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Menstrual Rhetorics

and Girlhood Culture



♥ *power* ♥

Talking periods for and with all bodies that menstruate.

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Cover Art: at the top is a black bar with the following text in a serif font: “Summer 2025,” “Peitho,” and “Vol. 27.4.” Underneath that are the words “Menstrual Rhetorics” in a large handwriting font (white with light turquoise offset), and under that, “and Girlhood Culture” in a light orange font. On the right side of the image is an assemblage of red flowers on a menstrual pad. On the left side, a circle with two dark coral drops in the middle and a # sign at the top of the circle. Toward the bottom of the image is a calendar with drops on specific dates indicating a menstrual period. At the bottom of the image are the words “PERIOD power,” and “Talking periods for and with all bodies that menstruate.”

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Introduction: Menstrual Rhetorics and Girlhood Culture

Jen Almjeld and Sarah Hagelin

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Aunt Flo. That Time of the Month. The Curse. Crimson Wave. We've dedicated so many words—or sometimes none at all—to avoid naming a biological reality that affects roughly half of the population. Menstruation has long been shrouded in mystery, fear, and shame and when we bother to talk about it, we do so in coded language or in jest. Periods are rarely something taken seriously or discussed critically. Neither, unfortunately, are girls and their lived experiences.

This special issue brings together an often-marginalized topic—menstruation—and a group of people marginalized by both age and gender—girls—to consider ways an event often imagined as a rite of passage for girls has widely varying impacts based on differences in gender, race, socio-economic status, religion, familial history, and any number of other factors. The story of periods is not one story. Like so much feminist rhetoric, period rhetorics are embodied, intersectional, evolving, and controversial.

While menstruation is not directly tied to girlhood, as many trans and nonbinary bodies menstruate, popular culture generally links the two. As scholars interested in screens, and fond of discussing gender representations online and in media, we first came to this topic with the release of the 2023 adaptation of Judy Blume's *Are You There God? It's Me, Margaret*. Our shared interest in film studies, feminist rhetorics, and social media spaces made us interested in evolving representations of menstruation as both liminal space between adolescence and adulthood and as a site of trauma and fear. Soon we were seeing periods and men-

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Sarah Hagelin is a professor of English at the University of Colorado Denver, where she offers courses in film history, film theory, gender studies, and popular culture. She is the author of *Reel Vulnerability: Power, Pain, and Gender in Contemporary American Film and Television* (Rutgers University Press, 2013), as well as essays in *Signs*, *Feminist Media Studies*, and *The Journal of Popular Culture*. Her most recent book, co-authored with Gillian Silverman, *The New Female Antihero: The Disruptive Women of Twenty-First Century Television* (University of Chicago Press, 2022), was awarded the Susan Koppelman Award for Best Multi-Authored Book in Feminist Studies. She is affiliated faculty in the Women's and Gender Studies Program and works regularly with CU Denver's Center for Faculty Development and Advancement, where she runs mentoring circles for new faculty members.

acing female bodies everywhere. With the reboot of *Mean Girls* (Samantha Jayne and Arturo Perez, Jr., 2024) and the investigations of female subjectivity in *Barbie* (Greta Gerwig, 2023) and *Poor Things* (Yorgos Lanthimos, 2023), we see Hollywood grappling with bodies marked female. On the small screen, shows like *Black-ish* (2014-2022), *Sex Education* (2019-2023) and *Anne with an E* (2017-2019) include episodes focusing on first periods or discussing menstruation from the point of view of a young person. In fact, a recent viewing of the Netflix series *Pulse* featured a 9-year-old with toxic shock syndrome who, embarrassed to tell her parents she had started her period, got a tampon from older girls and left it in for days. Once you start seeing menstrual rhetorics and paying attention to what we tell kids about periods—that they are either magical and life-affirming or dangerous and threatening—you can’t unsee it.

Mainstream media has a long history of portraying menstruation as either terrifying and monstrous, as it is in *Carrie* (Brian de Palma, 1976) and *The Exorcist* (William Friedkin, 1973), or as a joke that others women and girls while treating the male body as “normal.” The growing visibility of trans children and their fight for gender-affirming care further complicates notions of maleness and femaleness as related to menstruation and tied to biological sex, making the “period wars” an especially fruitful site for feminist cultural analysis at this moment. With legal and political battles raging around definitions of gendered bodies and childhood itself, feminist work on girlhood is necessary. Female-identified people of all ages, as well as trans and nonbinary folks, face increasing bodily surveillance and discrimination, especially given the recent right-wing takeover of all three branches of the federal government. Our bodies are being regulated in terrifying ways by courts and legislatures and the ability to menstruate is often central to debates about how bodies are gendered as well as which bodies “matter” (Butler, 2011). Importantly, how menstruation affects trans and nonbinary kids and adults is both central to such political discourse and also curiously under-studied. While our culture seems happy to surveil, sell to, and offer advice on a myriad of body issues for girls and women (weight loss, skin care, hair maintenance, etc.), talking about menstruation remains largely metaphorical and often stigmatized.

Nearly two decades ago, girlhood scholars Natalie Adams and Pamela Bettis explained that “Girls’ Studies scholars, who often draw from mass and popular culture in their research, are perceived as engaging in less-weighty feminist scholarship” (2005: 3). Just three years later, the *Girlhood Studies* journal was established in 2008 by Claudia Mitchell, Jacqueline Reid-Walsh, and Jackie Kirk and the journal remains dedicated to girls’ experiences, practices, and literacies. A decade earlier, rhetoric scholars worked to reclaim the literary contributions and literacy practices of women (Glenn 1997; Ritchie and Ronald 2001), but the relevance of girls’ texts as objects of study often received less consideration. This remains particularly true of menstruation literacies, practices, and depictions related to girlhood.

Recently, girls and periods turned out to be a rich space of inquiry for Almjeld and the 20 undergraduates in her fall 2024 Feminist Rhetorics course when they created an exhibit for [Girl Museum](#). This virtual museum, founded in 2009 by Head Girl and historian Ashley Reemer, is run by a global team dedicated to “advancing girls’ rights today [and] sharing stories that celebrate girls and their contributions” (“Impact”). In

a collaborative assignment about girls and menstruation, the students created the Girls.Period exhibit which went live in May and covers biological processes of the menstrual cycle, popular—and often harmful—representations of periods, pink tax implications for menstruation, and the myths and shaming associated with periods. Without much direction, the 18 cis-female and two cis-male students intuitively understood both to the power of personal, lived menstruation experiences as well as the lack of real information available to menstruators, the casual shaming and disgust levied at menstruating bodies, and the discomfort most feel in discussing the topic.

This issue is a scholarly contribution to these sorts of discussions centered on girls and periods. The issue features eight articles that consider girlhood and menstruation from a variety of perspectives: in young adult literature, in online teen magazines, in healthcare, in activism, and as deeply personal, embodied experience. We see this issue creating space to talk seriously, critically, and from multiple perspectives about an experience steeped in cultural and political misunderstanding and misrepresentation.

The issue brings together scholars from different disciplines, each of whom investigates a unique aspect of menstruation in the social worlds of menstruators. An incredibly well-researched piece by **Lindsay Toman** and **R Hunsicker** offers an important overview of legal and medical barriers facing trans youth, particularly those dealing with often-unwanted menstruation. The piece positions menstruation as both a trigger for devastating gender dysphoria as well as a potential tool for gender identity affirmation for some menstruating trans youth and offers up menstruation as a point of connection for multiple genders, including cisgender women and girls, trans boys and men, and nonbinary people. Using one-on-one interviews with parents, healthcare professionals, and 10- and 17-year-old trans boys and nonbinary (AFAB) adolescents, the study examines how menstruation impacts gender identity construction, as well as explores young people's experiences navigating menstruation-related conversations with healthcare professionals. Amenorrhea (the absence of menstrual periods) is one of the health complications Toman and Hunsicker explore. It is also the topic of **Molly McConnell's** creative nonfiction essay investigating the liminal spaces of disordered eating and girlhood. This moving and insightful autobiographical account traces the ways the absence of a period may serve as a “red line” for knowing when disordered eating had gotten out of control. This embodied tale considers ways periods might serve as physical and emotional signals when things might be amiss and the role menstruation plays in some people's self-perception and sense of worth.

Shifting to information available to menstruators, **Melissa Stone** and **Hannah Taylor** consider the role of menstruation manuals—produced both by companies marketing menstrual products as well as activists and education experts—in the physical and social development of girls, particularly in regards to menarche (one's first menstrual cycle). In particular, the authors consider menstruation manuals' “complicated existence as artifacts that can at once be helpful apparatuses for discovering one's body and norming devices that position menstruation management as a one-size-fits-all experience.” Taylor and Stone see such manuals as agentic texts actively shaping girls' lived experiences of menstruation and offering limited options for the “becoming of girls.” In a similar vein, **Risa Applegarth** compiles an archive of 17 digital menstrual activism

toolkits from a variety of organizations—educational, religious, activist—and makes a powerful case for the way these resources scaffold and support the embodied performances of young activists. Using the rhetorical genre studies concept of *uptake*, Applegarth suggests that these toolkits can empower activists of all ages to gain embodied expertise. This expertise, with its roots in experience, vulnerability, and agency instead of the more conventionally-valued academic training and age, allows girls to claim their identities as activists and as agents.

LA EL connects social media and filmic representations of menstruation to an explicit social justice schema, exploring menstrual justice in the context of Gaza, using a disability justice framework to call for an end to occupation and the ungendering of menstruation. Analyzing a variety of social media posts alongside the 2021 film *Farha* (Darin J. Sallam), this groundbreaking essay suggests that both the rhetorics and representations of menstruation cannot be separated from a demand for justice for all people. By elevating Palestinian voices on social media, EL contests the silencing of those who suffer under occupation. And, by insisting that (contra the commonplace description of menstruation as the onset of womanhood) menstruating girls are children, not women, they combat the erasure of Palestinian childhood so endemic in Western media. The relationships between childhood and menarche are also at issue in **Olivia Kumiko McDuffie's** essay on the 2022 animated film *Turning Red* (Domee Shi) in conversation with the 1976 puberty-horror classic *Carrie* (Brian De Palma). McDuffie's insightful reading of these films shows that while both films associate the menstruating body with fear and abjection, adolescent protagonists Carrie White and Mei Lee also find in menstruation a source of primal power. This timely essay argues that *Carrie's* central character succumbs to power as destruction while *Turning Red* offers a different, hopeful vision. This vision places menstrual communities at the center of a more positive form of representation for menstruators of all kinds.

Kelsey Hawkins considers the way negative associations with menstruation—stigma, shame, fear—shape the affective experiences of those who menstruate. Weaving memoir-esque feminist memory-work and critical discourse analysis, this innovative essay analyzes the online magazine *Rookie Mag* (2011-2018), uncovering the ways that “period talk” among and by girls allows young people to “do” menstrual girlhood. Hawkins highlights girls' digital rhetoric practices, which help them push back on gender norms and reimagine their relationships to the menstruating body. Such depictions and “period talk” has shifted over the years, and much of it has not. **Sarah LeBlanc** and **Kate White** consider generational shifts in depictions of periods in their fascinating textual analysis of popular girl-centric books and films from the perspective of Gen X MotherScholars both studying menarche and also simultaneously preparing for this moment with their own Gen Alpha children. This important contribution elucidates the messages popular media offers menstruators, particularly in ways menarche, or the onset of one's first period, is positioned as competition, as shared practice between women and girls and one hidden from boys and men.

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Articles

Triggering Affirmations: Trans* Adolescents' Experiences with Menstruation and Gender Identity Construction

Lindsay Toman and R Hunsicker

Abstract: Menstruation research has historically focused on cisgender girls and women, further perpetuating the cultural misunderstanding that only girls and women experience periods and the stigma surrounding bleeding. Trans-masculine individuals and nonbinary people who were attributed female at birth (AFAB) struggle with having a period because it is so often associated with girlhood. This paper uses data created by semi-structured, one-on-one interviews with the following three groups; trans and AFAB nonbinary adolescents, healthcare professionals, and parents of trans and nonbinary adolescents. The findings emerge as the following three themes; (1) menstruation solidifies decisions to transition, (2) menstruation triggers gender dysphoria, (3) healthcare professionals struggle with serving nonbinary people. It is our recommendation that conversations centered on menstruation must be made more inclusive so that the focus is on people who menstruate and not just girls. Developing strategies to create conversations surrounding menstruation that reflect the diversity of people who experience menstruation can build more positive relationships between periods and those who have trans and/or nonbinary gender identities.

Keywords: [trans](#), [nonbinary](#), [adolescents](#), [menstruation](#), [healthcare](#)

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Lindsay Toman (she/her) is an assistant professor in the LGBTQ Studies Department at Colgate University. Lindsay completed her doctoral work in the spring of 2021 at Wayne State University (WSU) in the Department of Sociology where she studied gender inequalities, LGBTQ health, and the medicalization of transgender adolescents. She received her M.A in Sociology from East Tennessee State University, and her B.A in Sociology from Albion College. Most notably, she earned a National Science Foundation Doctoral Dissertation Improvement Award in 2019 for her dissertation, "Reconnecting Sex to Gender: An Examination of the Medicalization of Transgender Adolescents." Dr. Toman is also an author of the book chapter, "You're going to want to freeze your eggs": Conversations Surrounding Fertility between Medical Providers, Parents, and Transgender Adolescents, which is featured in *Advances in Gender Studies* (2021). Other publications include *Navigating Medical Culture and LGBTQ Identity* (2019), and "Part Triage, Part Gatekeeping": Qualitative Assessment of Prescribing Gender Affirming-Hormones (2020).

R Hunsicker (e/they) is an asexual, arospec, and trans writer from Upstate New York. They are an educator, activist, and scholar whose passions lie in asexuality, trans embodiment, LGBTQ health, and Black feminist theory. E studied Women's, Gender, and Sexuality Studies, LGBTQ Studies, and Peace and Conflict Studies at Colgate University, and will be attending the Gender Studies PhD program at Indiana University Bloomington this Fall. Eir poetry and essays can be found or are forthcoming in *AZE*, *Ace Community Survey*, *Allegorical Athena*, *The Colgate Portfolio*, *Peitho Journal*, and *Embodied*.

Introduction

According to the Williams Institute, there are approximately 300,000 people between the ages of 13–17 who identify as trans in the United States (Herman et al.). And since the average age of menarche is 12, menstruation is a topic likely to be incorporated into conversations with 13–17-year-old trans boys and old trans boys and nonbinary people who were attributed female at birth (AFAB) ¹ who have decided to medically transition. It is important that research uncovers the ways in which this growing population experiences menstruation in order to figure out how to establish positive support systems so that the younger trans and nonbinary populations are equipped with the tools necessary to navigate a healthy transition. Due to the history of connecting menstruation to femininity, periods can be especially difficult for trans masculine and nonbinary people. Research shows that menstruation is oftentimes subjugated by cisgender men, because it has persistently been regarded as a women's health issue (Englar-Carlson et al.) and trans men most likely adopt similar attitudes since menstruating reminds them of biological attributes that conflict with their gender identity (Chrisler et al.).

While the majority of previous research focuses on trans men, this paper illustrates the impact of menstruation on trans boys and nonbinary adolescents. Using one-on-one interviews with parents, healthcare professionals, and trans boys and nonbinary adolescents, this paper is dedicated to the investigation of the relationship between marginalized gender identities and menstruation, as well as the healthcare experiences associated with blocking periods. Our data shows that menstruation acts as a trigger for gender dysphoria, while simultaneously aiding in the affirmation of trans masculine identities. Additionally, we explore the difficulties nonbinary adolescents experience while receiving medical care and how transnormative beliefs within the medical institution shape their transition process. Transnormativity is defined as the “ideological accountability structure to which trans people's presentations and experiences of gender are held accountable” (Johnson 465-466).

Examining how trans and nonbinary groups experience menstruation helps us to gain insight into the nuanced connections between anatomical processes and gender identity construction. Furthermore, it can help identify ways parents and doctors might better support trans and nonbinary young people, as well as prompt the critical discussions needed to fill the gaps within healthcare.

Literature Review

Menstruation can be a distressing time for various groups of young people and the majority of past research has focused primarily on cisgender girls. In addition to the physical ailments experienced, such as painful cramps, headaches, and/or nausea, there are also many young girls who do not have access to sanitary pads or tampons (Parker et al.). And experiencing menstruation as a marginalized person includes

¹ For the remainder of the paper, we will refer to our sample as trans boys and nonbinary adolescents. However, it is important to note that the nonbinary adolescents we refer to were attributed female at birth (AFAB).

additional hurdles. On average, Black, Indigenous, and other people of color experience menstruation at an earlier age than white people, which causes BIPOC youth to confront physical and mental health concerns that may arise from having a period at younger stages in life (Schmitt et al.). Trans and nonbinary populations also face unique challenges when navigating menstrual cycles.

For trans masculine and nonbinary people, periods can be problematic because it is a biological process that is associated with girlhood (Pfeffer), therefore triggering gender dysphoria (Jessen et al.). Gender dysphoria is the persistent distress an individual feels, that is related to a strong desire to be a gender that was not assigned to them at birth (DSM, 5th edition). Furthermore, menstruation may cause trans masculine individuals to experience heightened levels of gender dysphoria because periods force them to come into contact with the anatomical characteristics, such as the vagina and/or period blood, that symbolically represent a biological connection to femininity (Frank). These deeply held societal beliefs, which perpetuate the relationship between menstruation and womanhood, can cause many trans masculine and nonbinary individuals to opt to medically suppress their monthly periods to alleviate the struggles associated with having a period.

Nevertheless, research demonstrates that 25 percent of trans individuals still experience breakthrough bleeding after a year on testosterone (Grimstad et al.). And with the administration of testosterone being the most effective way to implement amenorrhea, which is the blockage of menstruation, there is currently no way to help trans individuals permanently stop breakthrough bleeding or avoid the dysphoric experience associated with having a period (Grimstad et al.). Breakthrough bleeding not only forces trans and AFAB nonbinary people to experience menstruation, but it also exposes them to gendered social interactions associated with having a period. For example, purchasing menstrual products can be anxiety inducing.

In addition, the packaging of menstrual products is problematic because it often includes the female sex symbol and/or pink colors (Frank). This marketing further supports the cisnormative notion that menstruation occurs only in cisgender female bodies making the process of purchasing menstrual products dysphoric for some trans and nonbinary individuals. Buying tampons and/or pads can also make trans men and nonbinary people vulnerable to harassment, similar to the violence the trans community experiences using menstrual products in public bathrooms. The large gap between stall doors, the lack of trash cans in individual toilet stalls, and other structural designs of public restrooms have created a space where trans boys/men can easily be outed as trans when using menstrual products while in the men's bathroom (Lane et al.). Discovering a trans masculine person using a tampon can result in harassment and/or physical violence (Testa et al.). The majority of trans individuals who use men's restrooms report feeling unsafe while doing so, especially while menstruating (Chrisler et al.).

While research has offered a peek into the experiences of trans and nonbinary people navigating a period, past studies have neglected the intersection of race and/or ethnicity. Current research sheds little light on queer BIPOC experiences and, unfortunately, this study does not make any contribution (see further explanation in Limitations). Of the studies that center Black nonbinary and trans masculine identities, the major-

ity focus on external environments and gendered interactions experienced by Black and trans people, rather than internal, self-perceptions of one's gender (Nicolazzo 1186; Jourian and McCloud 739-740). Although it is important to understand how one's comfortability in social spaces changes with one's gender identity and expression, scholars have yet to extensively consider how internalized conceptions of Black manhood and womanhood impact one's understanding of their gender and menstruation (Nicolazzo 1182; Jourian and McCloud 739-740). Research on BIPOC communities could not only improve academic and advocacy understandings of trans and nonbinary identity construction, but provide the literature needed to promote cultural shifts within healthcare settings.

