *The Bare Facts About The Pill* was published in the *Globe and Mail*. Three different people called me and told me to take a look. The author, Stephanie Nolan, looks at the scepticism many women have about the birth control pill and concludes that the Pill is not just safe, it does more good than harm. It increases bone density. It is an effective method of birth control. It regulates and can subdue the symptoms of menstruation. *And*, women can take it for 30 days every month instead of 21 so they do not menstruate at all.

This information was based on Dr. Elsimar Coutinho and Dr. Sheldon Segal’s book, *Is Menstruation Obsolete?* (1996) in it, the authors explain that women in industrialised western societies have a lifestyle which has increased the number of menstrual cycles in their life time. They cite Beverly Strassmann as one of the first scientists to recognise the connection between the high number of menstrual cycles and adverse health effects (110 for Dogon women and 350-400 for western women in industrialised societies). Premenstrual Syndrome, epilepsy, endometriosis, menstrual cramps, fibroids, Polycystic Ovarian Syndrome, anaemia are just some of the conditions
on their list arguing for suppressing women’s menstrual cycles. For these scientists menstruation is still linked to ideas of illness and disease (out of control biological processes). From reading the life histories, the claims of these two doctors make sense. Why wouldn’t Melanie want to suppress her menstrual cycle to keep the intolerable pain she feels each month from entering her life? It would make sense for Catherine to want to put a stop to the seizures that accompany her cycle. And for those women who find menstruation nothing more than a bother, why not?

What is important here is to note that these are not biological and scientific truths speaking, but rather, a biology shaped by specific cultural beliefs. Of the 132 women I spoke to, 81% said that they would choose not to (have) menstruate(d) if they had a choice. Further, I asked many women to describe for me what a perfect menstruation would be. In my mind I had answers of free menstrual care products, paid vacations, menstrual houses filled with pillows and luxury. But not one person answered that question in terms of changes to society. Every answer was focused on their bodies. The perfect way to menstruate would be to not menstruate at all, or be able to do it in one day with no pain what so ever. The perfect way would be more regular, more controlled, and less noticeable. These women first thought to change the biology of their bodies rather than the way society interprets menstruation. With the increase of reproductive technologies, perhaps changing one’s body appears to be more of a possibility than changing society.

What was also interesting was that the same women who told me that they would stop menstruating if they could take a pill to suppress their cycles, still viewed menopause negatively. Not just in terms of the possible side effects, but that it might
cause them to rethink who they are. That they would have lost their reproductive powers, and that might make them feel devalued. This isn’t so much a contradiction, but rather a clear example that women are taught to control their bodies. They can stop menstruating and think nothing of it so long as they control its absence. The body acting on its own can mean it is controlling them, that they do not have innate power in their bodies.

Lindsay says, *I’d stop menstruating through a pill so long as it was healthy and had no side effects.* I don’t see what purpose menstruation serves. Although there remains a link between fertility and menstruation, that link has gotten weaker and weaker. The purpose behind menstruation seems to be coming into question. Margie Profet, an evolutionary biologist, has described menstruation as an adaptation. It is not simply the by-product of the uterus preparing for conception, it serves another purpose.

Her theory is based on the way blood reaches the endometrium lining, and the quality of blood that is brought there. There are three spiral arteries which bring blood to the endometrium. Twenty-four hours before menstruation begins, the arteries constrict and the blood flow stopped. The endometrium lining dies because it is deprived of blood, and the oxygen carried by the blood. The arteries then open again and blood rushes to the endometrium lining. The period starts when the blood pushes against the dead endometrium layer until it bursts through. This blood, is not like blood found in other areas of the body, because it does contain far fewer platelets which cause blood to clot or coagulate. Profet believes that these two aspects of menstruation point to a biological design toward menstruation. It is too intricate, too distinct, it appears to have formed in response to another need. She understands menstruation to serve a purpose other than

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reproduction. But it wasn’t until the 1980’s that anyone in the biological sciences had seriously study menstruation, and actually questioned why women menstruate.

Profet came to the conclusion that menstruation was a very energy consuming process. It’s expensive, burning a lot of calories, iron, and other nutrients. It also limits the period that women are able to conceive children, and is a constant tearing down and building up the endometrium lining. She asked why the body would spend so much time and energy preventing reproduction and creating waste, when evolution has shown a biological insistence on reproduction? Her hypothesis was that menstruation was an extension of the body’s immune system. That it was a way for the uterus to cleanse itself, and eliminate pathogens. The body uses blood in order to do this, Profet states, because blood carries the body’s immune cells.

Needless to say, Profet’s thesis gained immediate attention. Again we turn to Beverly Strassmann, who took up Profet’s proposition enthusiastically and seriously. Based on Profet’s theory, Strassmann (1996) noted that the uterus should contain more pathogens before menses, and far fewer after cycles. She found instead, that there were actually far fewer pathogens in the uterus before menstruation than any other time. So, Strassmann asked, if not a defence mechanism, why menstruate? Instead of finding menstruation to be wasteful and expensive in terms of the body’s energy, Strassmann found menses to be an inexpensive way for the uterus to maintain fertility in comparison to having a perpetually active endometrium. She states that the spiral arteries are the result of the placenta’s need, and that the blood is simply the by-product of the system, nothing more. Strassmann therefore, concluded that menses is an inexpensive way for the body to optimise reproduction ability, and serves no other purpose. For some women,
the increase in reproductive technologies, the increase in age before having children, or
the belief that one may not ever choose motherhood, has allowed them to view
menstruation differently, and ask the same questions that Profet and Strassmann have.
They sense that menses may be more of an accessory to reproduction rather than a
necessity.

Coutinho and Segal explain that the Pill was created and marketed to mimic
menstruation because it is manufacturers felt it was the correct choice in approaching this
new form of birth control. They explain that there was no scientific or medical basis on
which to base this decision, and that they had devised a method for women to “stop
menstruating and, at the same time, to rid themselves of Premenstrual Symptoms”
(Coutinho and Segal, 1996: 122). Menstruation, they explain, can be suppressed and
long-term ovulation inhibited for months or even years, through the continues use of
contraceptive pills. Negative reactions to their approach, they suggest, result from a fear
of what is not considered natural. and a belief that what is natural is good for you and
should not be questioned. They explain, “instead of recognising the uselessness of
periodic bleeding some doctors and scientists still seek to attribute advantages that it
might bring about” (137). like Profet whose argument they consider to be “based more on
superstition than science” (142). What is particularly interesting is that in both the Globe
and Mail article and Coutinho and Segal’s book, the reasons women and society are not
yet prepared to give up menstruating, is a result of well-intended, but poorly reasoned
cultural beliefs. Their research and conclusion, however, are lacking attention to cultural
inhibitors. They present their work to be only shaped by scientific “fact”, of course. If
menstruation was celebrated by society, however, the questions these researchers have
asked, would be irrelevant. The creation of a belief that menstruation can and should be suppressed is a result of more than biological research, it is a translation of biological processes into a specific cultural logic which views menstruation as excessive.

In many ways, choosing to disengage from one’s menstrual cycles, choosing to suppress one's cycle, is a form of resistance. These women are acting on their own needs and circumstances. It is their agency and interpretation of menstruation. We can also come to question the concept of what a “natural” menstrual cycle is. Nora explains that she does not feel that she experiences her “natural” menstrual cycle because she has been using the birth control pill for most of her menstruating life. Proponents who believe suppressing menstruation is good, at least for some women, destabilise common ideas of what a natural menstrual cycle is by using Strassmann’s work. As more and more women enter menstruation and quickly turn to reproductive technologies which affect the regularity of the menstrual cycle, what is normal and expected from the experience of menstruation will change. The logic of suppressing menses is tied into late 20th century ideas that bodies and biology shouldn’t limit people. We should be able to control it. As many women have felt victim to their bodies, controlling menstruation is an important, empowering choice.

But what about that 19 % of women who would choose to keep menstruating? Why would these women make this decision? For some the link between menstruation, fertility and womanhood is very strong and important to them. Christine explains that many women come into her office wanting to take cyclical estrogen therapy, so that they may continue menstruating (by their choice). Their cycle is just really tied up in their assessment of who they are. While other women do not necessarily place an important
value on fertility, or believe that menstruation makes them "Women", they still place an importance on menstruation. It allows them to feel their body working. Menses becomes linked to ideas of cleansing and releasing impurities. For others, the concern lies in the unnatural control of the body, it's just the stupid technology taking over, explains April.