Research shows that there is still a very limited number of healthcare professionals that offer trans youth services due to a lack of trans-specific education offered throughout medical schools (Carnel and Erickson-Schroth; Schonfield and Gardner; Hunt). Less than thirty percent of healthcare providers feel comfortable treating trans and/or nonbinary patients who were attributed female at birth (AFAB) (Unger) due to a lack of education. More specifically, many OBGYNs have reported receiving zero training on how to serve trans patients and so would not be comfortable doing so (Lowik 115-116). Trans individuals also fear having an unprofessional or even hostile interaction with their medical provider (Francis et al.), which results in an unwillingness to seek care. Individuals who are reluctant to see medical professionals, in order to receive hormone replacement therapy (HRT), are currently left with little to no options in menstruation suppression, furthering the severity of their gender dysphoria (Carswell and Roberts). Trans individuals who are unable to receive HRT sometimes turn to oral contraceptive pills as a form of menstrual suppression therapy. This alternative has been found to be ineffective in causing and/or sustaining amenorrhea (Grimstad et al.). And with the Trump administration's attempts to ban gender-affirming care nationwide for trans youth under the age of 19, individuals seeking any form of menstruation suppression are experiencing barriers to care on an unprecedented scale (see Executive Order No. 14,187). Even urban hospitals with a history in providing trans health care, such as NYU Langone, UC Health, and VCU Health, among others, stopped providing gender-affirming care to trans youth in response to the administration's demands (Gonzalez; Goldstein; Reeves and Irizarry 2025; Simmons-Duffin). And as of March 2025, 27 states have enacted laws and policies which limit trans youths' access to gender-affirming care (Dawson and Kates). Five of these laws were passed in 2025, either banning or allowing medical professionals to deny gender-affirming medical care to trans individuals in four different states (ID House Bill 345, 2025; KS State Bill 63, 2025; KY House Bill 495, 2025; WY HB0164, 2025).

Methods

Using one-on-one interviews with parents, healthcare professionals, trans boys and nonbinary (AFAB) adolescents, this paper examines how menstruation impacts their construction of gender identity, as well as explores their experiences navigating menstruation-related conversations with their healthcare professionals throughout transition. The data, which was gathered in a large urban area in the Midwest region of the United States between 2020-2021, was collected using two different recruitment sampling strategies.

Recruitment Strategy

Before the recruitment was initiated, the first author explained her research interests to the executive director of a non-profit that served trans and nonbinary adolescents and their families. The executive director became a key informant by allowing the author to share her project interests directly with the families at an event. The first author was able to establish an institutional access point by volunteering for two years at the nonprofit that specifically served trans adolescents and their families. Once relationships were built and connections were maintained, a purposeful recruitment strategy (Daniel) was implemented. Parents were first approached about being interviewed and then asked if their child would be interested in participating as well. If parents and their child were both interviewed, albeit separately, parents had to sign a consent form that granted permission for their child to participate. Parents could also participate even if their child did not want to be included. Trans and nonbinary adolescents were only approached after one of their parents had given written consent. On the completion of an interview with a parent, a snowball recruitment technique was employed to increase the number of participants (Magnani et al.). The process was similar for healthcare professional recruitment.

To find potential healthcare participants, the first author used purposive sampling by reviewing web pages of healthcare organizations that specifically identified as LGBTQ+ serving institutions. Once potential healthcare participants were identified, they were contacted via email and/or phone. To increase the number of participants, the first author also used a snowball sample to help identify other healthcare professionals who might be interested in participating in the study. To provide the highest level of anonymity, adult participants were not requested to sign a consent form. The final line in the research information document explained that their agreement to complete the interview was also their consent to participate.

Inclusion/Exclusion Criteria

To be interviewed, adolescents were between the ages of 10-17 and had to have experience talking about a medical transition with a healthcare professional. It was not required that they had received medical treatments or taken medications for gender affirmation, but they needed to have experience discussing the process with a healthcare professional. Because of the unique hurdles that nonbinary adolescents experience in accessing medical services, only trans-identifying individuals were recruited initially, so as to not conflate the two communities. However, after conducting the first eight interviews with trans participants, it was evident that many of the younger individuals interviewed used both “trans” and “nonbinary” as labels. After the first round of recruitment, nonbinary individuals were added to the call for participants (the low number of nonbinary patients is discussed later in Limitations). Parents were included if they had a child who fit the criteria listed above. Lastly, healthcare professionals met the inclusion criteria if they had experience serving trans and/or nonbinary adolescents with transition-related care, which included but was not limited to; discussing transition, prescribing puberty blockers and/or gender-affirming hormones, or providing mental health support.

Data Sample

Using the three separate data sources helped to clarify meanings and build validity, also known as data triangulation (Denzin). Although responses are unique to their separate groups; they support one another and create a juxtaposition that tells a unified story (Chenail). The previously mentioned recruitment strategies created the following sample of 65 interviews: healthcare professionals (n=26; 13 physicians and 13 mental health professionals), parents of trans adolescents or nonbinary adolescents (n=21; 18 mothers and three fathers), and trans boys/nonbinary adolescents (n=18; 16 trans boys and two nonbinary adolescents who were attributed female at birth). While some of the trans boys also used nonbinary labels to describe themselves, we utilized the categories they wrote in their personal demographic sheet and whichever word they used most often to describe themselves.

The average age of the trans and nonbinary adolescent participants was 14.5 and all of them identified as white. The majority of the parent group also identified as white, aside from one Black woman and one Latina woman (their children did not want to participate). The healthcare professionals represented a wide range of medical specialties including pediatricians, endocrinologists, primary care doctors, licensed clinical psychologists, therapists, and licensed social workers. The sample was made up of eight cisgender men, 17 cisgender women, two trans men and one nonbinary person. All the healthcare participants were white, except for one Arab man and two Black women. The average length of experience serving trans and nonbinary adolescent patients was just above eight years, with the highest number of years practicing being 28 and the lowest being one.

Data Collection and Analysis

On average, interviews lasted between 60 and 90 minutes and were conducted in-person or via Skype. Children were interviewed independent of their guardian, aside from one who requested their presence. Audio recordings were transcribed word-for-word by a transcription agency; due to the vulnerability of this population, transcriptions are not available. The interviews were analyzed using NVivo. Because this data was gleaned from the first author's dissertation about the medicalization of trans adolescents, "menstruation" was previously created as a parent code. The data affiliated with the parent code "menstruation" was then open coded by the first and second author. Open coding the parent code allowed for sub-categories to emerge holistically from the data (Charmaz). Authors met regularly to establish the following sub-categorical codes; monthly disconnect from body, nonbinary struggles, dysphoria, mental health, and affirmation of identity. Once these sub-category codes were established, authors then conducted a second round of analysis on the dataset to be certain they were in agreement with one another's analysis (Hesse-Biber 320). Authors continued to pay attention to any emergent themes, as well as how their own identities impacted the process. Lastly, the authors report that there are no competing interests to declare.

Results

The following three themes were identified after data analysis: (1) menstruation as a tool for gender identity affirmation, (2) menstruation as a trigger for gender dysphoria, (3) healthcare professionals struggle to serve nonbinary adolescents. The following section explores how menstruation encouraged and affirmed adolescents' decisions to transition medically. While the quotes used in this section also highlight notions of gender dysphoria, we focused on the aspects of the interview that revealed menstruation to be a somewhat useful tool in identity affirmation. Furthermore, the quotes illustrate the complexities that menstruation introduces to the process of gender identity affirmation.

Menstruation as a Tool for Gender Identity Affirmation

The first finding details the associations adolescents, parents, and healthcare professionals made between identity construction and periods. While the following quotes by healthcare professionals and parents can only speak to distinct behavioral changes, adolescent participants describe pivotal moments in their understanding of gender identity. For many adolescents, the onset of a menstrual cycle was a major contributor in understanding the disconnect between their gender identity and the gender attributed to them at birth.

Menstruation was often described as a major factor in influencing their decision to transition. For example, Sean, a 16-year-old trans boy, stated, "Once I grew up and hit puberty, I started noticing that my gender was not matching up with what I felt I was." It was only after Sean had noticed his pubertal changes that he realized what he was struggling with was the association between his identity and body. Similarly, Nick, a 17-year-old trans boy, described having a very emotional reaction to his period:

So before I actually got on testosterone I was on birth control, Depo-Provera, which stopped my periods. And I think that had the biggest impact on me even though it was only like a physical thing that other people couldn't see. But it changed my mood a lot, and how I felt about myself. I got my period one month, and I was just having a huge, huge breakdown, and crying to my mom, like I'm a girl. Like I'm always going to be a girl, and just like it felt awful all the time to just know that was happening.

Even though menstruation is not a visible indicator of gender identity, Nick explained that using birth control to suppress his period had the biggest impact on his sense of self. In this example, Nick felt more affirmed in his identity after his periods stopped because prior to suppressing menstruation, having a period meant he was "always going to be a girl." Even though Nick had socially transitioned, having a period still established him as a girl in his mind, but the eradication of his period is what finally affirmed his masculine identity.

However, not all participants felt similarly affirmed. Ace, a 14-year-old trans boy, talked about his first steps initiating gender affirming hormones. He described his dissatisfaction with his period in a different way compared to the previous participants:

Right after that I started taking birth control so that I don't have periods because that was actually one of the things that really gave me dysphoria. Whenever I had my period, it would make my moods worse. I would feel really mad and I would go back to a time when I felt like I didn't know any part of me. This is one key moment that I knew that I was always going to be a trans male and I was never really going to be biologically male.

Ace felt upset about his menstrual cycle because it reminded him that he is a trans man and not a biological male. While other participants felt closer to masculinity upon the removal of their periods, Ace's statement reflects a hierarchy within the realm of masculinity in that "real men" do not get periods. Ace's example highlights the importance of understanding the privilege cisgender people experience in regards to embodiment and gender identity. Ace's interview is a good reminder that our feelings regarding gender identity are contextualized within a transnormative culture.

Healthcare professionals also discussed the ways in which menstrual cycles impacted the transition process for trans adolescent-boys. For example, Natalie, a pediatric endocrinologist said, "the more typical story is a teenager who maybe felt different and then went through puberty and it was very distressing. And, you know, then came to the understanding that they were trans. And so I would say that that's the majority of the patients that I see." Elizabeth, a pediatric endocrinologist, made a similar statement and addressed the abruptness of a menstrual cycle. This sudden change in anatomy can catapult someone into thinking critically about their gender identity if they are uncomfortable with the swift change that is typically associated with womanhood or femininity. Elizabeth explained:

For people assigned female at birth, having a menstrual period is like a very clear like stark sudden pubertal event that I think is very distressing. And so I think that that is sort of a milestone that happens at age 11, 12, 13 that you know sort of increases the urgency of gender dysphoria.

Adolescent participants noted that they had felt uncomfortable with their gender identity, but their first period acted as a catalyst in cementing those feelings. Healthcare professionals also commented on how pivotal a period can be for a trans boy because it represents a pivotal time in a young person's life that is a gateway to the "feminization" of the body. While many of the previous quotes could represent examples of gender dysphoria, it is also evident that periods may signify turning points that affirmed a person's decision to transition. Stopping a period helped participants to feel better about their bodies, therefore their transition. However, for Ace, even though he had stopped his menstrual cycle, he described his period as "one key moment" that he would always consider himself a trans man and not a "real man." This quote epitomizes a complicated example of experiences with menstruation.

Menstruation as a Trigger for Gender Dysphoria

Periods can cause positive and negative forms of gender affirmation, as well as trigger moments of gender dysphoria. The following section dives deeper into understanding how periods trigger negative feelings. Our second finding details the various aspects of menstruation that are difficult for trans adolescents, as well as the negative outcomes as a result of having a period. Although adolescent participants did not divulge

too much information, parents spoke openly about their child's experiences with suicidal ideations. Loretta, the mother of a 15-year-old trans boy, stated: "His biggest trigger is having his period. All five psychiatric hospitalizations were around that. So it was a huge trigger, so we needed to stop that." Alicia, the mother of a 16-year-old trans boy, detailed the behavioral changes she noticed in her son after he began his menstrual cycle. She described her son as a well-rounded successful student but witnessed a sharp decline in his overall health and well-being after he had his first period. She remarked:

So menses started at 12. At 13 is when we started seeing mental health changes. Alex, up until seventh grade he'd been a straight-A student, was in the honor society, was in band, was in sports. In eighth grade that is when Alex's mental health hit a roadblock, and grades started coming down, started self-harming, started having suicidal ideation and depression.

Brittany, the mother of a 14-year-old trans boy, stated:

I knew that having his monthly cycle was awful. For about a week a month he was suicidal. More of a passive suicidal than an actually like active suicidal, but he was just absolutely miserable. That was our first step, we need to stop these cycles. We need to get him more comfortable in his own skin and stop the hormone fluxes. Seeing how much dysphoria my child continued to still have, even after socially transitioning, he still wasn't the man that he felt he should be really kind of changed my mind very quickly. And so he was able to start testosterone.

Brittany explained that not only was stopping menstruation one of their first conversations, but it was the deciding factor in allowing her son to begin taking testosterone. These experiences ignited a conversation between her and her son that put a medical transition to the forefront. In addition to parents, healthcare professionals stressed the negative influence that menstruation had on trans adolescents' mental health.

Natalie, a clinical psychologist, identified menstruation as a major contributor of suicidal ideations and hospitalization. She explained how the focus of many healthcare professionals' assessments tends to center on emotional aspects related to gender identity and not biological impacts. She commented:

The single most underrated reason that I have seen kids end up in the hospital who are trans is the onset of menses. I have had kids go to the hospital with suicidal ideation and intent, and it was the day they started their period. I find that what might look like depression or anxiety because they're landing in the hospital is really just extremely severe dysphoria. We often look for the emotional reasons for something and forget to check the biological. I often see in people who have a period and don't want one because of dysphoria, pretty intense emotional dips when that happens. And even on testosterone sometimes you can have a period. And that can send people into an emotional spiral.

For many participants, periods are a tangible reminder of a symbiotic relationship between gender identity and gendered embodiment. Parents pointed out the various negative behavioral changes in their children and healthcare professionals stressed the connection between menstruation and suicidal ideations. This finding is vital in that it adds to our understanding of how impactful periods can be for trans adolescents who menstruate.

Healthcare Professionals Struggle to Serve Nonbinary People

Our last finding describes how menstruation was mentioned during interviews pertaining to nonbinary patients; however, the focus was on how healthcare professionals made them feel, not their periods. Thus far we have illustrated how menstrual cycles have impacted trans adolescent boys and the construction of their gender identities. However, healthcare professionals and nonbinary participants reported struggles related to medical care. While trans boys examined how menstruation made them feel emotionally, nonbinary participants discussed menstruation in terms of how their doctors were ill-equipped to serve them. This section begins with healthcare professionals describing barriers in working with nonbinary participants who want to halt menstruation and then details the negative opinions nonbinary participants hold regarding their medical care experiences.

Although healthcare professionals reported being open to supporting nonbinary adolescents who want to eliminate their menstrual cycles, they still made mention of difficulties that were unique to the nonbinary community. For example, when Allison, who is a pediatric endocrinologist, was asked about the level of difficulty working with nonbinary adolescents, she stated, “Sometimes they want to stop their periods, which is easy enough to do.” However, Lenny, a nurse practitioner, explained that nonbinary adolescents will often-times want their periods to end, but do not want to develop other masculine features. Healthcare participants viewed this as difficult. Because every body is different and medical professionals cannot control how testosterone will impact a person’s anatomy, there is no standard to reference. Serving nonbinary people becomes a medical guessing game in establishing the desired levels of gender affirming hormones that will change an individual’s physical appearance. Patients must assess what level of masculinity or femininity they are comfortable portraying. Lenny stated:

Sometimes patients are transitioning to nonbinary. I have patients say, I don’t want to become too masculine, but I don’t want my cycles. Well, you can’t have your cake and eat it too. There is no level where cycles stop. It depends on that person. I’ll push until we stop your cycles, but I can’t guarantee you’re not gonna get that masculinization. That can be a very difficult conversation, as there’s only so much that medicine can do.

While Lenny was open to the conversation and helping his patient work towards a nonbinary transition, this doctor seems to be frustrated with his patient’s transition request when he makes comments such as, “you can’t have your cake and eat it too,” or “there’s only so much medicine can do.” While masculinization may be inevitable for some nonbinary individuals, his sentiment reflects either a reluctant approach to nonbinary medicine or frustration with his overall lack of knowledge in practicing this type of medicine.

Another interview revealed that some doctors do in fact have a more in-depth understanding of nonbinary identities. Tim, a pediatric endocrinologist, explained the importance of never assuming that an adolescent’s aim is to transition from male to female or vice versa. Historically, nonbinary individuals may not have been granted the same level of medical support. Tim explained:

The important thing if you're seeing trans youth is don't, and I've done this, don't assume that they're trying to fully transition. Even if someone is fully trans male or trans female they may not, especially at that point in their life, be trying to transition totally. And so if really the issue is like they don't want to have menstrual cycles, OK well we have other things we can do besides testosterone to stop menstrual cycles. So just really trying to figure out like what of the dysphoria is sort of their biggest issue. Because sometimes we can address that without hormones. So I think it's important for you to figure out what the dysphoria, like the biggest issues of their image or identity. Cause I think there is a way you can tailor to that.

Although the previous excerpt hints at a more open approach to gender affirming healthcare services for nonbinary adolescents, nonbinary adolescent participants had a different perspective to share. Nonbinary adolescent participants reported that healthcare professionals seem reluctant or outright refused to affirm nonbinary people. While some healthcare professionals may have a reputation for serving the LGBTQ+ patient population, their care falls short for nonbinary people. Adolescent participants described a lack of education in understanding the differences between nonbinary and trans identities, in addition to a refusal to use appropriate pronouns and/or language. Benson, a 17-year-old nonbinary participant, spoke in generalities about how the nonbinary population navigates healthcare services and began by describing a specific doctor that was well known in the trans community:

Probably a fine doctor. If you use, they/them pronouns, not your guy. Do not go. This is a thing with trans docs and the people that do top surgeries and bottom surgeries. There are those that don't understand the nonbinary population and so we don't go there. And so, it's a thing to like, oh I want top surgery, but like I'm nonbinary. I use they/them pronouns. You specify that and you find a doctor that does top surgery that works not just for trans people but also with nonbinary people. Because some of the trans doctors don't understand or refuse to understand... I received all of my doctor's notes after my appointments and he wrote at the top of his report, patient uses they/them pronouns. And then went on to refer to me as he in his entire report.

Although Benson's doctor had experience working with trans people, it was evident that this knowledge was limited to trans people and not nonbinary patients. They did not use Benson's correct pronouns when typing out their medical record notes. Benson's doctor misgendered them by referring to them as "he" throughout the report. This highlights the doctor's surface level understanding of nonbinary people. By continuing to use masculine pronouns, Benson's doctor refused to acknowledge or respect their nonbinary identity by forcing Benson into a masculine category. Jason, a 17-year-old nonbinary participant, echoed a similar sentiment. Jason described healthcare professionals exhibiting a lack of awareness related to nonbinary identities, even the doctors who were known for working with the trans community. Jason stated:

They [doctors] use different words for trans, not like slurs, but not the appropriate terms. One of them who was supposed to be like really good with trans people didn't know about nonbinary people, which I thought was weird.

Ellie, a 13-year-old nonbinary participant, also commented:

Hospitals will have like the one trans doc and they're great people and they're a great resource. But then you've got like the one nonbinary kid that shows up and wants to transition or wants to go on blockers. And they don't know what to do with them because they're like oh you're trans. And the kid's like no, I'm not trans. I'm nonbinary.

Betty, the mother of a 17-year-old nonbinary teenager, explained that their child began identifying as nonbinary after they no longer had access to testosterone due to a logistical error at their pharmacy. To Betty's surprise, their child was okay without receiving the hormones and decided to identify as nonbinary. The lack of access to hormone related medical services actually provided them with the space to experiment with their gender. Betty went on to discuss how young people that are medically transitioning are unable to practice any sort of gender expression that does not reflect the binary, because doctors do not understand how to provide the kind of environment that allows for gender expansiveness. Betty stated:

I think they (speaking about doctors) need a gender diversity talk. Some of these kids are going to get into trouble trying to put themselves in the binary. They didn't know that there were 200 ways you could be and still be right. So they picked one, and it wasn't quite the right one. The gender things that we see in other countries don't map onto these binaries. And I am a bit concerned as I learn more about gender variance that kids are – that there are more of these kids that are non-bi – what we would roughly call nonbinary.