Whatever the choices, they are varied. It is clear that menstruation is not a universal experience. It is processual, changing with age and history. It is also part of both public and private discourses, traversing the boundaries of the two. Women's perceptions and menstrual practice are embedded in both their cultural and physical experience of menstruation. The relationship between menstrual ideology and praxis in the lives of women living in south-western Ontario is a relationship of power and change, with women being the key agents in these relations. Perhaps in 20 years perceptions and technology will have changed, and fewer women will be menstruating. What will the feminine hygiene industry do? What will menarche be understood as? What kinds of issues will women centre on in negotiating their relationships with their bodies and the world around them?

For me, the perfect menstruation is a celebrated one. It does not have to define women universally as "Women", because this celebration would acknowledge the diversity of female bodies, gender roles, and bodily experiences. In my perfect menstruation there would be no commercial menstrual care products, but there would be a great selection of choices in caring for menses. Safe and biodegradable tampons and pads, cloth pads and the Keeper, or you could just bleed where you choose to bleed. Women could regulate or suppress their cycles, or they could take a vacation whenever it
was that they began to menstruate. Moontime, biology, ritual, common sense, whatever a
women wanted, could be practised and believed.
3.5 Conclusion

In my first year of university I developed an interest in reproduction: the ways different cultures and societies practice, approach, and understand women’s reproductive biology. When I came into the program at Concordia I knew that that was what I wanted to study. In reading the anthropological literature with this theme in mind I came to realise that studies of menstruation did not seem to have been affected by the critical perspectives that interested me: bringing in history, political economy, agency, and recognising differential relations to power. What I found in previous studies of menstruation was that focus was placed mainly on menarche, a young women’s first menstruation, and on menstrual taboo. After conducting a more thorough review of the literature I found several absences in these studies and was excited at the prospect of filling them.

In previous studies there was little or no mention of menstruation as material culture. There was no acknowledgement that commercial menstrual care products, as well as non-commercial menstrual care products, do exist and can have a profound effect on a woman’s experience of menstruation, as well as a community’s understanding of menses. Within anthropology, menstruation had not been acknowledged as part of the global politics, even with the existence of an $8 billion feminine hygiene industry.

I also found that menstruation itself, menstruation as a process or experience, had not been included or acknowledged in these studies. This is largely a result of their entry and focus being isolated to the level social structure. They did not include women’s experiences and understandings of menstruation, and by extension, women’s bodies. For me, this absence has lead to assumptions regarding how menstruation is experienced (that
it occurs every 29 days, lasts five days, for the whole of a woman’s menstruating life

time), and that this experience is universal. These assumptions are not supported by the

literature on menses found outside anthropological discourse. Furthermore, this absence

communicates to others that the experience of menstruation is superfluous to how

menstruation is understood by society and women. I contend that experience is

contingent on historical and cultural context, and further, that the experience of

menstruation plays a role shaping cultural definitions of menses.

Lastly, because women’s experience of menses was absent in previous studies, focus

was placed on descriptions of the cultural institutions which shape menstrual

beliefs. They did not include descriptions of how menstrual taboos are lived through, or

present the complexities with which cultural practices are experienced. In this way, women

were not treated as agents or actors in shaping menstrual beliefs and practices.

In looking at these absences, it was clear that the discipline of anthropology itself

sustained and extended western ideological beliefs regarding menstruation. I began to see

that menstruation could also be a tool in deconstructing anthropological knowledge. My

goal at this point was to situate, historicise, politicise, and publicise menstruation as

both experiential and ideological.

I wanted to approach menstruation differently, using women’s experience as the

point of entry. So I asked myself, what is the relationship between menstrual ideology

and praxis in women’s lives? What emerged from approaching menstruation in this way

was a concept of menstrual culture: the point at which menstrual ideology and practice

meet, within women’s experience of menstruation. I have used the notion of menstrual

culture as a space to discuss menstruation as processual, experiential, dynamic,
contextual, and material. Furthermore, the concept of menstrual culture allowed me the analytical space to discuss menses as part of both the public and private domains of society.

The use of the public/private dichotomy has been an important methodological tool in the analysis of menstrual culture. Structuralists have used this dichotomy to define and categorise the underlying structures of societies. It does not necessarily reflect the experience and process of daily life. The private domain generally denotes what is considered domestic: the household, reproduction (menstruation), and childcare. It is largely associated with women. The public domain includes politics, economy, and the creation of social structure and culture. It is generally associated with men and positioned in this structural framework to be superior to the domestic or private domain.

It is my opinion that these domains are not mutually exclusive nor necessarily separate. I approached this dichotomy in order to transcend it. I wanted to present menstruation, which is generally associated with the domestic domain, within public discourse.

My intention in this thesis was to collect what Lila Abu-Lughod (1992) calls “ethnographies of the particular”. She describes this “as telling stories about particular individuals in time and space”. It’s a focus on how culture is practised and negotiated. It is not so much a focus on micro relations, but rather an acknowledgement that culture and both local and global relations of society are played out at the individual level. Focus is placed on experience, rather than descriptions of cultural institutions and activities; asking individuals what they do, how they do it, why they do it, and how they feel about what they do.
My fieldwork entailed researching the feminine hygiene industry through literature reviews, the internet, magazines and TV advertisements, as well as interviewing the owners and managers of different stores in terms of the sales, merchandising, and general perceptions of menstrual care products. Also, I looked at sex education tools and kits, biological explanations of menstruation, and interviewed some doctors and nurses. I conducted survey work by way of a brief and anonymous questionnaire with 100 women of different ages and ethnic backgrounds regarding their choices and perceptions of menstrual care products.

I also conducted interviews with 18 different women regarding their menstrual history with the use of a basic questionnaire. This work provided an important base in understanding the possible range of experiences and beliefs women could have regarding menstruation and their own menstrual cycle. The women also filled out the menstrual care product questionnaire which was kept with their interviews.

After conducting this part of the research I began conducting life history interviews with six different families of women. These interviews were intended to be the focus of my analysis and have been included in the thesis in the form of life histories. I chose to use families of women for two reasons. The first was based on the assumption that menstruation belongs to the domestic domain, and therefore is important only within the household and familial relationships between women. I wanted to present experience and perception of menstruation as complex realities, and in order to do so I needed to present the complexity of the household and the mother-daughter relationship. I knew that by using the life histories of families of women, the intricacies of the household could be presented as contradictory, diverse, and part of both public and private domains.
and therefore manifold. The second reason for this approach was to illustrate the
processual nature of menstruation. I wanted to present menstruation as an experience and
concept which changes as society changes and is therefore contingent on history. Also,
women's experience of menstruation changes as her body changes, as she ages, as well as
her roles in life change, through different work experiences or pregnancy for instance.

I have chosen to present four of the family histories in the thesis. I chose the
families based on the range of experience they illustrated, on the comfort they had in
talking about menstruation, and on how well each family complimented the other three.
In the end, I chose a relatively homogeneous group of women, and this choice was not
coincidental. I wanted to illustrate the diversity in experience, belief, and practice that
could exist within a small and somewhat similar group of women.

The life histories that are presented are structured by my methodological and
theoretical approach to menstruation. Each life history is the result of anywhere between
one and four interviews and followed both formal (with the use of the aforementioned
interview questionnaire) and informal interview structures. Each woman also filled out a
menstrual care product questionnaire and was given a notebook in which to add any
additional information they had remembered after the interview, and to write the
experience of a current menstrual cycle. The life histories presented are therefore, a
compilation of these different research techniques.