Although it was originally due to lacking access to medical resources (which could have been extremely problematic), this example illustrates the need for flexibility within healthcare to allow for youth to understand that being nonbinary is a possible option medically. Providing more options in gender affirming care can help youth navigate their gender identity more effectively by not insinuating that someone must be a trans boy or a trans girl to be valid. The frustrations that nonbinary adolescents express indicate that trans-normativity continues to invade healthcare spaces. While healthcare professionals may tout being trans friendly, they often conflate nonbinary individuals with binary trans people. This may be acceptable for non-binary people who also identify within the trans umbrella, but not all nonbinary people consider themselves trans. A healthcare professional's refusal to learn about the nuances that separate nonbinary and trans female and male identities can create barriers in affirming their patient's transition goals.

Discussion

Current research demonstrates that nearly one in five people who identify as trans are between the ages of 13-17, equaling nearly 300,000 trans young people in the United States (Herman et al.). With this increase in adolescents who identify as trans and/or nonbinary, it is imperative that researchers investigate the lived experiences of this population. By identifying behaviors and/or processes that influence gender dysphoria, we can better support this growing marginalized community. Through interviews with trans and nonbinary adolescents, parents, and healthcare professionals, this project set out to shed light on the relationships between menstruation and trans and nonbinary identity construction. The findings from this project reveal that menstruation deeply impacts the gender identity construction process for trans boys, acting as both a tool for affirmation and a trigger for gender dysphoria. Nonbinary participants, however, characterize healthcare

practices as being far from affirming for nonbinary people.

Like past research pertaining to trans men, menstruation is difficult for trans boys and nonbinary adolescents because it is a reminder that their bodies do not align with their gender identities (Chrisler et al.; Frank). Parents, healthcare professionals, and adolescents all reported that the disconnect between identity and anatomy can cause adolescents to experience severe mental health reactions to menstruation, which include suicidal ideations, depression, and anxiety. However, experiencing a menstruation cycle may also help adolescents to fully realize that they are in fact trans. Their reactions to puberty prompted a critical reflection on their gender identity, which may not have taken place if there was not a deeply rooted societal connection between menstruation and femininity. In this context, menstruation acts as a dichotomous instrument that both harms and strengthens an adolescent's transition. A period can induce suicidal ideations, as well as affirm a medically supported transition. While young trans people should not be forced to experience a period if suppression is possible, menstruation could be viewed as a steppingstone for understanding an adolescent's trans identity. Parents and healthcare professionals should consider how an adolescent reacts to their period when figuring out how to support that person or open up conversations surrounding gender identity in relation to menstrual cycles.

Our last finding highlights issues within medical care for nonbinary populations. While some felt open to serving nonbinary patients, there was a level of frustration observed. Some healthcare professionals expressed the belief that medicine can only do so much in supporting nonbinary transition goals, since certain levels of testosterone can bring an unwelcomed masculinization of the body in addition to stopping unwanted periods. The “you can't have your cake and eat it too” mentality demonstrates an attitude of reluctance and ignorance; fluidity is a neglected concept due to some medical professionals' inability to react and prepare for it. One healthcare professional participant reminded colleagues to not assume that a patient's goals are to transition from male to female or vice versa. While there are slivers of optimism within the healthcare professionals' interviews, nonbinary participants paint a vastly different picture.

Nonbinary adolescents collectively agreed that there are not enough healthcare professionals available to the nonbinary patient population (Unger). Of the limited number of healthcare professionals serving LGBTQ+ people, many conflate trans and nonbinary care. This results in a universal approach to transition, which does not meet the specific needs of nonbinary people. Participants reported neglectful behaviors by healthcare professionals who are well known for being trans affirming. One participant revealed that a doctor acknowledged their nonbinary pronouns during their face-to-face interaction but referred to them as a male in the medical notes. This example highlights a superficial level of support and underlies the importance of transforming the institution of medicine.

While our call to action echoes prior demands from advocates, academics, and activists alike, we argue for a need to make conversations related to menstruation more inclusive through the implementation of radical changes within medical education and a transformation of the way companies package and sell period

related commodities. Medical schools need to increase the information incorporated about queer identities into lectures about anatomical processes. Currently medical schools, on average, dedicate roughly five hours to LGBTQ+ related information within the curriculum (Obedin-Maliver, et al.). Discussions can center anatomy and then progress towards identities as a way to highlight intersectionality as it pertains to multidimensional experiences. Menstruation should be established as a process that occurs within bodies that hold a certain set of organs, and yet, recognize the importance of the societal implications and variety of experiences people who have periods encounter. Instead of having the discussion rooted within cisnormativity by referencing only cisgender girls and women, menstruation can be a point of connection between all people who menstruate, i.e; cisgender women, trans boys, nonbinary people, etc. We can help loosen the connection between femininity and periods by creating more inclusive conversations about menstruation within medical school lectures. This can provide a more forward way of thinking and create well-educated students who become future healthcare professionals that are inclusive of all patients.

In addition to medical education, the marketing of menstrual products needs to reflect this change in society. Currently, some companies that sell menstrual products have shifted their language when referencing their items. For example, *Thinx* addresses their consumers as “people with periods,” as opposed to “women with periods.” This change in language represents a cultural shift towards de-gendering health-related issues. While it seems like the small changes these companies are making may be slow-moving, they are encouraging the everyday consumer to think. The everyday language we use to describe menstruation and the kinds of people who menstruate can shape our realities and worldview.

Limitations

No study is without limitations. All our participants identified as white, which provides a very limited sample. Interviewing people of color would have given our study critical insight into the racial and ethnic differences in how trans and nonbinary young people experience menstruation, as well as contribute to the gap in literature pertaining to these groups. There is also a very low number of nonbinary participants. However, we believe that it was still very important to include them in this paper to highlight the differences in how trans binary individuals are treated by healthcare professionals versus nonbinary young people. Future studies should not only include more nonbinary people who menstruate, but those who do not as well. There are many people who do not menstruate that may want to in hopes of feeling more affirmed in their gender identities, including but not limited to, nonbinary, intersex, and trans women (Lowik). Research should work to address the groups that are typically not included within menstruation discussions.

Conclusion

The findings from this paper demonstrate the similarities and differences in how menstruation impacts trans and nonbinary adolescents. It is evident that trans and nonbinary adolescents struggle with menstruation, albeit in different ways. For trans adolescents, menstrual cycles can lead to various aspects of identity

exploration and/or struggles with mental health. In the case of our participants specifically, a period act as a singular avenue leading an individual towards two different psychological hurdles; transition affirmation and/or suicidal ideation. Nonbinary adolescents, on the other hand, report external difficulties dealing with healthcare professionals regarding menstruation-related care. Although healthcare professionals seem eager to work with nonbinary youth, their care seems to cover trans identities only. It is important for healthcare professionals to remember that queer adolescents are not a monolith and that while the communities studied in this paper may grapple with the same anatomical process, their struggles are unique and must be addressed in different ways. As previously mentioned, this patient population is at the age where they will most likely have to confront menstruation. The more prepared we are as a society to support them is culturally significant.

A medical validation of the various identities that menstruate, as opposed to periods being feminine and only feminine, may alter cultural understandings of periods so that periods may not be so difficult for trans and/or nonbinary youth. More inclusive conversations surrounding menstruation could result in less hospitalizations due to suicidal ideation, and encourage thoughtful contemplation and/or discourse surrounding transition. To embrace trans and nonbinary youth we need to provide the kinds of environments that allow people to have queer relationships with their periods. Medical schools and healthcare institutions need to mold conversations and curriculums so that they are not only inclusive of trans and nonbinary individuals but also rid of the persistent connections made between menstruation and femininity. Trans and nonbinary patient populations are increasing, and healthcare professionals need to understand ways in which they can support gender fluidity.

Ethics Statement

The project was granted approval through the Institutional Review Board at Wayne State University and informed consent was collected from all of the participants. Parental consent was given from all of the parents whose children participated within the study.



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21 to 35

Molly McConnell

Abstract: Relying on personal experience braided with research and analysis, this essay thinks through what it means to experience amenorrhea—or not—as a result of an eating disorder. By questioning where the line is between girlhood and womanhood, the author troubles the notion of a clear divide between the two, noting that menstruation is often considered a marker of becoming a woman, and thus wondering what happens when that marker is lost. In addition, the author employs a feminist lens to examine how eating disorders are discussed and researched, and who has the authority to make meaning out of these experiences in liminal spaces.

Keywords: [menstruation](#), [amenorrhea](#), [eating disorders](#), [feminist research](#), [liminality](#), [girlhood](#)

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I told myself that if I lost my period, I'd stop. Looking back now, I'm not sure I would have.

I got my first period when I was in fifth grade. I was 11 years old, which is young for a first period. My mother had been excited in the year or so leading up to this. She'd pat my knee while driving the Toyota Sienna minivan, say, it's so exciting that you're going to be a woman. When I got my period, she asked if I wanted her to share the information with the family—I did not, in part because I did not see the appeal of this thing that now happened to me, and in part because I did not think they, three men, would care. And she put my first tampon in for me, so that I could understand how to place it and what it should feel like.

I don't remember if it was before I got my period or after, but I suspect after, that she took me to Dallas to shop at Sam Moon and hang out, a girl's trip. The real purpose of the trip was to keep me sitting in the front seat of the minivan for two hours so that I could read aloud to her an informational book, with illustrations, about puberty, menstruation, and sex, for all sexes. I was, in theory, now a woman, so I had to be educated about being a woman and all the things that women might do and that might happen to women (except I do not remember there being any mention of rape, sexual assault, domestic violence, or same sex relationships, much less polyamory or gender expression). I watched *M*A*S*H* on my portable DVD player the whole way home, perhaps as a small form of protest for having to endure this. My mother told me that trip or some time later that her own mother had done nothing but hand her a box of pads or tampons when she first got her period, and my mother said she wanted it to be different for me. I was not the enthusiastic participant she imagined.

In my twenties, my period was off. It was still there, but there were cycles that were 20 days, 21 days, 22 days. It kept happening, not every cycle, but still: 19 days, 20 days, 21 days. This is *technically* normal.

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Menstrual cycles last 21-35 days, and variation is normal. My periods were short and light and often. Looking back, I view these anomalies in my cycle as perhaps not anomalies, but signals and signs that something in my body was off. I don't know if that is the case. I do know that having an eating disorder is one of the reasons a body might develop secondary amenorrhea. And I know that I knew that losing my period was serious, albeit not serious enough at the time to stop or seek help before that happened.

Amenorrhea is a condition wherein someone never has a period. Secondary amenorrhea is “the absence of three or more periods in a row by someone who has had periods in the past” (“Amenorrhea”). Significant factors for secondary amenorrhea—and other “menstrual dysfunction”—include “BMI, recalled caloric intake, and levels of exercise” (Poyastro Pinheiro et al. 431). One's menstrual cycle can say a lot about one's overall health, as “indications of irregularity can be an early warning sign that something is amiss” (44), writes Christine Yu in *Up to Speed: The Groundbreaking Science of Women Athletes*. “More often, for active people, a wonky or absent cycle is a sign that the body doesn't have enough energy to fuel the activities of daily life. Undereating, overexercising, or a combination of both can result in an energy deficit that disrupts their cycle” (Yu 44). Secondary amenorrhea is indicative of an issue within the body, a sign that something needs to change. Menstruation is seen as the movement from girl to woman, from adolescent to adult. Is the lack of a menstrual cycle a regression? Do we ever stop being girls?

Melissa Febos writes in the prologue to *Girlhood*:

The story went like this: I was a happy child, if also a strange one. There were griefs, but I was safe and well-loved. The age of ten or eleven—the time when my childhood became more distinctly a *girlhood*—marked a violent turn from this. ... During [girlhood] we learn to adopt a story about ourselves—what our value is, what beauty is, what is harmful and what is normal—and to privilege the feelings, comfort, perceptions, and power of others over our own. This training of our minds can lead to the exile of many parts of the self, to hatred for and the abuse of our own bodies, the policing of other girls, and a lifetime of allegiance to values that do not prioritize our safety, happiness, freedom, or pleasure. (xiii)

Like Febos, I see girlhood as distinct from childhood. A friend of mine and I were talking about where that line is, the one between being a child and being a girl. She said it was around age eight, or maybe nine, the time when she began noticing feeling shame about comments about her body, even if those comments were positive. Around that time, nine or 10, I too began noticing bodies. But beyond this temporal moment that began around age nine, the idea of girlhood for me evokes a negative feeling, an association with a lack of power or control, the sense that I could not do much about my situation, whatever it was.

My family moved from South Carolina to Texas when I was about to start fourth grade. I was three months from turning 10, and I did not want to leave the only place I had known and the only house I had lived in. We lived in Texas for six years. I got my period there, started wearing a bra, started shaving my legs. One of my brothers told me my arms were hairy, I suppose with the implication that I should shave those too. We moved to North Carolina four months before I turned 16, two months before I started tenth grade.

Sometime before we moved the second time, probably a year before, I stopped crying. My father had gotten an interview the year before we moved for a tenure track job. I cried because somehow, I knew he would get the job and that we would move, and I did not want to move. Not again. After that, the times I cried were rare. It happened, I am sure, but not often, and if at all possible, not in front of people. This is an essay about eating disorders and amenorrhea, but what I am trying to say here is that they are all connected. Suppression in one area means suppression all over. I learned to suppress early, so I was prepared to suppress as I became a woman.

How do I tell you that I felt out of control as a child, when that is not the language I would have used then and would not have used until very recently. My parents were and are full of caring. I have no complaints. And yet, my childhood and my girlhood made me what I am today, provided my context, provided the environmental backdrop. I was raised to be high-achieving. I was expected to get As, always. It wasn't even that there was pressure, or I did not register it as pressure, only that the grades my brothers and I got were As, because there was no other option. By the time we were in college, this became a system wherein we had to pay for the class if we got a C or below. I was taken to church on Sunday mornings and Sunday afternoons and evenings, and on Wednesday evenings, and I went to Vacation Bible School for five days in the summer, and I spent many mornings at the church gym, because at that time, my father worked at the church. There was no choice in this, and I did not even give myself a choice until junior year of college, but really, senior year. Each season, I was told to choose one activity. This is a privilege, and I know it as a privilege, and I also know it as something else. I danced—tap, ballet, and jazz—and was terrible at all three. I played soccer, also terrible. I played basketball and kept playing through age 18, adding softball and volleyball and track and swimming later. We were not allowed to quit anything. If we were bored, we were told to go outside or to read a book—in short, to entertain ourselves—and we were not allowed to watch TV outside of sanctioned times. At times, I felt my emotions were misunderstood or belittled and minimized, so I tried to make them smaller. Again, I recognize that these are not inherent negatives in a childhood, and most of them were the result of an easy and privileged life. But the lessons they instilled in me became twisted and warped until doing anything outside of rigorous self-control and high expectations was not an option. That was not who we were. That was not who I was.

When I was a girl, I was taller than all of the other kids in my grade. For a short time in fifth grade or sixth grade, I was taller than one of my brothers, who is two and a half years older than I am. Though my mother called it sloppy, or said I looked like a slob, I gravitated toward clothing that was oversized, or at least not very fitted, like t-shirts and basketball shorts and wind pants. My family attended church on Sundays, and one morning, as we walked across the parking lot, I complained about having to wear a dress or a skirt. Why do they get to wear pants and I don't, I asked about my brothers. I say this not to raise questions about my comfort in my gender performance or to insinuate that my eating disorder was a result of this image of my body, but to highlight that as a girl I was uncomfortable in the body that I had. At that time, I did not want to become a woman, I did not want to embrace femininity because I felt I did not fit the ideals of it. I did not want to have a period. But there I was, many years later, clinging to it, that which allegedly brought

me out of girlhood.

In their series on feminism and eating disorders, Andrea LaMarre, Michael P. Levine, Su Holmes, and Helen Malson ask “(1) What issues and barriers have resulted in feminism being so neglected in the field of eating disorders? and (2) What can feminism offer?” (LaMarre et al. “An Open Invitation,” Part 1 2) The writers claim that the field of eating disorders has neglected feminism, and that

feminist approaches enable us to (i) work with lived experience; (ii) expand on taken-for-granted but limited understandings of sociocultural influences; (iii) appreciate the value of engaging with different methodological approaches for understanding eating disorders; and (iv) illuminate the significance of context in understanding lived recoveries. (LaMarre et al., “An Open Invitation,” Part 1 2)

While there is acknowledgement in the critique that feminists have not fully understood eating disorders, a large aspect of the critique focuses on the diagnostic politics that arise around eating disorders (LaMarre et al., “An Open Invitation,” Part 1 5, 7-8). Ultimately, the writers argue for more contextual care, offering the view that “the medical model’s fundamental assumptions and linguistic practices in relation to syndromes, diagnoses, comorbidity, course of illness, and treatment may disempower and disembody people whose eating disorders express and represent issues of helplessness, subjectivity, and loss” (LaMarre et al., “An Open Invitation,” Part 1 9). This focus on context continues in the second part of the series, wherein the writers discuss collaboration between those with eating disorders and their care teams: “collaborating means recognising that, while a person with an ED might not always be acting in their own best interest, decisions made about their treatment can involve them in the process as humans” (LaMarre et al., “An Open Invitation,” Part 2 4). This has become a common refrain in eating disorder research: involving people with eating disorders in their care is better (Kenny and Lewis; LaMarre and Rice, “Recovering”; Lester, Famished; Stockford et al.; Wetzler et al.). LaMarre, Levine, Holmes, and Malson’s framing of a possible solution “cannot be only individual, and cannot simply seek to detect, excise, and cast out the eating disorder without considering meanings made.” They go on to say that “Feminist approaches insist that we situate eating distress within broader sociocultural milieu without diminishing the seriousness of suffering, such that solutions must be rooted in systemic change” (LaMarre et al., “An Open Invitation,” Part 2 10). Attending to eating disorders ultimately means questioning why someone might have one, but looking beyond the reductive narrative of body image and cultural messaging when doing so, instead looking to the many reasons someone’s body might not feel safe or might become a locus of control as a response to their surroundings: race, gender, sexuality, poverty, trauma, and other environmental factors (Lavis).

Very simply, when someone menstruates, they shed the lining of their uterus, called the endometrium. Before that happens, an egg is released from the ovary into the fallopian tube. If the egg is fertilized, it tries to make a home in the thickened endometrium in the uterus. If the egg is not fertilized, the egg and the endometrium are released and forced out of the uterus. This usually happens once every 21-35 days. Behind the scenes, hormones regulate and oversee all of these actions. The hypothalamic-pituitary-ovarian axis regulates

the body maturing and releasing an egg into the fallopian tube, as well as the hormones, notably estrogen and progesterone, among others, that make up the four phases of the menstrual cycle: follicular, ovulation, luteal, and menstruation (Evans and Bennett; Mikhael et al.). The hypothalamic-pituitary-adrenal axis also regulates hormones, albeit stress hormones, like cortisol. For either of these axes, adverse conditions, like the starvation associated with an eating disorder, can cause hormone disruptions and imbalances, or outright cessation of hormone releases (“Hypothalamic”). Without the hormones, or even with them if disrupted, the entire cycle is disrupted.

I never ended up losing my period in my 20s. I don’t know how close I came, and perhaps it’s better that I don’t know, given all that I already know about the capacity I have to do damage to myself (Van Asselt). When I began recovery from my eating disorder, I got lucky. I was on a train. I would have ridden the train until it crashed, but somehow, I stepped off before that happened. I landed somewhat softly: my institution’s health insurance covered my registered dietician and my therapist, who has experience with eating disorder clients. I was not food insecure and had access to the food I wanted to be eating. I had a flexible job such that I could work from home if I felt ill. I am white and cisgender female, the category most easily recognized in the realm of eating disorder care. I did not lose my period, which is also to say that I did not go as far on the train as I could have and would have, even though I had other notable damage. But I can still see the tracks. I know, and I knew, where they lead. And I was and am okay with that. I have to be: the tracks will probably always exist for me, and the station is open.