The interviews did not follow in the same path in which they are displayed. I
structured the life histories in order to show: (1) The importance of menstrual care
products in shaping women's perceptions and experiences of menstruation. (2) The
processual nature of menstruation: that cycles change; that women's bodies and their
perceptions of their bodies change. (3) The embeddedness of menstruation in all other aspects of women's lives. In discussing menstruation, women did not isolate their experiences and beliefs; these were contextualized. By using women's experiences and understandings of menstruation as the point of entry into menstrual culture, it is clear that in everyday life, menstruation cannot be isolated. It is part of all the different aspects of women's lives: work, pregnancy, relationships, family, sexuality, and finances. (4) Information that may seem to have little to do with a woman's menstrual cycle was included because, in general, the women involved in this study presented themselves in this way, as whole individuals rather than simply as menstruating women. For many, menstruation was just a tiny part of their lives, and I wanted to acknowledge this appropriately. And (5) I understand the life histories to be a valuable source of knowledge regarding women's bodies and women's health and I felt it was important to present them in a format that would be enjoyable and readable for a wider audience. I wanted to make my analysis of menstrual culture accessible.

What resulted was an incredible richness of data contained within the context of the life history. This has been the main intention of my project, to employ current critical approaches in theory and methodology to an area of study that has not been subject to them. I wanted to illustrate the different kinds of knowledge which emerge from doing anthropology differently, from approaching subject matter through the experience of individuals. I have been able to present menses within the complexities of the daily lives of ordinary women, because menstruation, ideologically or biologically, is not a straightforward process. It is part of the dynamic and complex realities of women's
experiences. And so, the life histories present readers with an astonishing amount of data, which had always been my intention to present in full.

This thesis has pointed to the need for further research. The life histories especially, suggest directions for future directions in research. For example, I would have enjoyed focusing an entire thesis on the relationship between women, their bodies, and their biology; to have extended the last chapter. I also found the way women spaced their lives fascinating. When women discussed themselves as bodies they presented anecdotes and specific moments in time. Otherwise, in describing their lives as passing, they did not include their bodies as part of that experience. Further, the experience of aging, in a particular context, is also a possibility for future studies. What it feels like to grow old, experience an aging body, in a western context and as a women. Women’s approaches to their sexuality and fertility were also a recurrent theme throughout the life histories that could be further focused on. Further, women’s experiences and opinions of the medical community, and their relationship to this community, was a topic often raised by the women I interviewed. And, lastly, The roles that males can play shaping menstrual culture are important to document and include in studies of menstruation, and I hope to do so in the future. For the purpose of the thesis I decided to keep my analysis specific and direct because I did not want to edit out or overshadow the diversity and abundance of knowledge, experience, and information offered in the life histories. My analytical approach to menstrual culture, however, is present in each the 14 life histories in the thesis. I chose to explore two aspects that I had found absent in previous studies of menstruation: the experience of western menstrual taboo, and the experience of living a biological body.
It took awhile before I was comfortable using the word “taboo” because I feel it is too often associated with menstruation without being qualified or defined. I am also certain that many of the women in the thesis would not agree that their actions and beliefs regarding menstruation were a response to specific menstrual taboos, but rather see their actions as based on “common sense”. You don’t want menstrual blood to leak onto your clothing because it stains and makes you look dirty, as a coffee stain would. However, I do believe that the rules and regulations regarding menstruation are a response to a particular symbolic order in which specific aspects of menstruation are, as Mary Douglas states “matter out of place” in certain social spaces.

In turning to the public/private dichotomy, it is clear that certain aspects of menstruation have entered into public discourse. However, the experience of menstruation is not included in this discourse. I contend that what is taboo within this particular western context is a body out of control. Menstrual blood and menstrual cramps that affect a woman’s daily life are matter out of place within the public domain because they symbolise a body that is not controllable. The women in my study negotiated and navigated the boundaries between the public and private domains, actively participating in the construction of these domains, and experienced menstruation within the confines of this western taboo.

The female body has, until recently, been under theorised and embedded with assumptions. I contend that the majority of the women in my study have come to understand themselves and their bodies through the precarious freedoms offered by the increasing amount and sophistication of reproductive technologies. In answering my question regarding the perfect way to menstruate, women’s responses were focused on
their bodies, rather than on changing social structure. It was clear that the majority of women I interviewed found freedom in separating their identity from their female physiology. What is interesting was that I chose to study menstruation through women’s experiences in order to avoid constructing the mind and body as separate entities, and yet I have returned to the Cartesian mind/body split. The abstract structural framework which was created in order to analyse underlying social structures can be seen in the life histories being played out at the individual level.

In returning to my question, what is the relationship between menstrual ideology and praxis in the lives of women living in south-western Ontario?, this relationship is a continual process in which women play active roles. It is dynamic, political, processual and contingent on history and context. Emerging from the life histories was a sense that bodies are increasingly perceived as alterable and controllable. 77 year old Claire Rowland could not imagine a world in which women could choose to stop menstruating, still remaining fertile. Her 19 year old grand-daughter Lindsay explains, when I first started menstruating I think I found it more of a hassle because I wore pads which are uncomfortable. Then I didn’t want to do things or be very active. Sports weren’t easy with a pad. But now, it doesn’t affect me. And when I didn’t have it, because I stopped menstruating for a year, I didn’t miss it. There wasn’t anything missing. There wasn’t a lot of extra time all of a sudden. It just wasn’t happening and I wasn’t connected to it. I’d be really happy to stop menstruating. I’d stop menstruating through a pill as long as it was healthy and there were no side effects. I don’t see what purpose menstruation serves.
Appendix
**Questions for interviewing menstruating women**

1) Please describe for me what menstruation is, pretending I have never heard of it before.

2) Can you remember how old you were when you were first told about menstruation?

3) Can you tell me about the first time you began to menstruate?

4) Who did you first tell? What did they say to you?

5) Did you feel that you had become a woman?

6) How would you describe the perception of menstruation within your household growing up?
   - among your friends?

7) Did you do anything to celebrate?

8) After the first time you menstruated, was your menstrual cycle regular?

9) Could you describe for me, how you experienced menstruation when you were younger?

10) Are you comfortable talking about menstruation?

11) Is it a common topic of conversation in your life?

12) Does it make a difference if you are talking to men or women?

13) Could you please describe for me, perhaps thinking of your last cycle what you experience both physically and mentally before, during, and after menstruating. How would you describe menstruation to feel like to someone who has never experienced it?

14) How have your cycles changed?

15) Does menstruating effect your ability to concentrate and perform your daily activities?

16) Does being on your period affect the way you feel about yourself, the way you look, the way other perceive you?

17) Do you rearrange your schedule to avoid anything in particular when you know you’ll be menstruating.
18) How would you describe PMS to someone who had never heard about it before?

19) Do you experience headaches, tenderness of the breasts, swelling, acne? Or does your mood change before you menstruate?

20) Do you feel you have or do experience PMS? If so, what do you do about it? (products, foods, exercise, etc…)

21) Are you taking the birth control pill, or any other form of contraception that affects your menstrual cycle? If yes...-Did you start to take the pill in order to regulate your menstrual cycle?  
  A) Do you notice a difference in your menstrual cycle  
  B) when you are on the pill and when you are off?

22) Do you think that your menstrual cycle should be regular?

23) Have you heard of activities that menstruating women should not do?

24) Do you have any personal menstrual rules, ex. won’t carry a pad or tampon visibly to the washroom?

25) (if comfortable) Would or do you have sex when you are menstruating? Why or why not?

26) Are the men in your life (father, brother, son, partners, friends, etc…) involved in any way, in you menstrual cycle? If yes, how?

27) How do you feel about your actual menstrual blood? Is it something you thing about?

28) How would you feel if someone saw a blood stain on your clothes or bed sheets, or bloody tampon or pad that was yours?

29) Where would you say you get the most information about menstruation, products, remedies. etc…?

30) What kind of menstrual care products were you first introduced to? By whom?

31) Who bought them?

32) Are you now comfortable buying pads and tampons?

33) Do you have any idea how much money you have spent, or will spend in a month for pads or tampons?

34) Is it something you budget for?
35) Are you concerned about the prices of pads or tampons?

36) Do you buy different absorbencies for each menstrual cycle?

37) Where do you usually buy pads or tampons?

38) Do you pay attention to Pad and tampon advertisements.

39) Do you have a favourite brand? If yes, why?

40) Could you tell me what pads or tampons are made of? Is this something you think about?

41) Are you concerned about the safety of this products, particularly in terms of Toxic Shock Syndrome?

42) Have you ever think about using alternative products, reusable pads, cloth pads, etc.?

43) How do you feel about menopause?

44) (if already menopause) Could you please tell me how you experienced menopause, both physically and emotionally?