When I was in high school, a friend of mine developed an eating disorder. We’d moved away already, but I heard about it. She ran all the time. At my eldest brother’s wedding in Oklahoma my junior year of high school, it was December, and a few snowflakes fell from the sky, and two of my best friends, her and another girl, were there, and I had to make choices about how to spend my time. After the wedding reception, all of the guests straggled back to the hotel at different times (I was too young to visit a casino with my brother and cousin and older friends and was unceremoniously dropped off), and when I got in, the girl’s mother and my mother were sitting in the lobby talking. The girl was in the exercise room, running on the treadmill. She ran for a long time. I don’t remember exactly what my mother told me she’d heard from the girl’s mother, but I think it had something to do with a fear of the future, a loss of control. The liminal space we existed in as girls was ending, and we were becoming women. That reading may or may not have been true for that girl. It is true that existing in a liminal space means being torn between two, or more, kinds of being. In some ways, though, it also means not really having to make decisions: it’s a waiting period, a borderland that means not fully inhabiting either mode of being.

A liminal space is in between. It is the days a period does not come, even if anticipated. It is the existence of living in an eating disorder. As Karin Eli writes, “the concept of liminality is particularly productive, as it allows us to consider experiences of eating disordered practice in relational interaction between subject and society—a framework that can shed light on how the functional (coping) and the conceptual (being) come to be entangled” (477-478). It is a mediation between the self and outside the self. It is the mediation of a body

that is not and can not menstruate and the body that bleeds.

Maintaining my period was a way to tell myself I was still rational. I did not want to revert to girlhood, so I clung to control, again. Having an eating disorder—for me—was an exercise in maintaining control over my body, over my emotions, over anything and everything I could. The liminal space I existed in was one free from chaos. Remember what I said about suppression. The space I inhabited with the disorder was an easy one, walled off from emotions. When I was younger, I was uptight and rigid. I did not know how to be any different, given my upbringing. I both consciously and unconsciously took that rigidity and I channeled it into food and into my body, the things I could do in secret, could do on my own. I could change who I was to other people by restricting myself—not in how I looked, but in how I acted and reacted. But losing my period would mean reverting back to a time when I lacked any control. It would be proof.

Having a period is a sign of puberty. Puberty is the aging and maturation of a child's body into an adult body and capacity [to reproduce]. With puberty, for biological females, comes breasts, pubic hair, changes in body shape, and menstruation. During puberty, my body stretched out, grew taller. Sometime before my first period, I developed slight rashes on the insides of my upper thighs. My mother told me it was just the skin rubbing together as she rubbed lotion into the chafed spots. Years later, I would experience the same thing while running.

At a church camp the summer after sixth grade, I'd gotten my period. The last day we all packed our bags and put them on the porches of the cabins, and I needed a tampon but didn't have one. I was twelve, and embarrassed, and too scared to ask someone for one, so I shoved some toilet paper in my underwear and hoped that would do. When I got home, my mother, who had also been at camp, yelled at me through the bathroom door: What is this on your [navy blue gym] shorts? Why didn't you ask someone for a tampon? People could probably see this on your shorts; it looks terrible. I don't remember what I answered through the door before I got in the shower, only that I felt like shit. I think another word for it is shame.

When I saw a registered dietician for the first time, at the end of the appointment, she did not give me a choice about whether to come back. She told me she'd see me in two weeks and encouraged me to also see a therapist. She said she didn't feel like she had to call the therapy office while I sat there that day, that I wasn't that far gone, but the implication was that I still needed it. I had decided to see her initially because I'd been having some stomach issues, sudden nausea, the worst of which happened on a bike ride to the farmers' market on a Saturday morning. It was so bad I had to detour to the nearest public library, where I knew I would have access to a bathroom and no one would bother me for being there. My then-partner came to pick me up, bike and all, and he and a friend encouraged me to see a doctor or a dietician, just to chat, they said. They're medical professionals, there's no shame, and maybe it'll help, they said. During the appointment, after I cried within the first two minutes, she had asked me to describe what I'd eaten the day before using cup measures and plastic and rubber foods she kept in a basket in the office. If I didn't know how to estimate the amount of something, I looked through the basket for an approximation of the size or amount. After some

estimated calculations, she said I was eating, if I was eating consistently according to what I told her, around half of the calories I needed. Every day, only half. And that was with an extra snack added in the day before, meaning one snack: I'd told her this and that I wanted her to know I was taking it seriously. I was aware, on some level, of having a problem. I don't remember what I ate for dinner that night when I got home, but it probably wasn't much.

That first appointment, after saying I needed to eat more, the dietician pressed me on how I would do it. Could I eat a snack? Could I eat two snacks? I'd told her I didn't eat outside of meal times. Could I try eating cheese? I didn't eat cheese. Could I eat some meat? I didn't eat meat. Could I eat some tortilla chips or some carbohydrate with the beans? I preferred eating my beans and greens by themselves. Could I eat bread? I had no problems with bread, provided it was the sourdough bread I made myself. All of these, too, would help offset the physical activity I refused to quit.

Does the reducing of people with eating disorders and amenorrhea to a return to girlhood strip them of their autonomy? Does it change their subjectivity? Does it render them untrustworthy subjects? Does the losing of one's period change the perceptions others have, given that it biologically is like being pre-pubescent? And when we think of women, do we see them as having an autonomy that girls do not? If we do, then we might be, as I was, fooling ourselves, telling ourselves that such an autonomy exists, even when it does not. Women's bodies are increasingly not their own.

Amenorrhea is no longer included in the DSM-V diagnostic for anorexia nervosa, "in part to broaden the group of patients who could be diagnosed with AN," and because "amenorrhea is now acknowledged to be a physiologic response to the weight loss rather than a core psychological aspect of the condition" (Saldanha and Fisher 2). Amenorrhea is often associated with functional hypothalamic amenorrhea, or FHA, but that association is "controversial" (Bruni et al. 347).

Losing a period is not the only indicator of an eating disorder. In other words, many people who have eating disorders, severe or not, do not ever lose their periods. My red line was a farce.

In Stephanie Larson's article "The Rhetoricity of Fat Stigma: Mental Disability, Pain, and Anorexia Nervosa," she quotes M. Remy Yergeau, saying "We might understand anorexics akin to how Yergeau reads perceptions of autistics as 'demi-rhetoricians,' perceived as never fully capable of producing rational meaning" (Larson 396). While I disagree with Larson's focus on fat stigma as a driving force for anorexia, I agree with and want to focus on anorexics—and here I will extend this to anyone with an eating disorder—as perceived as incapable of "producing rational meaning." Eating disorders do not make sense to those outside them, but they make perfect sense to those within them. Rationality is, in this way, in the eye of the beholder, beholden to perception and context. And when we think about amenorrhea in this way, as someone with an eating disorder loses their period, do we think then they have regressed? Do we think they have lost some ability to make meaning? In other words: do we see them as a child? As a girl? Does having an eating disorder and

showing physical symptoms of it render one no longer a woman? External perceptions of people with eating disorders matter because it affects the care they do or do not receive. The rhetoric of choice that can pervade discussions of eating disorders puts the onus on the person to fix themselves. What that rhetoric doesn't understand is that "Eating disorders arise from the perfect storm of contributing factors such as genetic predisposition, personality traits, life stressors, sociocultural experiences, sport and non-sport environments, and relationship dynamics" (Bennett 15). What's the saying? Genetics loads the gun, and environment pulls the trigger. There's blood in that, too.

Within an eating disorder, there is only rationality. I told a partner this often, when I would explain why I feel the way I do about something—foods, food habits, exercising, arbitrary standards I hold myself to. He would look at me as though what I was saying was crazy. I would tell him I know that it's irrational; I am aware of how it sounds. But within my head, it has always made sense. From the outside, it seems crazy and stupid and absurd: why would someone believe those things? On the inside, it has been sorted and ordered and made to fit. The eating disorder is always rational (see Musolino et al.). Recovery from an eating disorder means understanding that both irrationality and rationality can exist at the same time. And it means understanding that others, outside of this space, might not understand the order that has been created. It won't look like order to them.

When I was in seventh or eighth grade, at a church event, someone was on their period, and we talked about this. I mentioned that my period was always light and easy. I did not have cramps. I did not know what cramps felt like, and so, I did not understand what periods could be like for other people. Someone in the youth group who was a year older than I was said it must be because I played sports, that all the activities I did—softball, volleyball, basketball, track, and sometimes in the summer, swimming—kept the periods easy. It is also possible that I was young, and my genetics meant that my periods would not be painful. As I aged, I would feel tired, heavy, and have brain fog when on my period, but it was not until getting a copper IUD at age 27 that I understood what cramps could be, and I bled more than I ever had before.

The girl who developed an eating disorder when we were in high school—I didn't know until that happened that it was something you could do. I didn't know until then that I did have some say.

I did not realize for a long time that I had a capital E, capital D eating disorder. I knew I had issues: upon multiple occasions, from my senior year of college to initial dates with a partner, five years later, I willingly used the term "disordered eating." I'd say that my eating is disordered but is not an eating disorder. I'd ask people to tell me how far they wanted to bike, so I could eat enough. I offered it up as a sign that I wasn't perfect, but that I had that imperfection under control. It was as though I was preemptively telling people not to worry about me—I didn't need their care, and I didn't want it. But perhaps subconsciously all that repetition was an attempt for someone to notice and ask further questions, even if I wouldn't have listened. I was fine. The eating disorder helped me function at a high level. It kept me focused and it kept me working hard. It kept my emotions suppressed. And when I began recovery, I missed it. I was anxious and scared and stressed,

day after day after day, worse than I had ever been before. I only wanted to restrict so that I could feel okay again, feel in control again. Wasn't that what I was supposed to feel after leaving girlhood behind: control. Wasn't I supposed to be a woman now, prepared and in charge?

What I am trying to say here is that even though I set some boundary for myself—losing my period—I had no control over that. I had no control over acquiring or falling into an eating disorder. Even though I thought I was in full control of my eating, my body, my emotions, all of it, I was losing that control. I never had it.

Approaching eating disorders from a feminist perspective or with a feminist lens means moving away from the idea that eating disorders are solely a result of cultural imagery. It means listening, intently, with care, to those who have eating disorders and know what it's like to be in one.

Rebecca J. Lester, in her article "Ground Zero: Ontology, Recognition, and the Elusiveness of Care in American Eating Disorders Treatment," says:

When patients' perceptual, rational, emotional, and/or behavioral capacities are thought to be impaired as part of the illness in question, patients become systematically delegitimated as reliable agents of knowledge ... the ontology of illness inscribes a notion of the patient as an adulterated agent. In such cases, patients essentially become objects similar to other materialities, rather than subjects whose perceptions matter in the enactment of an illness. (524)

The delegitimizing that Lester mentions is akin to Larson's labeling of anorexics as demi-rhetoricians. They are perceived as unable to make meaning. Lester goes on to say that in some situations, people with eating disorders can be seen as having no agency and as having full agency over their actions (529). It does not help that eating disorders are often seen in the discourse as matters of choice: weaponizing one's agency against themselves.

Rhetoric is meaning-making. Where does the meaning come from, though: do I get to say what my eating disorder means, what my period means? Or do I listen to clinicians and medical professionals and the general discourse to tell me? Constructing the meaning is like Annemarie Mol's conception of atherosclerosis in *The Body Multiple: Ontology in Medical Practice*: The disease is enacted according to who is doing the enacting. The eating disorder, the period, the lack thereof, the girlhood, all are enacted according to.

I have tried to say there is a definitive line between girlhood and womanhood, that having a period is that line. I have tried to show that there is a shift, but there isn't. Suppression is part of both girlhood and womanhood. Girlhood is less a stage of life than it is another liminal space between being considered a child and being considered a woman, and sometimes that space extends much further into what we call womanhood than we realize or recognize, especially when that liminality is imposed upon us. As Emily Daniels writes online, in the context of hot girls having stomach issues, "society is dismissive of young women in general, preferring us as girls, so here we are, accepting of our fate, dismissive of ourselves." She also writes:

Have you ever felt like a killjoy for wishing people would stop using the word “girl”? Discourses on social media are generative, enabling static objects to summon ideas that are so talked about they become self-propagating ideologies in one day. They also generate mythologies around concepts such as girlhood and womanhood. These are both reductive and infinitely expoundable, like literary motifs that stay fresh on a page despite overuse, but can’t leave it. Like Barthes said of Gretha Garbo and Audrey Hepburn in “Garbo’s Face,” as a language, perhaps womanhood’s singularity is of a conceptual order, girlhood’s of a substantial order. Womanhood’s face is an Idea, Girlhood’s an Event. If we talk about this event constantly, maybe it’ll never end. (Daniel)

In their article on feminism and eating disorders, Andrea LaMarre, Michael P. Levine, Su Holmes, and Helen Malson point out issues with the diagnosing of eating disorders, saying that the politics surrounding diagnoses “should be continually questioned in order to better understand people’s experiences while preventing suffering and expanding the influence, that is, the voices, of people excluded from conversations and decisions very much affecting their own lives” (“An Open Invitation,” Part 1 7). They go on to say that instead of “prioritizing pathologizing discourses,” “the emphasis is on understanding what distress feels like and leads to within a particular social context, and on what therapists and people seeking help can do together to generate, that is, embody, constructive changes” (“An Open Invitation,” Part 1 8). In other words, there is a turn away from pathology and a turn toward how something affects an individual person’s life. Rather than assign a label to that person, the focus is on the impact. The lines are already murky between disordered eating and an eating disorder. The blurriness of that space—that liminal space—are akin to the space between girlhood and womanhood. Where does one stop and the other start? Could we even say?

At the height of my eating disorder, I did not sit down with myself and say consciously that I could not lose my period or that I would stop my behaviors if that happened. It lingered on the outskirts and was known even if it went unacknowledged. In those times I was sometimes worried about my period disappearing for other reasons. But I did not want to lose my period perhaps in part because I did not want to return to the way I felt when I did not have it as a young girl. Perhaps I did not even want to return to the way I felt when I did have it, albeit when I was younger. It is not age that becomes a major factor here; it is the context in which I was living. It is about the capacity I felt I had to be myself and do what I wanted. It is, to return to Lester, about my sense of agency about my personhood.

Rachel Fraser, in her online essay “Anorexia and Autonomy,” a critique of Kate Manne’s *Unshrinking* and Emmeline Clein’s *Dead Weight*, writes about her own experience that part of her refusal to eat was fueled by “a refusal of adult womanhood.” Fraser says that anorexia is a “desire to appear ... the desire to be ... invulnerable,” that it “is a will to power, twisted into a pretense at its absence.” It is “not an autonomy deficit, but rather a peculiarly uncompromising articulation of the desire to self-legislate.” And this desire to self-legislate means that one with anorexia “governs and authors herself more fully than her peers” (Fraser). It is a desire for independence, pushed to an extreme, dependent not even on food.

One time, early in my menstruating, I used a pad. I hated it. It felt like I had peed my pants, I told my mother. I stuck to tampons from there on, aside from a brief dalliance with a period cup, which I could never

get to sit just right. I did not want to feel what was going on. Little had changed since I got my first period. I was still that girl in the front seat of the Toyota Sienna minivan, cringing when her mother said that getting her period would make her a woman.

A feminist perspective on eating disorders means relying on experiences of those with eating disorders, rather than biometrics (LaMarre and Rice, “Normal”; LaMarre and Rice, “Recovering”). It means turning to harm reduction (see Kenny and Lewis). A feminist perspective also relies upon viewing someone with an eating disorder as rational. Ginger Bihn-Coss describes something akin to these two things in saying that a “therapist created a climate where we were coinvestigating a ‘sane person’s’ behavior to figure out if there were some tweaks that might make life easier” (368). Andrea LaMarre and Carla Rice focus on “how sociocontextually located embodied experiences impact people’s ability to attain recovery” (“Normal” 138). They asked participants in their study “what did having an eating disorder mean” to them (“Normal” 139), and note that “when body weight alone becomes the lens through which people determine whether or not someone has a ‘legitimate’ eating disorder, those whose bodies never conform to the stereotype of an ‘eating disordered body’ are left in an interstice between well and unwell” (“Normal” 145). In a later paper, LaMarre and Rice say:

It is important to consider recoveries in the contexts of people’s lives, including their relationships with people and things in their worlds, their access to material, emotional, and other resources, and their timescales for/experiences of temporalities in recovery (...) Power and privilege, representation, and temporality inform recovery pathways in ways that complicate a simple choice-to-be-whole narrative so commonly associated with eating disorder recovery. (“Recovering” 701, 719)

They close their paper with a plea, via participants, for the medical establishment and researchers to “[honor] lived experiences” and “[reconsider] power dynamics as they operate in dictating which performances of eating disorders and recovery will be honoured as ‘legitimate’ and whose pathways to recovery will be respected” (“Recovering” 721). My experience is not that of those friends I know who have also had eating disorders. We overlap in some ways, but ultimately, we are each affected by it in specific ways. Much is the same with our experiences of girlhood, and with our experiences of menstruation.

When I first got my period, my mother said it made me a woman. I was no longer a girl, even though I still use the word “girl,” because to adopt the language of woman feels heavy, not like a burden, but like a duty. Moving from girlhood to womanhood via menstruation is a legible sign of change. The viscosity of blood—no matter the flow, and the pain of cramps, back aches, the hormonal mood swings and brain fog and fatigue—is proof of change. In the same way, the absence of menstruation is also proof of change. It is not intentional, just as people who menstruate did not ask to do so.

“How we research the process of eating disorder (ED) recovery impacts what we know (perceive as fact) about this process. Traditionally, research has focused more on the “what” of recovery ... than the “how” of recovery research” (Hower et al. 2). How we do something impacts what we know about it. Our methodolo-



gies can determine the outcomes of our research. Our perceptions play an outsized role in shaping how and what we see, and thus, how we might react to it.

In middle school, a coach told me she and her colleagues were breaking our bodies down to build them back up again stronger. I had to lift weights—squat, bench, clean-squat-press, incline—at age 14. It's safe to say that as a girl, I internalized that. Break down. Build stronger. Like the uterus, month after month. It breaks down. It rebuilds. If you lose your period, you have to try and get it back. Or, I suppose, you don't. Trying to get it back can take months, maybe longer. The body that houses a period is not the same body that didn't. Almost, as if, it grew up.

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“Becoming a woman, a complete woman, takes time.”: Menstruation Manuals for Girls as Material-Discursive Apparatuses

Hannah Taylor and Melissa Stone

Abstract: There is presently a lack of work in rhetorical studies and technical communication dedicated to menstrual health technologies and texts broadly and from the perspective of young girls specifically. Given that menstrual experiences are intertwined with material-discursive realities, more rhetorical work about menstruation is needed. This article analyzes four corporate menstruation manuals that span from the early 19th century to the present. We located these texts through the History of Medicine Archives at Duke University and from our own collections. Findings show that these manuals were distributed to girls and young women via schools and other public institutions like medical offices, churches, and workplaces. We find that these manuals can act as norming devices that enforce standardized and sometimes oppressive notions of menstruation. As a result, our article posits that menstruation is a material-discursive phenomenon that begins even before menarche; consequently, menstruators are implicated in rhetorical ecologies of menstruation from an early age.

Keywords: [Menstruation manuals](#), [girlhood studies](#), [feminist rhetorics](#), [agential realism](#), [rhetorical ecology](#)

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“Becoming a woman, a complete woman, takes time. Your body must go through certain changes—gradual changes, wonderful changes. And so does your mind, your spirit.” (*Accent on You...*)

The Material-Discursive Impact of Menstruation Manuals

A girl's first period—known as menarche—is imbued with great social, cultural, and personal meaning. The epigraph that opens this article is a testament to menarche's meaning. Pulled from a 1966 menstruation manual from Tampax, a prominent brand of tampons produced by Proctor & Gamble since the 1930s, the quote speaks to the pervasive idea that menarche symbolizes the moment when a girl transitions into womanhood. Scholars interested in menstruation studies have argued that the first display of menstrual blood for the American girl is entangled with material and cultural conditions—economic, familial, social—at home,

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in the workplace, and in society at large (Brumberg 102). These entanglements also include educational manuals about menstruation and what these manuals mean for the physical and social development of girls. Presently, there is no shortage of information online about periods; a simple internet search produces thousands of results that offer advice on how to navigate menstruation. Despite the relative accessibility of educational information online, new print menstruation manuals and books are published every year. Due to this abundance of information, this article aims to understand how menstruation manuals are included in the material-discursive cultures of girlhood. In doing so, we consider the importance of the production of menstruation manuals through their complicated existence as artifacts that can at once be helpful apparatuses for discovering one's body and norming devices that position menstruation management as a one-size-fits-all experience.

By the end of the late modern period in the United States, many girls were provided with information about their first menses through institutional menstruation manuals. By and large, menstruation manuals are distinct from puberty books, which seek to describe the broad range of physical and emotional changes that occur during adolescence. Instead, menstruation manuals exclusively focus on menstruation and all its specifics. These manuals were primarily distributed via public institutions, like schools, medical offices, churches, and workplaces.¹ Early examples of these manuals were produced by “feminine hygiene” companies like Kotex, Tampax, Always, and even the Walt Disney Company.² These corporations created manuals to distribute to girls with the hopes of creating loyal consumers. Menstruation manuals arose out of increased social demand for hygiene. At the time, these manuals also reflected a growing scientific understanding of menstruation—one that feminist historian Sharra Vostral explains emphasizes knowledge produced by public health officials and medical professionals. As a result, according to Vostal and Sharon Mazzarella, many popular manuals produced since the late modern period in the US are tied to corporations that present menstruation as a gendered hygienic crisis in need of mitigation through a combination of strict personal responsibility practices, a reliance on institutional systems, and in relation to entrenched gender essentialisms.

The bodily norms perpetuated by these manuals, we contend, have material impacts on the lived experiences of menstruating girls. To further discuss the material impacts of these bodily norms, this article analyzes four menstruation manuals or menstruation sections of puberty manuals produced since the 1930s—*Facts About Menstruation that Every Woman Should Know* (Kimberly-Clark Corporation, 1936), *Accent on You...Your Personal Questions Answered about Menstruation* (Tampax Incorporated, 1966), *The Perils of Puberty* (Planned Parenthood, 1974), and *The Care and Keeping of You 1: The Body Book for Younger Girls* (American Girl Corporation, 1998). We find that these manuals, especially those from the 1930s-1970s, potentially act as norming devices that encourage a standardized notion of menstruation (Woods; Wood). As a result, our article posits that menstruation is a material-discursive phenomenon that menstruators are implicated in from an early age. To analyze how these manuals co-produce the lived experiences of girls, our

¹ For more on these patterns of distributions, see Joan Jacobs Brumberg, Sharon, and Sharra Vostral's work.

² *The Story of Menstruation* (1946), an animated short by Walt Disney, was distributed in schools alongside Kotex's 1948 manual *Very Personally Yours*. While Stone (2021) notes the film was progressive in its use of the word “vagina” and approach to menstruation, it still reinforced modernist hygiene anxieties that upheld class, gender, and racial hierarchies (p. 14).

article explores the following questions: 1) How do menstruation manuals participate in the everyday realities of young menstruators? 2) What are the material-discursive implications of the relationships produced amongst menstruators, the manuals, and other human and non-human entities? To answer these questions, we first establish the connections between our interdisciplinary theoretical approach; we take this approach because we are attentive to how both material and discursive formations are intertwined in the rhetorical processes of menstruation. In essence, our interdisciplinary approach shows how meaning is made across relationships with material entities and through sociocultural practices related to menstruation.

An Interdisciplinary Approach to Analyzing Menstruation Manuals for Girls

To analyze our archive of menstruation manuals, we diffractively read three theoretical approaches—agential realism, rhetorical ecology, and girlhood studies—through one another to show how these manuals are not passive objects that simply transmit information about menstruation but rather actively participate in the becoming of girls.

Agential Realism Framework

Agential realism, as theorized by feminist theorist and physicist Karen Barad, is a diffractive methodology of analysis that aims to radically rethink agency and its overall materializing potential (230). We argue that through a diffractive methodology, of analysis that aims to radically rethink agency and its overall materializing potential (230). We argue that through a diffractive methodology of analysis that aims to radically rethink agency and its overall materializing potential, menstruation emerges as a complex ontology constituted in the *intra-activity*³ of menstruating girls, instruction manuals, and the sociocultural views of menstruation. Our diffractive analysis considers how menstruation manuals are at once predicated on problematic features but still provide positive potential for menstruating girls. Diffractive analysis focuses on processes of difference and how these differences overlap, or are entangled, to co-produce meaning. To diffractively analyze our archive of manuals, we treat them not as isolated texts but rather as entangled phenomena that emerge through their material, cultural, historical, and discursive *intra-actions*. In other words, these manuals *intra-act* not only with the girls who read them but also with the knowledges and sociocultural values presented in them, the technologies they reference, and the spaces and places in which they are presented to girls. Ultimately, our diffractive analysis shows how these manuals participate in the ongoing becoming of girls through their *intra-actions* with one another.

3 *Intra-actions*, unlike interactions, emphasize that entities emerge through relationships rather than existing beforehand—for example, menstruating bodies, menstrual technologies, and sociocultural ideas co-produce one another. Diffractive analysis makes these entangled co-emergences visible.

A Rhetorical Ecology Approach

In conjunction with agential realism, our analysis relies on a rhetorical ecology approach to analyzing our archive of manuals. Formalized by Jenny Rice (previously Edbauer) in her landmark essay, a rhetorical ecology approach recognizes that rhetorical acts are not contained within specific, isolated situations but rather are part of broader flows of discourse, affect, materiality, and power that circulate through a network. This is much like the agential realist concept of *intra-action*. In other words, rhetorical meaning isn't fixed—it is distributed and emergent within material-discursive entanglements. A rhetorical ecology approach, while similar to agential realism, allows us to be directly attentive to the rhetorical dimensions of the manuals we analyze. For instance, we show how our archive of manuals target their audience, the context of their distribution, and their design features. Since rhetorical acts don't happen in isolation, we also consider how the manuals fit into larger discourses about menstruation and girlhood; and, conversely, how these larger discourses are entangled with the production of the manuals. We analyze our archive of manuals as part of the rhetorical ecology of girlhood so we can reimagine girls' relationships with menstruation in their "temporal, historical, and lived fluxes" (Edbauer 9).

A Material-Discursive Approach to Girlhood Studies

We also build on existing girlhood studies scholarship alongside agential realism and rhetorical ecologies because we argue that like rhetorical practices, girlhood is not fixed; it is an active identity that is constantly becoming in relation to material-discursive forces. One of those material-discursive forces are menstruation manuals. For example, Mazzarella highlights how puberty manuals, often produced by corporations, present menstruation as both a natural change and as a trivial experience, which contributes to how girls come to understand their bodies. Similarly, Hannah Froom explains the responses of midcentury women in the United Kingdom to the Menstruation Directive⁴ focusing specifically on their girlhood recollections of the emotions and sensations of using menstrual management technologies. Joan Brumberg connects menstruation to the modernist hygienic crises in the United States, linking it to young women's increased public participation in the late nineteenth century. Menstruation studies scholar Chris Bobel critiques the menstrual management movement's impact on girls in the Global South, arguing that Western values of respectability and productivity reinforce stigma rather than dismantle it. Importantly, Pamela J. Bettis and Natalie G. Adams's collection, *Geographies of Girlhood*, explores the daily material experiences of girls in specific communities with discursive practices. While these scholars provide strong additions to critical-cultural research on the relationship between girlhood and menstruation, we find that not nearly enough exists beyond what we have cited here. Building on this research, our findings show that menstruation manuals are not the neutral, objective tools we often consider them to be.

4 Created in 1996 by postgraduate student Alia Al-Khalidi in collaboration with the Mass Observance Project, the Menstruation Directive draws on the recorded experiences of 238 cisgender women, covering topics from first menses and sex education to menstrual management, advertising, VAT, menopause, and premenstrual tension (Froom).

Menstruation Manuals as Apparatuses

To show how these manuals co-produce the experiences of girlhood menstruation we analyze them as apparatuses. Commonly understood as a neutral tool, apparatuses are often used to measure, observe, or objectively perform tasks. However, Barad argues that an apparatus is not just a tool, nor is it neutral or passive. An apparatus in the agential realist sense is a dynamic process involving material-discursive practices that actively co-produce reality by enforcing boundaries. Simply put, apparatuses are active agents with ethical implications. For our analysis of menstruation manuals, this means that we are specifically attuned to how these manuals do not just present neutral information but rather co-produce meanings of menstruation by setting bodily standards, suggesting menstruation management practices, and persuading girls to interpret their bodies in specific ways.

We located our archive of manuals through the History of Medicine Archives at Duke University in North Carolina. We chose manuals that span a century to show how menstruation as a girlhood phenomenon has changed over time. As we coded the content of the manuals, we were attentive to how they present biological facts about menstruation and what they suggest in terms of cultural practices and management of menstruation. We were also attentive to how the manuals instruct girls to behave in relation to their bodies. More specifically, our analysis focuses on the genre conventions of the manuals, how they address their assumed audiences, and how they may have been circulated. An approach grounded in rhetorical ecology acknowledges that analyzing circulation is key to understanding the *intra-actions* that constitute a networked life. In other words, author, audience, and text do not exist as discrete elements but rather as fluid, distributed acts.

Additionally, our understanding of manuals as dynamic, circulating apparatuses is in line with current scholarship in technical communication that examines the cultural uptake of technical manuals.⁵ Additionally, like Erin Frost & Michelle Eble, we understand the specialized information present in these manuals to be persuasive in that they influence public audiences to feel, act, and think in a certain way. The technical rhetorics present in the manuals “encourage public participation in meaning-making” (Frost and Eble 1) precisely because they are implicitly persuasive and specialized. Following the analysis of these manuals’ genres, audiences, and circulation, we discuss the broader implications of a material-discursive analysis through our personal experiences with the manuals.

Genre Conventions of Menstruation Manuals

To analyze the genre conventions of these manuals, we determined if the manuals represent medical, corporate, and/or popular culture texts to compare differences in how boundaries are produced. For the purposes of this article, we define menstruation manuals with a medical focus as those that mostly focus on

⁵ For more on this discussion, see Beverly Saur, Miles Kimball, Marika Siegel, Sarah Hallenbeck, and John Wilson Ramey’s work on the cultural dimension of technical communication.

the biological processes of menstruation without much discussion about the sociocultural implications of menstruation. Conversely, we define menstruation manuals produced by large corporations that sell menstruation products as exhibiting product promotion alongside educational information about menstruation. Finally, we assert that menstruation manuals with popular cultural influences tend to focus more directly on the social and cultural assumptions of menstruation. Despite the categories we ascribe to the manuals in this section, it is important to note that none of the manuals in our archive occupied one clear category of production. The fluid boundaries of these genre conventions demonstrates that these manuals were never designed to serve a singular purpose but rather were written specifically to impact and instruct audiences in multiple ways. All the same, we found that our predefined categories helped us make sense of the information in the manuals, and most importantly, made us understand when and how each manual blurred the boundaries of these genres.

The oldest manuals we analyzed were authored by corporations that produce menstruation products. For example, the 1936 booklet *Facts About Menstruation that Every Woman Should Know* presents as a corporate text but heavily relies on scientific writing and biological facts. The Kotex manual mysteriously states that it is written by an unnamed “imminent medical authority,” demonstrating an appeal to the scientific and medical perceptions of menstruation. Furthermore, alongside both cultural and scientific information about menstruation in the booklet, a reader can find advertisements for specific products. We consider these advertisements as much a part of the manuals as any other information and, therefore, worthy of analysis. For example, the first double-page spread that a reader comes across in the manual features an ad for Quest, “the positive deodorant powder,” next to the first page of the introduction to the manual (Figure I). This product is advertised as a deodorant powder that can be used all over the body, but has a main purpose of being sprinkled directly onto menstrual pads that girls and women wear during menstruation, or directly into underwear if a woman uses tampons. The tagline for this ad states, “Personal daintiness is the first rule of loveliness.” This example directly shows how discursive elements forward the cultural idea that menstruation, and by association female body scent, can and must be meticulously controlled using products like powdered deodorants. In other words, this harmful cultural positioning of menstruation *intra-acts* with Quest, a material product, and co-emerges in the rhetorical process of understanding menstruation and how one should act in relation to this bodily phenomenon. The positioning of this advertisement alongside the information in the manual implicates girls from an early age in the idea that menstruation is shameful and must be hidden. Kotex’s inclusion of the Quest ad is also a hallmark of a corporate manual. These manuals were not just about providing girls with information on how to care for their bodies, it was also about making girls into loyal customers.

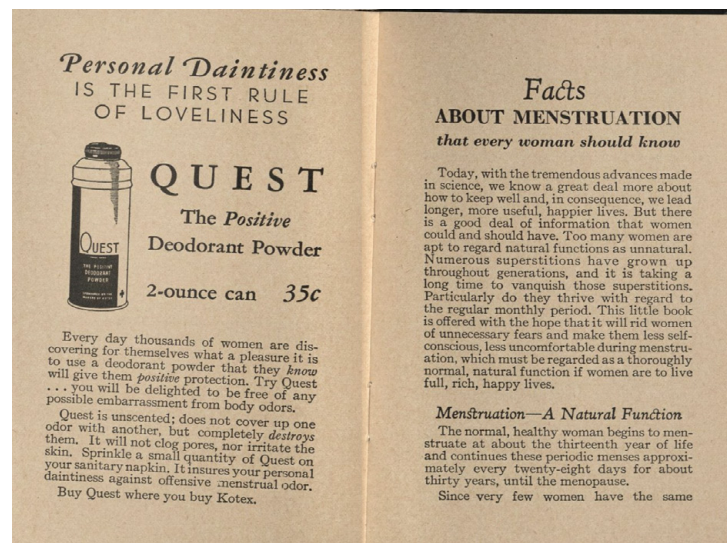


Figure 1: Kotex Quest ad as shown on the first double page spread of the 1936 booklet called *Facts About Menstruation that Every Woman Should Know*.

Similarly, *Accent on You: Your Personal Questions Answered about Menstruation* (1966) from Tampax is a corporate manual. *Accent on You* (hereafter *Accent*) was developed during the tampon boom of the 1960s,⁶ a time when Tampax began to have greater rivalry from companies like Playtex and Johnson & Johnson. In the 1960s and 1970s, fierce competition arose in the feminine hygiene industry. Companies like Playtex, Kimberly-Clark, and Johnson & Johnson debuted their own tampons, adding to a growing market where businesses had to adapt more quickly to reach customers. Innovations like smaller tampons, plastic applicators, and greater absorbency led to tampons becoming a more practical way for women to manage their periods. This led to the first-ever tampon ads on television in 1972, marking a significant shift toward talking more about menstruation and management technologies in public spheres.

Although *Accent* most closely aligns with a corporate style, the visual content appeals to what girls may have found popular in the 1960s. Illustrations of stylish outfits and haircuts present a trendy tone that shows how much the Tampax corporation wanted to target girls. The manual was produced by the education department at the Tampax Corporation and contains a fair amount of medical information despite the focus on selling Tampax pads. For example, a section titled “What Menstruation Is...” details the phases of the menstrual cycle with specific attention to how the cycle works concurrently with a fertility cycle (4) (Figure 2). This detailed medical information exists in contrast to the advice on a subsequent page, where the authors note that Tampax tampons “fit into even the smallest of date-size purses, thus making it easy to stay fresh through an evening of fun” (7) (Figure 3). This is an example of how the hygienic crisis of menstruation co-emerges with material products like the tampon

⁶ Girls and unwed women were unlikely to use tampons. When mass-produced tampons emerged, public concern grew over their intra-vaginal nature and required bodily interaction. Fears escalated with the belief that tampon use could lead to girls’ and women’s self-sexualization (Stone, p. 112, 2021). These anxieties faded as tampon use became more common in the 1970s.



Figure 2: Tampax (1966) *Accent on You* includes a description of the phases of the menstrual cycle.



Figure 3: Tampax (1966) *Accent on You* discusses the impact of menstruation on school and dating.

We found that the manuals that were developed in the mid-twentieth century fit even less neatly into a single genre. *The Perils of Puberty* (hereafter *Perils*) was especially nuanced as it was published and distributed by Planned Parenthood, a non-profit organization. This text embodies a popular culture feeling with textual elements that make clear attempts to come off as approachable, hip, and exciting. For example, Sheri Tepper⁷, the manual's author, included several instances of what feels like tangential knowledge that assert a clear desire to talk about provocative issues. For example, Tepper advises:

7 Tepper served as Executive Director of the Rocky Mountain chapter of Planned Parenthood from 1962 to 1986 and was also a prolific science fiction writer who identified as one of the first ecofeminists. Publishing over forty works of speculative fiction, including *Grass* and *The Gate to Women's Country*, her stories often blur the line between critique and endorsement of controversial ideas. We highlight Tepper because *Perils* similarly plays with controversial ideas in ways we found both compelling and unsettling.

One of the best muscle relaxants available is alcohol, and one ounce of liquor (ONE OUNCE) in juice or soda will almost always stop really painful cramps... Now right away some people are going to say that there are so many teenage alcoholics around that no one should say that alcohol is good for anything. Well, you see all those beer and wine ads on TV and in magazines and papers. None of those ads tell you that alcohol is good for anything, but they all try to make you believe that drinking is adult, smart, or attractive. It isn't adult, because secure people don't need to drink; it isn't smart, because no other drug causes as much trouble as alcohol; and it isn't attractive, because nothing is messier or sloppier than being drunk. It is, however, good for menstrual cramps (ONE OUNCE) and for old people who have circulatory trouble. Maybe if you know what it is good for, you'll be able to figure out what it isn't good for. (4)

This example also shows how *Perils* achieves a trendy feeling with a conversational tone alongside comic book-style artwork and thick, bubbly header fonts (Figure 4). *Perils* considers a broad range of puberty experiences in addition to menstruation. For example, the pamphlet includes two pages dedicated to the “Perils of Your Family,” mentioning that “family obviously belongs to another generation... Half the time they may be pushing you to grow up, and the other half they may be trying to keep you a baby” (8). While earlier manuals also discussed dating, *Perils* was the only one in our archive to talk about sexual activity and desire explicitly. Tepper explains, “People used to believe, or pretend to believe, that women do not have sexual urges. If society pretends something long enough, people begin to believe it. However, we know that women have just as strong a sex drive as men do, though it may not be quite as easy to put that drive in motion with some women” (14). This more expansive view of the impact of menstruation on girls’ lives exhibits both the tone and mission of Planned Parenthood, but with an increased acknowledgment that girlhood is emotionally and physically complex.



Figure 4: Planned Parenthood's *The Perils of Puberty* pages discussing the impact of menstruation on friends and the perils that come with sex. The headline reads, “the perils of sex.”

Like *Perils*, the American Girl Corporation's *The Care and Keeping of You* (hereafter *Care and Keeping*) blends a popular culture aesthetic with medical manual conventions and similarly focuses on several aspects of puberty for girls.⁸ Like the Kotex and Tampax manuals, *Care and Keeping* is a corporate manual, but not in the same way as its foremothers. The American Girl Corporation is not a health product brand but instead built its empire on a series of books, dolls, and doll accessories that show American history through the experiences of girls. Readers will also not find advertisements for American Girl products throughout *Care and Keeping*. Furthermore, *Care and Keeping* exhibits a diverse array of bodies and racial identities, a departure from previous manuals that mostly focused on thin, white female bodies.

Despite the detailed medical information presented in the manual, it is authored by copywriter, Valerie Lee Schaefer, who worked for *American Girl Magazine* in the 1990s. While we assume that the author consulted many medical texts to write this manual, the ways that certain medical texts influenced *Care and Keeping* remains elusive as there are no references to such texts throughout the manual. Despite the fact that the manual was not written by a medical professional and that the connection to existing medical literature is not made clear, the manual presents accurate, trustworthy information that aligns with general public health knowledge about puberty and menstruation. For example, in the "Basic Facts" subsection of the portion of the manual that covers periods, the opening passage reads:

So, what is a period anyway? It's short for *menstrual period*—the period of time each month when fluid containing blood flows out of the *uterus* through the *vagina*. The amount is small, only 4 to 6 tablespoons. This flow usually lasts two to eight days. Some girls have a menstrual period every 25 days. Other girls have them up to forty days apart. All are normal. (70)

This information follows medical scientific observations about menstrual cycles, showing that *Care and Keeping* exhibits a unique blend of presenting factual biological information in an approachable and exciting way. This information also departs from earlier manuals in that it tries to normalize a wide variety of ways that any one girl might experience menstruation.