45) How do you understand your/our society perceives menstruation today?

46) Do you feel there is a change in this perception since you first began to menstruate?

47) Are there aspects about menstruation you would like more information about? Was there ever a time you found it difficult to find information about menstruation?

48) What would be your perfect way to menstruate?

49) If you had a choice, to menstruate or not to menstruate (and would still be able to have a child), what would you choose?

50) Has this interview made you think or talk about menstruation in ways you had not before? If yes, how?
Menstrual Product Questionnaire

Thank-you so much for filling out this questionnaire. Your time and effort is greatly appreciated. The information that you provide me with will be used toward my masters thesis in Anthropology at Concordia University. My thesis is a study of women’s experience and perception of menstruation. This questionnaire will remain anonymous. However, if there are any questions that you are not comfortable with, do not answer them. Please keep in mind, the more description you are able to put into your answers (which I know means more time toward an already lengthy questionnaire), the better for me. Any thing you would like to tell me about you menstrual history will be of great interest and importance to my study. Of course, if you have little time, even the briefest of answers will be more than useful. Thanks again.

Date of birth:
Age of first menstruation (brief description):

Are you still menstruating? If not, how and when did your cycles stop?:

Additional personal information (family, children, jobs, relationships....):

1) What kind of menstrual care products were you first introduced to? (if you were not living in North America, please specify location. If moving to Canada affected your choice of/in products, please include this information where appropriate.)

2) Do you remember how, and by whom, you were instructed to use these menstrual care products? If so, please describe.

3) Do (Did) you use tampons? Why or why not?
3a) If you have, what was it like when you started to use them? (were you nervous, excited, indifferent?)

3b) If you have used tampons, and then stopped doing so, why?

4) Who first bought your menstrual care products?

5) How do (did) you feel buying tampons or pads (think of this question throughout your life, has your feelings toward buying menstrual care products changed?)

6) Do you have any idea how much money you have spent, or will spend in a month on pads or tampons?

7) Is it something you (would) budget for?

8) Do (Did) you buy different absorbencies for each menstrual cycle? Why or why not?

9) Do (Did) you have a favourite brand? If yes, which one and why?

10) Will (Did) you use no name brands of pads or tampons? Why or why not?

11) Do (Did) you often “try out” new menstrual care products?

12) What do (did) you look for in menstrual care products?

13) Where do (did) you usually buy pads or tampons? Why?

14) Are (Were) you concerned about the prices of pads or tampons? Why or why not?
15) Could you tell me what pads and tampons are made of? Is this something you think about?

16) Are (Were) you concerned about the safety of these products, particularly tampons?

17) Do (Did) advertisements work to interest you in certain products? If yes, which ones?

18) Do (Did) you pay attention to pad or tampon advertisements?

19) Have (Did) you ever thought about using alternative products, reusable pads, cloth pads, etc.? Why or why not?

20) How do (did) you feel about your menstrual blood? Is this something you think about?

21) Are there aspects of menstruation that you would like to know more information about?

22) If you had a choice to (have) menstruate(d) or not to (have) menstruate(d), having no connection to fertility, which would you choose and why?

Additional comments, anecdotes, information.....
Questions For Premenstrual Girls

What are your hobbies?
What do you want to be when you grow up?
What do you think of boys?

1) Can you tell me what menstruation is?

2) Do you remember the first time you were told about menstruation, or had any idea that it exists.

3) Have any of your friends started? Do you know what happened their first time.

4) What’s the perception of menstruation among your friends and classmates?

5) Are you comfortable talking about menstruation?

6) Does it matter who you are talking to?

7) Do you know what PMS is?

8) Do you know what menopause is?

9) What do you think menstruation will feel like?

10) Are you looking forward to starting?

11) Do you think you’ll feel like your becoming a women.

12) Who will you tell?

13) Do you think others will see you differently once you have started.

14) What kinds of menstrual care products do you think you will use?

15) Do you think you will be comfortable buying them?

16) What do you think the products are made of?

17) Are you worried about being safe?

18) Have you seen tampon and pad commercials? What do you think of them?

19) How do think menstruation is thought of in society?

20) Do you think menstruation is a good or bad thing?
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