This blended approach shows a trend within these manuals—as time has progressed, the manuals appear to take on much more subject matter, tend to occupy multiple genre categories, and evolve how they approach information about menstruation, demonstrating their role as apparatuses. For example, in a departure from the 1936 Kotex manual, *Care and Keeping* discusses menstrual deodorizers not as an advertisement but as part of the main text. Further, the manual does this without reinforcing menstrual stigma:

Most pads and tampons are available in both deodorant and nondeodorant versions. Deodorant products have perfumes and other chemicals to fight odor caused by fluids and moisture trapped in a pad or tampon. But they can also irritate skin and cause allergic reactions. You're better off

8 While many reprints, volumes, and spin-offs followed the first edition of *Care and Keeping*, our analysis centers on the original 1998 manual. This edition is genre-defining and personally significant to us, as it was the edition we both encountered as girls approaching puberty. The book is divided into sections on "body basics," hygiene, eating disorders, puberty, and emotions. Our focus is on the "Period" section within "Body Changes," which most directly illustrates how menstruation knowledge is conveyed to girls.

using unscented products and keeping yourself fresh by changing pads and tampons regularly.
(73)

This passage shows how much menstrual information evolved between 1936 and 1998 when *Care and Keeping* was published and how new, more expansive genres emerged alongside these texts. The author directly points out how deodorizers are probably best not used, and rather than relying on them to mask bodily scents, a better practice is to routinely change pads or tampons. This positioning of information teaches girls how to care for themselves and to practice good hygiene in a way that deemphasizes menstrual shame and stigma; further, it instructs girls on how to choose menstruation technologies that can have a direct material impact on the body.

The Circulation and Intended Audience of Menstruation Manuals

Based on our diffractive approach, it is clear that these manuals co-produce material-discursive cultures of girlhood. It is also clear that girlhood meant, and means, something different depending on when a manual was written and circulated. For example, the circulation of each manual was filtered through powerful institutions, families, clinics, and schools. *Accent* was primarily distributed at schools, meaning that only girls within formal schooling systems had access to them. Importantly, segregation in public education was not prohibited until 1954 and integration took many more years to institute. This means that access to these materials was stratified based on socioeconomic class as well as race. Conversely, *Perils* was most likely distributed at Planned Parenthood clinics. With Planned Parenthood's more expansive views on sexual and reproductive health, we can assume that the circulation of *Perils* and its audience was limited to those with similar views on the subject.

Histories of menstruation by Joan Jacob Brumburg, Sharra Vostral, and Lara Friedenfelds show that menstruation manuals have circulated through domestic spheres, schools, and medical settings to engage girls in discourses about their changing bodies. As manuals circulate, there is *intra-action* amongst different menstruating bodies, cultural expectations, and institutional practices, which are all entangled with how we make meaning about menstruation. As we have previously argued, the manuals in our archive are apparatuses that actively participate in the co-production of knowledge and being, particularly concerning menstruation. Importantly, part of this co-production includes how these menstruation manuals appeal to their intended audience and how they are circulated. The intended audiences for the texts varied slightly depending mostly on genre and timeframe, as did the sites of circulation and distribution. Though all of the manuals worked to address girls who were experiencing or about to experience puberty, the exact age categories and additional audiences shifted.

The Kotex manual was designed for girls to read, but also very much for their mothers. The Kotex company commissioned their education department to produce the booklet and distributed it through the mail. The dedication on the inner sleeve of the envelope that the manual was mailed in is to "Mothers The World Over," and is addressed with the urgent call of "Mothers! Don't Wait!" (Figure 5). While this manual mostly

refers to “women” rather than “girls,” we assume that girls would have received a copy from their mothers. Additionally, because this pamphlet is cast as a “mailer,” girls and young women would mostly gain access to it through their mothers mailing off for it. The circulation was, we assume, probably largely dependent on mothers buying Kotex products for themselves and finding an ad in a box to mail off for a pamphlet for their daughters

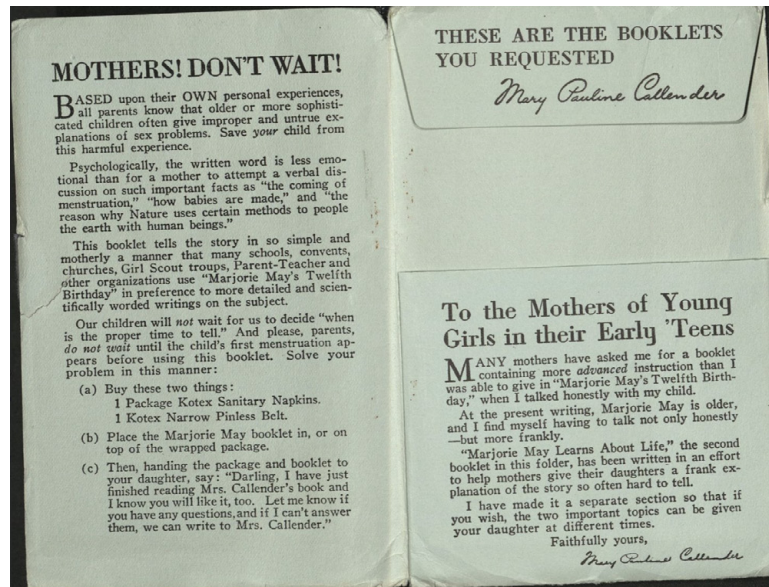


Figure 5: Mailer that Kotex's pamphlet arrived in.

Similarly, while Tampax's Accent emphasizes the journey of womanhood, we argue that this booklet is aimed at girls as well. That is immediately evident on the opening page where the booklet states, “Judging from questions we’ve received from girls just like you, we know that many of your doubts and wonders revolve around the subject of menstruation” (3). In addition to mailing off for manuals, they were also likely accessed through ladies’ home journals, by word of mouth, or even passed out in schools and physicians’ offices. For example, in 1941, Tampax began to send educators known as the “Tampax Ladies” to schools and universities, as well as trade shows and conventions, to distribute education pamphlets (“The History of Tampax”). The way these manuals were distributed to audiences and how that distribution has changed over time is another direct example that shows how menstruation manuals are material-discursive apparatuses. These manuals used to come in the mail or get physically passed out to girls. Now girls can simply search for information about menstruation on the internet or download an app like Girlology, a point we discuss more in our conclusion. This shows how the circulation and distribution of knowledge has a materiality. In other words, the content of the manuals co-emerges not just over time but also in relation to how it is physically presented to its audience.

Because Planned Parenthood's *Perils* adopts an adult tone through jokes and plain language about sexual health, we argue that this manual is probably meant for adolescent girls—girls who were likely to be entering high school. As an example, it is clear that Tepper is attempting to challenge prescribed, hyper-feminine norms, like when she demands, “Just because you are menstruating or growing breasts DOES NOT MEAN that you are now a delicate creature. You’re not. You’re going to live longer than most of those strong boys,

and you're going to have more endurance" (5). Still, there are moments throughout when the language can't seem to balance its needs and reifies harmful patriarchal discourses about girls' bodies and their sexuality. For example, "There's another reason for not shoving your breasts into everyone's eyes. There are a certain number of sickies out there who will take it as an invitation to give you a lot more attention than you bargained for. Don't 'offer' yourself unless you're ready for some nasty attention" (5). This excerpt reflects the type of second-wave feminist sentiments that younger generations of feminists have worked hard to move beyond by encouraging sex education that challenges the idea that girls and women who dress a certain way are "asking for it." Further, we were unable to find information about how Planned Parenthood pamphlets were distributed more broadly, but we assume that they were given out at their clinics. This means that girls' access to these manuals was probably filtered through their parents or their ability to access a Planned Parenthood clinic.

Care and Keeping feels more oriented toward younger girls, though the American Girl Corporation has since written a book for older girls. The author mentions that she intended to target pre-adolescent girls between ages 7 and 11. The manual positions itself as a "self-health" text for children, specifically girls. This neologism is a play on the term "self-help" but with a specific emphasis on personal health and well-being. Much like the 1966 Tampax manual, *Care and Keeping* was developed in response to letters that girls wrote to the American Girl Doll organization to be featured in American Girl Magazine. After thousands of letters were sent in, the founder of American Girl, Pleasant Rowland, and the magazine's editor at the time, Barbara Stretchberry, knew there was a need for a longer book to address the issues girls were writing about⁹. These letters are featured throughout the book in between each of the major sections. What's more, speaking from personal experience, we both received a copy of *Care and Keeping* when we were in this age range. The original circulatory strategies of the manual are not clear, but they were effective; *The Care and Keeping of You* is a remarkably popular and successful book. Since its first print, the manual has sold over six million copies and is widely considered the #1 growing up guide for girls (American Girl).

The analysis of circulations is limited by what is documented within the archives and in broader histories of these manuals. We cannot fully account for the information and circulation of these materials that may have happened on the margins. For example, Hannah knows that a single copy of *Care and Keeping* made its way through the entire fifth grade in her school, stored in a bathroom stall until a teacher turned it into the administration. Rather than offer a complete picture of these texts' circulation and distribution to their audiences, we contend that this demonstrates the role of institutions in the rhetorical ecology of menstruation manuals. The texts were authored and distributed by institutions and frequently filtered through multiple complex environments before girls could access them. As such, reliance on institutional systems was not only enforced within the text but also in the creation and circulation of the manuals. This kind of circulation is a major departure from how knowledges were once circulated before the institutionalization of menstruation. Before this, girls counted on knowledges about their menstrual cycle and management technologies to be passed down to them by previous generations. Brumberg argues that in many "traditional communities"

⁹ See Tanya Basu and Morgan Sung on the history of the book's production and its importance to tween health.

in early US history, sexually maturing girls learned about menstruation within a single-sex environment or through what was called “women’s culture.” Brumberg further explains that learning about being a woman “...was a kind of ‘integrated, core curriculum’ that happened organically as part of day-to-day life” (106). In the absence of books and pamphlets about female biology, girls before the nineteenth century often learned about menstruation and menstrual management technologies by word-of-mouth from older women in their families.

The Material-Discursive Implication of Menstruation Manuals

Menstruation manuals can be truly profound sources of meaning-making for those who read them. This profundity is due in part to how readers embody the knowledges these manuals present. In her examination of breast pumps (an apparatus), Jordynn Jack argues that “the ways that we live in and through our bodies are inextricable from the technologies we use” (209). In other words, embodiment is dispersed through technologies (Melonçon 68). In this case, we argue that embodiment is dispersed through menstruation manuals. We also draw on Abby Knoblach who argues that embodied knowledge “begins with [a] bodily response...a trigger for meaning making that is rooted so completely in the body” (54). In this regard, menstruation itself is embodied knowledge because it is a bodily act imbued with physical, emotional, and material experiences. Taken together, in our treatment of menstruation manuals as apparatuses, we have argued throughout this article that the information in these manuals (and how that information is presented to readers) participate in the experiential knowledges that are generated through the bodily act of menstruation.

During our data collection process, we realized that it would be difficult to show how these texts participate in the meaning-making process of menstruation without at least some direct experiences to point to as examples. Maureen Johnson, et. al. understand this kind of approach in their argument that bodies are sources of rhetorical power—sites of meaning-making—that can and should be considered when conducting feminist research projects. As feminist researchers who have both had menstrual cycles since girlhood, we feel it is important to include our experiences with the *Care and Keeping* manual in our analysis. Put differently, we use our own experiences to show how our relationships with menstruation, and more largely, puberty, were materialized through reading *Care and Keeping* as girls.

Hannah received *Care and Keeping* as her first puberty manual. Hannah and her mom would read through the book together, and when she had her first menstrual cycle that year, Hannah felt much less scared than some of her peers about the many new sensations. Particularly, the images of growing breast tissue stuck in her mind for years as she was teased for being an “early bloomer.” *Care and Keeping* served as a reminder that the things happening in her body were supposed to be happening.

Melissa clearly remembers getting *Care and Keeping* one Christmas when she was on the brink of puberty. She read the book constantly and remembers feeling a sense of authority over her body because she could guess at the things that would eventually happen to it. One morning in fifth grade, Melissa put on her favorite

navy blue knee-high socks to wear to school with a plaid skirt (like the girls in the 1994 film *Clueless*). As she pulled on her socks, she felt a ripple of tiny shocks up her shins only to discover that the socks were pulling at the long leg hairs that had developed seemingly overnight. But because she had religiously read *Care and Keeping* she felt prepared for this moment, and rather than being scared and disgusted with her own body she was excited by the sign that she was growing up. Later, that same year, Melissa experienced her first period. With her mother out of town when it happened, she took solace in *Care and Keeping* because it contained such a wealth of information about how to navigate a menstrual cycle.

While not representative of all girlhood experiences with menstruation and puberty, our examples show the onto-epistemological relationship¹⁰ we each had with *Care and Keeping*. We were able to navigate the material realities of menstruation and puberty through the information presented to us in the manual. Further, while both of our experiences show that even though the manual was no stand-in for the connections we sought with our mothers, the manual was there to inform us in times when our mothers were unable to give us their versions of menstrual knowledge.

Additionally, in a recent class taught by Hannah, the students were discussing their first experiences with sexual education, and every young woman identified *Care and Keeping* as a central text for developing an understanding of their own body. Hannah brought a copy to the next class session, and the students stayed after to carefully look through each page and share stories about how it affected them. Many of the students noted that their schools did not have any formal puberty or sexual health education—*Care and Keeping* was all they had. Given the current state of reproductive rights and the removal of funding for sexual health education in public schools, trustworthy, inclusive puberty and menstruation manuals are more important than ever.

The Future of Girlhood and Menstruation Manuals

As we argue throughout this article, meanings of girlhood emerge alongside complex material-discursive ecologies, and that has only become more apparent in our current landscape of reproductive health. Contemporary menstruation now involves even more educational sources and diffracted agents—tracking apps, social media influencers intent on instructing others on how to “fix your period,” and new menstrual management technologies in the booming Femtech¹¹ field, to name a few. The *intra-activity* present in the lived experiences of menstruators does not exist in isolation and is not fixed. As a result, we ask future scholars to consider how the meanings of girlhood and menstruation have changed within an increasingly digital and technological environment. For example, in our initial analysis, we looked at a fifth manual—the *Girlology, Inc.* app. Truth be told, we were both overwhelmed by the sheer number of resources presented for girls and their mothers within the app. Because of the amount of information in the app, we decided to shift it out of

10 The term onto-epistemological is a Baradian neologism that refers to the inseparability of ontology (ways of being) and epistemology (ways of knowing). We use this term to show how menstruation manuals act as apparatuses that actively participate in the ongoing co-production of both knowledge and being.

11 The Femtech industry is a multi-million dollar industry that has seen major growth since the term was coined by Ida Tin, the Danish entrepreneur who founded Clue, a popular fertility and menstrual tracking app. We note the origin of Femtech because of its specific tie to menstruation.

our main analysis and instead consider how it offers us a picture of what girlhood looks like in our current moment. On the *Girlology* website, it states, “Girlhood doesn’t come with a guide, so we built one for you” (Girlology). This statement shows how finding information about menstruation now requires very little effort. The Girlology app is available on personal devices like smartphones and tablets, and has a web platform. Once the app is set up, it is easy for girls to access it without supervision or direction from parents. Accessing health information is neither solely reliant on family and community channels of learning nor on traditional institutions. Instead, it is even further diffracted through the use of digital technologies.

Young menstruators are balancing breadth and depth of information, unlike anything we have seen before. For instance, the *Girlology* app contains hundreds of videos addressing countless facets of menstruation, from a range of menstrual management technologies to a series discussing menstrual illnesses and how to talk with a physician. We argue that as technologies and circulation strategies shift, it is important to continually consider the broad implications within these manuals and their potential to continue reifying strict personal responsibility practices, reliance on institutional systems, and entrenched gender essentialism. We also argue that an overabundance of information is not necessarily better for girls. Instead, what matters is ensuring that information about menstruation is accurate, accessible, and free of outdated cultural influence that positions menstruation as shameful.

We close our article with a call for more scholarship that not only takes a material-discursive perspective of menstruation more broadly but also for more scholarship that features girlhood experiences related to menstruation. More specifically, scholarship in rhetorical theory and technical communication about girlhood is virtually non-existent. In these fields, we are accustomed to posing research questions about the implications of technical documentation related to automotive repair (Kimball), workplace communication (Randazzo), and medical surgeries (Frost and Eble) to name a few; however, we have not yet explored similar research questions about menstruation-related documentation for people of all genders. Some closely aligned scholarship provides a small yet strong foundation to build from. For example, Marika Seigel’s work with pregnancy manuals, a *Peitho* special issue about *Our Bodies, Ourselves* (DeCaglio and De Hertogh), and our own dissertations (Stone; Taylor) are important scholarly additions to the subject; but there is a dearth in rhetorical work about menstruation broadly and from the perspective of girls and young women specifically. Hence, it is our hope that this article, and more largely the special issue in which it appears, provides a valuable contribution to the rhetorical perspectives of menstruation and girlhood studies.

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Embodied Expertise through Activist Toolkits

Risa Applegarth

Abstract: Scholars studying young activists need to attend closely to how they experience growth and gain the literacies they put to use in their public writing and speaking. The concept of uptake from rhetorical genre studies offers insight into how activist toolkits organize rhetorical resources that scaffold and support young activists' embodied performances. Beyond merely gathering resources, menstrual activism toolkits operate as a site for rhetorical training, enabling novice activists (regardless of age) to transform their experiences into embodied expertise.

Keywords: [age](#), [activism](#), [youth](#), [genre](#), [uptake](#), [embodiment](#)

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How do young people learn and practice activist literacies? How do they gain experience, comfort, and fluency with the range of literate practices that they may employ as individuals or collectives engaging in advocacy work? Feminist scholars who aim to consider young people's activism through situated analysis—avoiding the dismissiveness of concepts such as “digital natives” or “slacktivism”¹ should attend closely to how young people experience growth and how they develop activist literacies over time. Earlier this year, I attended a public webinar offered by Zainab, a student in my undergraduate rhetoric course, who offered advice to other students across North Carolina about how to take up community engagement and advocacy in ways that align with their values, skills, and goals. Responding to a question about how those in the audience could try unfamiliar or uncomfortable forms of outreach, such as calling a congressional representative or speaking publicly about an issue of concern, Zainab advised her audience to compose or find a script they could use to feel more comfortable and prepared. Her response bears on the questions I take up in this essay, as it emphasizes how embodied practice can ease feelings of discomfort, and how materials that seem directive, such as scripts and templates, can in fact scaffold and support embodied practices, enabling significant and even transformative bodily experiences for those who use them.

1 “Slacktivism” is a term of disapprobation often lobbed at those engaging in social media discourse—which is not limited to young people, of course. See Nish, *Activist Literacies* pp. 9–12 for a discussion of the reductive and ableist implications of the term.

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In what follows I draw on the concept of *uptake* from rhetorical genre studies to query how a particular genre—the activist toolkit—fosters forms of uptake that help menstrual activists cultivate embodied expertise. As I show, by providing readers with scripts and language to be taken up in performance, toolkits cultivate young people’s development of activist literacies. The scripts, templates, and other rhetorical resources that toolkits organize make them an especially valuable site for both study and practice, allowing inexperienced advocates, whatever their age, to take up activist practices and take on activist identities and dispositions. Toolkit materials can foster activists’ rhetorical capacities, making toolkits not only tools for use but also spaces for practice and avenues for embodied rhetorical training.

Age, Expertise, and Advocacy

Young people face challenging rhetorical circumstances as advocates, in part because “expertise” is a concept closely related to age. For instance, the popular, widely-circulated (though inaccurate) idea that it takes 10,000 hours of practice in a given domain to become an expert is one indication of the close association between age and expertise.² Many audiences more easily acknowledge older rhetors as “experts,” even as some specific forms of knowledge and skill (with technology, for instance) are commonly characterized as the expert purview of the young. Age bears on attributions of expertise not only in vernacular uses, but in rhetorical scholarship as well. Johanna Hartelius has demonstrated that expertise is relational, negotiated between a rhetor and audience. Hartelius defines expertise as “a special relationship between a subject matter, a public, and one who masters and manipulates the former for the latter’s benefit or need” (1). Her case studies reveal repeated practices through which rhetors establish expertise: they position themselves within networks of other experts; they showcase their authenticity and legitimacy through their skillful use of language; they adopt a pedagogical stance relative to their audience; they employ identification to show how their expertise is relevant and beneficial to their audience; and they situate their expertise in relation to an exigence that the audience recognizes.³ In Hartelius’s useful formulation, expertise is *negotiated*—it is neither fully autonomous, based entirely in credentials or knowledge, nor fully symbolic, based entirely in attributions of expert status made by others.⁴ This negotiated quality of expertise helps to explain why young people face significant constraints in their efforts to persuade audiences of their expertise: their age-related identifications, like other embodied markers of difference, may work against audience recognition of their expert knowledge in particular domains. Related to but distinct from the broader concept of *ethos*, expertise is both a performed status and a learned competency. If expertise takes time to develop, how can an expert role be performed successfully by a young person?⁵

2 This figure was included in Malcolm Gladwell’s bestselling book *Outliers*; it’s been both disputed and recirculated many times since that book’s publication in 2008.

3 Hartelius, 18–29.

4 Hartelius, 3–4.

5 For rhetorical treatments of expertise, see Hartelius; Condit; Moriarty and Mehlenbacher.

The emergent space of menstrual activism offers an especially fruitful opportunity for young people to develop activist capacities. As the essays in this special issue attest, menstruation is an embodied experience that is deeply age-inflected, instigating an array of emotional, social, familial, religious, financial—and even political—shifts for many who experience it. There is growing awareness that period activism is needed to address myriad inequities that attend menstruation. Lack of access to period products causes hardship for many menstruators. Students report missing school when they lack period supplies. Incarcerated people often pay steep prices for menstrual products or lack access to menstrual products entirely. In the U.S. and many other countries, period products are subject to rather than exempted from sales tax, exacerbating poverty-related inequities for those securing period supplies. The use of plastics and harmful chemicals in many period products have prompted advocacy efforts focused on sustainable and reusable period products. Underlying most of these efforts is an acknowledgement that menstruation remains a stigmatized experience. Widely-circulating stigmas and cultural messages of shame based in misogynistic beliefs about female bodies intensify the unequal burden menstruators experience and heighten the impacts of lack of access to period supplies.⁶ Period activism around these issues is often grounded in embodied experiences. In other words, embodied experiences of menstruation, of stigma, of lack of access to period products, and of the educational and financial consequences of lack of access: all of these generate opportunities for activism. Menstrual activism toolkits, as I argue below, operate as scaffolds for young activists to transform these experiences into expertise.

Because young people face constrained rhetorical circumstances, shaped by pervasive beliefs about *youth* and *childhood* that circumscribe their available means,⁷ cultivating and demonstrating forms of expertise that transform their age from a liability to a rhetorical resource is a key tactic employed by young activists. As sociologist Barrie Thorne explains, “like gender, racial ethnicity[,] and sexuality, age is an embodied form of difference that is both materially and discursively produced and embedded in relations of power and authority” (150). Expertise among young activists is cultivated and performed through repetition of and familiarity with advocacy-related genres, situations, and literacy practices. The literacies that activists use to garner attention, communicate with audiences, stage events, frame or define a problem, and marshal collectives toward shared goals are—like all literacies—learned and embodied. Activist literacies encompass not only technical skills, such as how to navigate a city website to request a permit to hold an event, but also broader dispositions and embodied attitudes, such as a willingness to risk failure in pursuit of a collective accomplishment, or an attitude of openness to undergoing change through engaging with others in discourse. Learning to adopt embodied dispositions toward productive discomfort and vulnerability are vital experiences that enable young people to both acquire and perform activist expertise.

The remainder of this essay first provides an overview of the scope and variety of discursive “tools” in-

6 Menstrual advocacy is undertaken generally on behalf of all who experience the embodied event of menstruation, regardless of the gender identities of menstruators. Menstrual advocacy toolkits typically adopt gender-inclusive language, using phrases such as “girls, women, and people with periods” and “all those who menstruate.”

7 See Applegarth, *Just Kids*, 10-15.

corporated into menstrual activism toolkits. These tools indicate the varied embodiments and purposes that toolkit authors imagine for users of these materials. Through this overview, I underscore the extent to which toolkit authors imagine an audience that does not only *take in* information about menstruation and menstrual advocacy, but an audience that *takes up* the toolkit to *take on* unfamiliar roles as activists, educators, and advocates.

The range and variety of rhetorical materials that toolkit authors create—encompassing instruction, narration, technical information, strategy guidance, samples, templates, and so on—call for an analytical approach that centers *uptake*, a key concept from rhetorical genre studies. Uptake names an embodied form of recognition and strategic selection, a capacity for intertextual response that is embedded in sociocultural learning, often implicit rather than explicit, and deeply habituated. Scholars have grappled for decades with the concept of uptake, elaborating on its theorization by Anne Freadman and expanding scholarly attention to a dimension of communicative activity that often evades scrutiny. I use Dylan Dryer’s formulation of *uptake affordances* to investigate the way that menstrual activism toolkits offer samples, resources, lists, guidelines, and so on as scaffolds for embodied performance, scaffolds that ultimately help users develop a bodily habitus of expertise.

The final section of this essay considers how these uptake affordances elicit users’ expertise. In what ways do the materials in activist toolkits offer users the opportunity to enact expertise maneuvers? Ultimately, my analysis demonstrates how textual affordances can scaffold embodied performance, making it easier for would-be activists to take on unfamiliar bodily roles. Toolkits offer not only resources and templates, but learning opportunities—opportunities to enact, to practice translation and transformation, to perform and embody a stance of expert relative to a range of audiences. This analysis makes menstrual toolkits legible as scaffolds for performance and as spaces of rhetorical training for young activists. Toolkit users practice drawing their embodied experiences into claims of knowledge and expertise. As Zainab asserted when she advised young advocates to manage their nerves by speaking from a script, such scaffolds can alleviate discomfort with new tasks and, over time, enable performances that work as demonstrations of an advocate’s expertise.

Toolkits: Assembled Materials, Varied Uses

The term “toolkit” identifies a capacious genre in which an array of discursive “tools” are assembled for the varied potential uses imagined by toolkit authors. A toolkit is typically a digital compilation, often a downloadable PDF, Word document, or slide deck, available through a website and explicitly inviting users to take up the toolkit for a range of purposes. The audience and purpose of a toolkit is often identified on the cover page and sometimes articulated more fully on an interior “About this toolkit” or “Overview” page. For instance, the *Period Supply Drive Toolkit* offered through the Alliance for Period Supplies explains on the cover page that “This toolkit includes helpful tips, handouts, flyers and more!” (Figure 1)

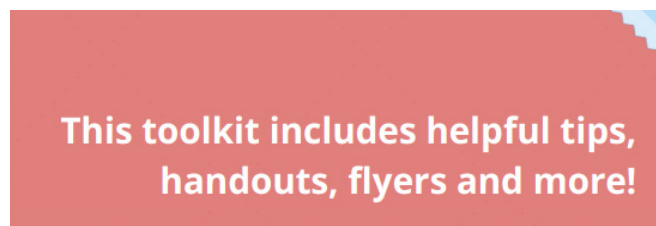


Figure 1: Detail from cover page of the Alliance for Period Supplies' Period Supply Drive Toolkit.

Other toolkits articulate in their titles the audience and purpose for which they were designed, such as *The Menstrual Equity for All Act: A Toolkit for California K-12 Students*, or the *Toolkit for Marking 5th International Dignified Menstruation Day*. The “Advocacy Toolkit” offered by the organization *Period for Change* carries on the title page the subhead, “How Girl Up USA Clubs and Leaders can Advocate for Menstrual Equity,” specifying an audience and purpose that are articulated more fully inside the toolkit (Figure 2):

About the Toolkit

This toolkit provides tools and resources for Girl Up Clubs and leaders to engage in menstrual equity advocacy activities utilizing grasstops, grassroots, and digital activism approaches. Tools provided include a template letter to one's representative and guidelines for recording social media content. Resources provided include publications on menstruation and menstrual equity from leading advocacy organizations and partners, in addition to a look at how Girl Up Clubs around the world and in the US have included menstrual equity advocacy in their work toward gender equity.

This toolkit was developed by [Girl Up](#), an alliance at the [United Nations Foundation](#), and funded by the Global Menstrual Equity Accelerator.

This toolkit features youth stories submitted by:

Ananya B.
Katie M.
Tanya V.
Téa T.

This toolkit was developed and designed by Keila Escobedo. Graphic design by Nursena Caksen.

Figure 2: Screenshot from internal page of Period for Change's Advocacy Toolkit.

The “tools provided” in this toolkit are discursive ones: “a template letter” and “guidelines for recording social media content,” in this case. Some toolkits identify authors and contributors explicitly, as in the example above, but many omit information identifying their compilers by name.

Announcing their audience and purpose as they do helps to underscore the way in which toolkits function as “sociotechnical artifacts ... containing translation resources” (Wilner et al) – that is, resources for translating knowledge and experience across varied local contexts. Toolkits are “made to travel,” as Christopher Kelty has argued: “by taking what works at a local level, attempting to quasi-formalize it, and inserting it into a briefcase so that it can be carried to the next site to repeat its context-specific success.” Because toolkits

are a discursive mechanism for transferring knowledge and bridging gaps between local and broader contexts, toolkits “are a frequently chosen output by individuals and organizations for a range of educational and activist activities” (Wilner et al, np). For the analysis in this essay, I assembled a folder of 17 digital toolkits focused on menstrual equity. The full list of these toolkits can be found in Appendix 1.

The toolkits analyzed in this sample offer an array of discursive resources: **template** emails, letters, flyers, slides, and social media posts with blanks for the user to fill in; **scripts** for phone calls or public presentations; **facts, data**, and links to **information** imagined to be relevant for the toolkit reader to have at hand when engaging in advocacy activities; **advice** oriented toward the toolkit reader such as language to use in particular circumstances or **tips** and **guidelines** for how to approach unfamiliar advocacy situations; **narratives** shared by specific individuals relating their successes or challenges in relation to advocacy; **definitions** of relevant terms that might be needed by the toolkit reader; **bibliographies, links**, and **lists** of additional resources for further reading; and epideictic **examples**, actions taken by other advocates that are singled out for praise. As this extensive variety of “tools” indicates, “what it means to ‘use’ a toolkit can be ambiguous and highly contextual” (Wilner et al np). Across the menstrual advocacy toolkits I collected, discursive tools are offered in support of a range of initiatives. All seventeen toolkits provide their readers with informational resources related to period equity. Sixteen—nearly all—suggest actions to promote public awareness of period poverty as an issue; and eleven target stigma around menstruation through campaigns to normalize the sharing of period stories. Seven toolkits provide resources for advocates to hold a period supply drive; ten offer tools for advocates to support efforts to enact legislation that either eliminates taxes on period products or mandates access to period supplies for students. Two focus on the need for more sustainable period products and two suggest partnerships with less common institutions such as public libraries.

Attending to embodiment, and drawing on the insights of rhetorical genre scholars, we can see that toolkits enable not only translation from context to context or from local site to local site, but also a translation *into* embodied performance as an crucial uptake. “Uptake” is a way of perceiving the interactivity of utterances: every utterance responds to a previous utterance and in doing so affirms some dimension of that previous utterance, selecting a dimension for response. A rhetor takes *up* an email template from an advocacy toolkit, for instance, and uses it to structure an email to a legislator; taking it up in this way affirms the generic status of the template *as* a template, and involves the rhetor’s bodily enactment: by typing, erasing, copying, pasting, using thumbs and fingers to fill in blanks and press send, the rhetor transforms the template into an embodied utterance.

Genre awareness is a key dimension of literacy learning, whether that awareness is explicitly noted or implicitly deployed by a writer or speaker in the act of performance. Genre here refers to the communication forms, situated practices, and conventional and routine ways of engaging with others that take place within a specific community. As Anis Bawarshi and Mary Jo Reiff explain, “the ability to know how to negotiate genres and how to apply and turn genre strategies (rules for play) into textual practices (actual performances) involves knowledge of what Freedman refers to as uptake. [...] What we choose to take up and how we do so

is the result of learned recognitions of significance that over time and in particular contexts become habitual” (85-86). This habitual, habituated quality accumulates from repeated engagement with particular texts and genres; focusing the analysis below on uptake helps us to see some of the complex literacy learning involved when young people take up activist genres, literacies, and practices. Uptake is a mechanism for learning—for transitioning from Bawarshi and Reiff’s “rules for play” into “actual performances.” In fact, attention to uptake can support efforts to take young people’s activist development as akin to, rather than radically different from, that of adults and older people. By taking up, through performance, the embodied practices of advocacy, any would-be activist, regardless of age, can foster and cultivate embodied expertise. A young person who has repeatedly taken up bodily practices associated with community organizing, for instance, develops through uptake the dispositions that enable expert performance; an older person who has not taken up that practice might have gained marginally relevant experience from other contexts, such as workplace performances, or they may be precisely as unfamiliar and unpracticed as someone much younger. This is to say that age is a factor that shapes but does not determine literacy learning; keeping this in mind, we can guard against assuming that “novice” and “expert” will always map neatly onto “young” and “old.”

To discern the way that users of menstrual activism toolkits might become habituated into embodied activist practices, I employ the expanded formulation of uptake developed by genre scholar Dylan Dryer. Dryer argues that any single utterance engages with uptake in several different ways, through what he identifies as uptake *affordances*, uptake *artifacts*, uptake *enactments*, uptake *captures*, and uptake *residues*.⁸ Uptake affordances are textually-embedded qualities that shape, constrain, or solicit response, and I focus my analysis here because these are visible within the design of the toolkits I analyze. Affordances are conditions, constraints, and textual mechanisms that solicit an audience’s response. For example, the “Period Supply Drive Checklist” (Figure 3) included in the Alliance for Period Supplies’ toolkit conditions and solicits a particular uptake: using this as a checklist affirms its status *as a checklist*.

8 All these fruitful concepts are examined in Dryer’s elaboration in “Disambiguating Uptake”; because I only focus on affordances in this essay, I omit expanded discussion of the other dimensions of uptake he identifies.



ALLIANCE FOR PERIOD SUPPLIES PERIOD SUPPLY DRIVE TOOLKIT

Period Supply Drive Checklist

Follow and mark this 10 point checklist to ensure you have a successful drive.
#EndPeriodPoverty!

☐ Partner with an organization

First visit allianceforperiodsupplies.org to find an allied program in your area. If there isn't one, reach out to agencies such as women's shelters, food pantries, faith based organizations, or health clinics.

☐ Choose your location(s)

Pick one or more locations that are centrally located and willing to help, like a local business, bank, library, etc. Be sure to label your collection bin (flyer included in this toolkit.)

☐ Recruit volunteers

Ask friends, family, colleagues, or neighbors to help out!

☐ Select a start and end date

Typically, period supply drives run for one week to a month.

☐ Set your goals

How many donations would you like to raise? Ask the organization you're donating to what products they need most. Develop a way to track your progress. (Use our goal chart!)

☐ Decide on your theme

Whether it's a themed party, a competition, or a simple period supply drive in your office, choose what works for you!

☐ Spread the word

Announce your period supply drive via social media, emails, local news outlets, and notices throughout your community. Be active before AND during the drive!

☐ Set up transportation

Depending on how many products are donated, consider what type of vehicle you will need to transport them.

☐ Collect and deliver

Rally the volunteers and deliver your donated period products to your partner organization. Don't forget to take photos- you'll need them later!

☐ Share your results!

Post pictures on social media and let everyone know (including Alliance for Period Supplies) your results! Don't forget to thank donors and volunteers too!

Figure 3: Alliance for Period Supplies' Period Supply Drive Checklist.

Such a use is afforded by the design of the checklist, which shapes what a user is more or less likely to do with the document. The design—with open boxes next to each item—solicits its uptake as a checklist, inviting a user to fill each empty box with a checkmark as each task is completed. Uptake affordances of this document include sequencing tasks in particular ways and completing each task before moving on to the next one. Marking off tasks one by one is an uptake affordance that shapes the embodied performance solicited by this toolkit. Of course, affordances *shape* or *constrain* but do not *determine* user uptakes, and other uses of the “Period Supply Drive Checklist” remain possible; for instance, a user of this toolkit could conceivably read this checklist aloud at a meeting, using it to inform other participants of tasks that will need to be planned and accomplished; that user might write, next to each item, the name of a person responsible, rather than a checkmark, and so use the affordances of this “Checklist” as a to-do list or a list of duties to be parceled out among volunteers—taking up the document as a *list* but not quite as a *checklist*.

Although taking up a checklist in this way may not matter a great deal to the embodied dispositions that a young would-be activist gains, other distinctions among the discursive tools taken up may shape more significantly the way that a toolkit user becomes habituated into advocacy. For instance, if a young person seeking to engage in menstrual advocacy takes up a toolkit that provides significant guidance and support toward holding a period supply drive, those discursive tools would scaffold a different set of embodied practices than one that promotes school-based policy advocacy, or one that promotes a more legislative advocacy approach. Engaging with different toolkit resources, and thus with different kinds of advocacy events, a toolkit user will be guided to adopt particular language practices and activist genres, smoothing the way for that user to undertake similar embodied practices in the future. Because practice makes what we have done often easier

to do again, toolkits can thus shape the direction of activist literacy learning through the uptakes they invite. That is, if we learn from genre not only how to accomplish our ends but, more significantly, “what ends we may have,” as Carolyn Miller famously explained, then taking up activist toolkits shapes the activism users enact, the actions they embody, and the dispositions they develop.

Toolkit Affordances for Expertise

How, then, do toolkits enable users’ activist learning, supporting their practice toward and cultivation of embodied dispositions *as* menstrual activists? If toolkits provide users with an array of discursive tools, how much direction do these materials provide to govern or shape how they should be used? My analysis of the affordances for uptake across menstrual activist toolkits suggests that some toolkit components are designed strongly to support or scaffold performance, while other components offer only minimal support for users to develop embodied dispositions toward activism.

Least Scaffolded: Informative Tools

Among the least scaffolded texts assembled within toolkits are those designed to provide the toolkit user with information. These include bibliographies and lists of additional resources that the user can locate and consult, as well as fact sheets, FAQs, and talking points. Bibliographies and resource lists frequently appear at the end of toolkits or as sidebars directing toolkit readers toward additional resources they might locate to learn more about menstrual equity, period poverty, period stigma, or policy efforts to address menstrual inequities. The Period Tax Advocacy Guide, for instance, includes a References page that lists academic and popular publications and directs readers toward “Recommended Online Reading,” “Videos,” and additional “Advocacy Toolkits.” (Figure 4)



Recommended Online Reading

The History behind the Movement to End the Tampon Tax." n.d. Tax Free. Period. Accessed October 23, 2019. <https://www.tax-freeperiod.com/blog-entries/historytampontaxadvocacy>.

Pink Tax and Period Equity Legislation <https://billtrack50.com/blog/social-issues/sex-drugs/pink-tax-period-equity-legislation/>

Maria Alvarez del Vayo. 2018. "Half of the European Countries Levy the Same VAT on Sanitary Towels and Tampons as on Tobacco, Beer and Wine." Civio, 2018. <https://civio.es/medicamentalia/2018/11/07/14-european-countries-levy-the-same-vat-on-sanitary-towels-and-tampons-as-on-tobacco-beer-and-wine/>.

Recht, Hannah. n.d. "What Life Would Look Like Without the 'Tampon Tax.'" Bloomberg.Com. <https://www.bloomberg.com/graphics/2018-tampon-cost/>

Videos:

Menstrual Health and Hygiene Web-dialogue, 2020. "Scrap the Period Tax Low- and Middle-Income Country Perspectives" <https://youtu.be/W1MgDDSmskk>

Period Posse, 2019: „Ending the Tampon Tax: Mobilizing Policy Change in the US & the UK (2019) <https://youtu.be/x6m7uB4VS88>

Ted-Med, 2018 "Periods aren't a luxury. Why are they taxed like one?" Linda B. Rosenthal <https://www.youtube.com/watch?v=W10vOGy2c30&t=4s>

Figure 4: Recommended Online Reading from Period Tax Advocacy Guide.

The resources appended to many toolkits are often presented without guidance; sometimes these are not even formatted as bibliographies, but as lists of links with minimal introductory information, as in the UCC's Menstrual Health Toolkit. (Figure 5)

Resources

- Menstrual Hygiene Day <https://menstrualhygieneday.org/> has resources and ideas about how to reduce the stigma associated with menstruation and bring this natural function into the public sphere.
- World Health Organization asks us to focus on menstrual health and rights: <https://www.who.int/news/item/22-06-2022-who-statement-on-menstrual-health-and-rights>
- UCC General Synod34 article: <https://cwsglobal.org/blog/general-synod-participants-assemble-thousands-of-hygiene-kits-to-combat-period-poverty/>
- Encounters at the Well <https://www.ucc.org/red-tents-and-red-flags/>
- How CWS kits address immediate needs in times of disaster: [Bridging the Gap in Disaster Response | CWS \(cwsglobal.org\)](#)
- Period.com shares wonderful resources to educate ([Period.org | Home](#)) and takes an expansive intersectional approach about who experiences menstruation. Remember, not all women and girls menstruate and not everyone who menstruates identifies as a woman or a girl.

Figure 5: Resources shared in UCC Menstrual Health Toolkit.

These and many similar lists of resources are offered in an open-ended, nondirective manner. Readers *may* read the assembled websites, view the linked videos, and make themselves more informed as potential advocates—but these materials are not clearly designed to elicit particular uptakes. The uptake affordances they make available, then, are fairly open; links invite users to click on them, but otherwise the embodied encounters that bibliographies and resource lists solicit may vary widely. Reading and viewing the assembled resources may impact a toolkit users' performance of expertise—by increasing their familiarity with a range of policy issues related to menstruation, providing them with knowledge that indicates their presence within a network of experts, for instance—but such a performance of expertise is not specifically scaffolded by the design of a bibliography or a resource list.

Toolkits also draw into their pages more specific pieces of information, which makes that information more ready-to-hand for advocacy purposes than a bibliography does. Sharing information is a way toolkit creators can inform not only the toolkit user but future audiences that user might address: a group of potential allies at school, a congregation considering undertaking a period-related ministry project, a school principal entertaining a request from a student group lobbying to have period supplies made available in school facilities, and so on. Many toolkits include fact lists, such as a “Period Poverty Fact Sheet” in the St. Louis Alliance for Period Supplies Toolkit, or “Period Poverty By the Numbers” in the Ending Period Poverty in Your Community toolkit. By isolating and reproducing specific pieces of information, toolkits provide a marginal amount of scaffolding for toolkit users engaging in an array of conversations, both online and off, as seen in Figure 6.



“With the cost of menstrual products [averaging \\$13.25 a month](#), amounting to over \$6,000 per lifetime [2019 numbers], those impacted by period poverty have to make insufferable decisions every day, such as choosing between buying sanitary pads or food, and buying tampons or required school supplies. In addition to the taxing costs, [these products are not covered](#) by any government assistance programs, such as SNAP. As a result, many people are forced to use products longer than recommended or improvise with unsanitary alternatives, such as old clothes and rags. Apart from the mental, physical, and financial burdens, period poverty also affects one’s ability to attend work, school, and other events every month.” [See source](#)

Period Poverty disproportionately affects adolescent students. “A study commissioned by [Thinx and PERIOD](#) in 2021 found that 23% of students in the U.S. have struggled to afford menstrual products, 51% have worn menstrual products for longer than recommended, and 38% often or sometimes cannot do their best schoolwork due to lack of access to such supplies. These students are often forced to choose between necessities, with 16% saying that during the pandemic, they have chosen to buy menstrual products over food or clothing.” [See source](#)

Figure 6: Long informational passages shared in UCC Menstrual Justice in Action Toolkit.

Some additional scaffolding toward performance surrounds pieces of information that are contextualized within a toolkit in a way that more directly supports the toolkit user’s acquisition of knowledge and performance of expertise. For instance, information may be shared through a Frequently Asked Questions format, or in a way that anticipates an audience interaction with a speaker who can benefit from having knowledge ready-to-hand to address challenges or concerns, as in the examples in Figure 7 and Figure 8.

II. KNOW YOUR RIGHTS: THE MENSTRUAL EQUITY FOR ALL ACT

7

Does my school have to provide free menstrual products in school restrooms?

YES. The Menstrual Equity for All Act, passed in 2021, says that starting with the 2022-2023 school year, California public schools serving students in any grade between 6 through 12 must provide free pads and tampons in all women’s restrooms and all-gender restrooms, and in at least one men’s restroom. California public schools include schools operated by a school district or the county office of education, or a charter school. The Menstrual Equity for All Act is codified at California Education Code § 35292.6.

Does my school have to tell me about my right to free menstrual products?

YES. Schools must post notices in restrooms letting students know about their right to access free menstrual products.

Notices must be visibly posted in every restroom where free menstrual products are required, which includes all women’s restrooms and all-gender restrooms, and at least one men’s restroom. The notice must also provide a phone number and email information for the school staff member responsible for making sure the restrooms are stocked with free menstrual products. (See California Education Code § 35292.6(c)).

Figure 7: “Know Your Rights” information in a menstrual equity toolkit.



Figure 8: ACLU Sidebar, “How to Respond to Common Arguments.”

The question and answer format of the information shared in Figure 7 scaffolds the use of that information in conversation by providing questions to which each answer may be relevant; the straightforward and bolded **YES** after each question is followed by details that anticipate further questioning, even including the statute number of the Menstrual Equity legislation, lending users further confidence in the information’s accuracy. Likewise, the ACLU’s sidebar “How to Respond to Common Arguments” (Figure 8) provides users with counterarguments and detailed examples, using footnotes to substantiate some pieces of the information shared. Identifying and organizing pieces of information that menstrual equity advocates can deploy in conversational situations represents an uptake affordance that guides toolkit users toward performing expertise through conversations and responses.

Marginally Scaffolded: Directive Tools

Toolkit material in this category includes texts that are devoted to offering users advice, tips, guidance, and steps to follow to achieve a particular end. Directive language abounds across the toolkits in my sample.

Users of the toolkit Ending Period Poverty in Your Community are advised, for instance, “Do not take it personally if someone has questions – look at this as an opportunity to gain an ally instead of battling an opponent.” The Period Talk toolkit notes that, after leading a Period Talk workshop in the user’s school, “It’s always a good idea to take some pictures throughout as well as at the end of the workshop and post them on social media,” followed by a list of hashtags to use to connect the event with broader online conversations, such as #periods, #YouthActivism, and #MenstrualEquity. The Period for Change Advocacy Toolkit advises users, “Throughout any advocacy activities, remember to not only identify the problem, but also propose a solution. What exactly are you asking them to do? ... As a Girl Up advocate, you should always include a call-to-action when you engage in advocacy!” As one Period Supply Drive Toolkit explains, following any event, “Be sure to promote your results to all those who participated and others as well. Use terms like ‘this time we collected’ or ‘this time we raised...’ so people understand there is an ongoing need.” These examples indicate the range of directives issued to toolkit users, who receive from toolkits advice about steps to take, arguments to offer, best practices for advocacy activities, language to use, even how to feel when facing questions from an interlocutor. Toolkit authors generally refer to users directly, as “you,” which further supports the advice and guidance-giving role of toolkits. The pervasive nature of directives across the toolkits suggests that guidance is a key function users look for in their interactions with toolkit materials.

Guidance in the form of lists or steps to follow is also common, sometimes structuring significant portions of a toolkit. For example, the Student Advocacy Toolkit from the Alliance for Period Supplies provides guidance to direct users toward various goals, including organizing a petition, contacting a superintendent, advocating for period supplies (in a state that *does* or in a state that *does not* have legislation that mandates schools provide period products to students), advocating for legislation at the state level, calling or emailing state legislators, and promoting menstrual equity on social media. Detailed guidelines (Figure 9) include direction for intermediate actions users should undertake as part of a longer-term initiative:

There are a few different groups to think about when trying to address this issue at the local level: your school principal, your local school board, and your school superintendent.

Before you speak to any of these groups, consider doing the following:

-  **Rally Support from Peers:** Ask other students if they may be interested in joining your effort to get period products in your school.
-  **Rally Support from Parents:** Ask your parents, and the parents of other involved peers, if they are interested in joining in on the effort. Parents may be able to influence conversations with the Parent Teacher Association (PTA) and other stakeholders.
-  **Rally Support from an Educator or Your School Nurse:** If there is a teacher at your school that provides products, or wants help, it's a good idea to invite them to be a part of the conversation.
-  **Shape Your Ask:** You want period products in your school, but how do you want that to look? Do you want to see baskets in every bathroom or maybe dispensers? What kinds of products do you want the school to provide? A solid ask will help make it easy for those of you who are talking to to think about in terms of implementation. If you have a plan, based on what you think would work best in your school, it will make it easier for the decision-makers to conceptualize.

Figure 9: Steps to take before speaking with principal, school board, or superintendent.

The guidelines in Figure 9 do not simply prompt the reader to speak with a school principal or superintendent about the issue but offers four steps to take *before* speaking to officials, to strengthen the advocate's position through strategic alliances and by formulating a clear ask. Other toolkits offer step-by-step guides for creating and circulating a petition, soliciting corporate donations, drafting and placing op-eds in local newspapers, and employing social media to increase visibility. For instance, a toolkit from the ACLU offers readers advice for "Harnessing Viral Moments in the Fight for Menstrual Equity," with advice about making use of *kairotic* or timely events to amplify social media messages about period stigma and period poverty. The Girl Up! Period for Change Advocacy Toolkit outlines several steps for toolkit readers to take when engaging in "Grasstops" (Figure 10), "Grassroots," or "Digital Activism for Menstrual Equity."

1 Grasstops Menstrual Equity Advocacy

Choose your issue/topic *Examples include:*

- Repeal of sales tax on menstrual products
- Increased standardized education surrounding menstruation
- Specific policy or legislation related to menstrual equity

Choose your decision-maker *Examples include:*

- School administration
- Community leader
- Local, state, or federal policymakers

Choose your method *Examples include:*

- **Make calls to your decision-makers' offices** to advocate for your call-to-action - the more calls, the louder your message!
- **Create a petition with a banner full of signatures** from your Club and community members to show how many people support your call-to-action!
- **Host a letter-writing party with your Club members** to write to your decision-makers. Personalized letters work the best, but you can find a sample letter in the appendices for guidance. Make it a real party with music and food!
- **Organize your Club and community members to write opinion-editorials** or articles about your advocacy call-to-action and ask the local newspaper to publish it. You can even take it a step further and call your local radio, TV station, or newspaper to ask if they'd like to interview you about your advocacy!

Figure 10: Girl Up Period for Change Advocacy Toolkit's Step-by-step guide for "Grasstops" advocacy.

In addition to directives that offer step-by-step guidance, many toolkits provide lists of "Tips" that are similarly directive, guiding toolkit users in a range of activities they might take up, including contacting public officials, planning and holding events, forming supportive teams, attracting allies, promoting events, and more. (Figure 11)

* Tips for Contacting Your Legislator

- Introduce yourself and let them know you live in their district.
- State the reason for contacting your legislator.
- Share your experience (i.e. I'm concerned about students in my school who do not have access to the essential hygiene items they need to thrive)
- Be specific and brief (share just 3 strong supporting points).
- Be accurate - if you don't know the answer, let them know that you will get back to them.
- Most importantly: thank them for their time!

Figure 11: One of several "Tips" offered by Alliance for Period Supplies Student Advocacy Toolkit.

These directive statements more firmly orient toolkit users toward actions they should take as they develop advocacy expertise and employ that expertise through action. Tools such as tips, guidelines, and step-by-step instructions provide firmer scaffolding toward performance than toolkit components that are largely informative. Uptake affordances of step-by-step guidelines, for instance, include prompting toolkit users to sequence their actions in a particular way—such as by forming a group of student and parent allies before approaching the school board about instituting a policy; these affordances shape the way toolkit users come to understand and enact the advocacy they perform.

Strongly Scaffolded: Performative Tools

Distinct from the “you”-directed language that characterizes the directives and guidelines above, a significant portion of the toolkits is composed of discursive materials designed to be *voiced* with an “I” by the toolkit user toward their own audience. I understand these as “performative” tools because they are strongly designed toward the user’s performance, fostering uptakes through which the toolkit reader becomes the speaker or writer who inhabits the templates, samples, scripts, and activities included.

Many toolkits include templates, which offer scaffolded guidance and ready-made language, with places identified where users should insert their own information. (Figure 12). Menstrual toolkits include template emails to libraries to propose partnering to offer free period supplies; emails to legislators asking for support for a particular bill with brackets indicating places where the letter writer should insert their own personal story; and petition templates for gathering support before approaching a principal or superintendent about placing supplies in schools.

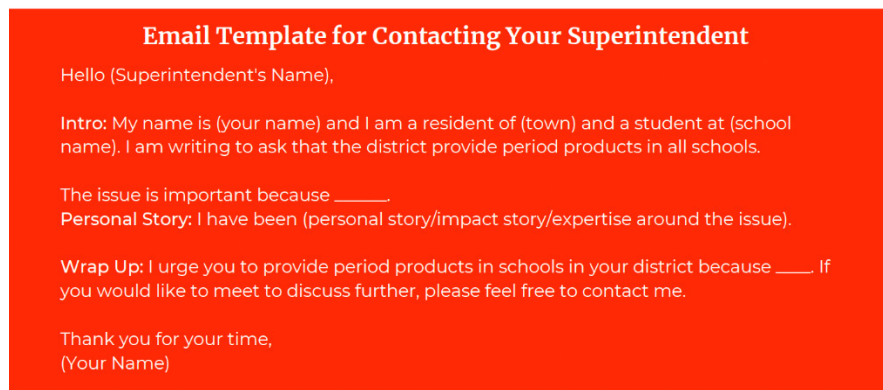


Figure 12: Email Template from Student Advocacy Toolkit.

Additionally, menstrual advocacy toolkits often offer samples, which are similar to templates in providing language that the toolkit user can both adopt and modify. For instance, the Menstrual Equity for All Toolkit provides a sample public comment (Figure 13) the toolkit user can modify during a public school board meeting:

C. SAMPLE PUBLIC COMMENT

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INSTRUCTIONS: Below is a sample public comment you can edit and share at your local school board meeting. Your comment should take under 3 minutes to read.

SAMPLE PUBLIC COMMENT:

Good evening board and community. My name is [name] and I am a student attending [school]. I am here to speak on the importance of menstrual equity and the steps our district must take to ensure that everyone has access to essential health products as required by California law. As of the start of the 2022-23 school year, The Menstrual Equity for All Act mandates public schools serving any grade 6-12 to provide free menstrual products in every womens' restroom and all-gender restrooms, and at least one men's restroom. The law also requires that students be notified of this right.

[Share your personal experience, why this is important to you, etc.].

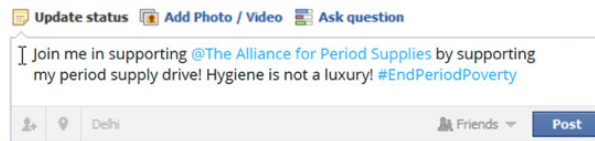
According to a 2019 report, 1 in 4 U.S. students have missed class because they did not have access to menstrual products. Such a lack of menstrual health support spans all genders and ages, and if neglected, can lead to serious health issues and even impact student's academic career and social well-being.

[Your ask]. Example: We ask the Board to adopt a policy implementing this law and ensure free menstrual products are made available to students. We also ask that the board provide opportunities for students to provide input and feedback as we implement this law.

All students deserve a safe, healthy, and welcoming school environment, please help take action to make essential menstrual products accessible for all students. Thank you.

Figure 13: Sample Public Comment from Menstrual Equity for All Toolkit.

Other samples include timelines for developing menstrual product partnerships with community organizations and sample scripts that can be read when contacting legislators by phone. Sample social media captions are offered in many toolkits, providing information about the prevalence of period poverty, about bills related to menstrual equity, and calling for donations to period supply drives, as in the example social media posts shared in Figure 14:



- I believe everyone has the right to feel comfortable and clean. Please show support by donating to my period supply drive! *(insert graphic with details on period supply drive)*
- Did you know 2 in 5 people with periods have struggled with #periodpoverty? Please donate to my period supply drive to help change that.
- Small things impact big things. That is why I'm holding a period supply drive on behalf of @PeriodSupplies. Please consider giving today *(add time + location details)*
- Lack of period products is a hidden consequence of poverty. Help me reach my goal today and donate to my period supply drive! Every bit counts. #EndPeriodPoverty
- Help make a difference in an individual's life today. Donate to my period supply drive that will be taking place in *(location)*
- #PeriodPoverty Fact: School aged girls cannot participate in educational activities without access to fundamental resources. Please consider donating to my period supply drive!
- Individuals require an average of 6 period products per day, and period supplies aren't covered by safety net programs. #EndPeriodPoverty *(insert drive flyer)*

Figure 14: Alliance for Period Supplies Social Media Samples.

Alongside such sample language, several toolkits provide users with links to downloadable image files to enable users to load pre-designed flyers and images into their social media posts, ensuring that such posts can be easily uploaded and circulated. Similarly, many toolkits offer pre-designed flyers for posting physically around a building or community to generate support for period supply drives, enabling users to simply print and post them with minimal modification, as seen in Figure 15.



Figure 15: Printable Wall Flyer from St. Louis Alliance for Period Supplies.

Perhaps even more fully designed to secure performative uptakes are the scripts and presentation slides some toolkits make available to users. Scripts typically include bracketed sections that invite users to include personalized stories or details, and some even include disclaimers for the user to read aloud or offer advice for delivery, anticipating audience questions that the script-reader may encounter. The Period Talk toolkit, for instance, invites the reader to take on a position “as a facilitator and workshop leader” who will “foster community in a safe and supportive space and empower advocates through conversation.” This guide reassures readers that “You do not have to be a medical expert to be the expert in your own experience.” This toolkit includes a full lesson plan (Figure 16) for the toolkit user to employ while running a Period Talk workshop:



Introductions (10 min)

- Facilitator introduction
 - If you have an intimate gathering, have everyone quickly introduce themselves!
- Hand Raising exercise
- (OPTIONAL) Play the ["What is a Period?" Video](#)



Period Talk Presentation (15 min)

Feel free to pick and chose what parts of the workshop you would like to cover. You can focus on as much or as little as you want!

- **Period Health Basics**
- **Period Advocacy Basics**
- **Period Activist Basics**

TIP! Divide the workshop into its 3 parts, and hold 3 workshops throughout the year!

Engagement Exercise (20 min)

PERIOD STORIES

- In small groups: Share period experiences and discuss the presentation / videos.
 - Why, how and when did you become interested in menstrual equity? What shocked you? What did you learn? etc.

Questions & Goodbyes (10 min)

- Additional questions, comments or chapter announcements and hand out resource list and other documents
- Take a picture of the whole team!
- Post on social: #PeriodTalk #Periods #MenstrualEquity #YouthActivism #MenstrualMovement



Figure 16: Lesson Plan for a Period Talk Workshop.

Each part of this four-step lesson is scaffolded further with additional materials included in the toolkit, including a full script to read during the Introduction phase (Figure 17):

- **Introduce yourself!** Make sure to include:
 - **You are NOT a medical professional.** This workshop is meant to be a safe space to share period experiences, hopefully get some laughs at times (!), and highlight the relevant resources on campus in case you or someone you know would like to seek medical attention for your menstrual health.*
 - Participation is completely optional and anyone can leave at anytime
 - These workshops are not meant to be a substitute for a formal medical appointment, and should be treated as a gateway to receiving additional professional treatment/information if need be.
 - Any stories told in this space are confidential and we expect all participants to be respectful of one another.
 - This workshop includes some sexual content and may not be appropriate for younger audiences.
 - All participants' opinions expressed in this workshop are their own and not necessarily representative of PERIOD's mission. They are meant to inspire conversation and not stand alone as fact.

***Throughout the workshop, questions from the participants will inevitably come up. This is natural and welcome! However, you are not a medical expert, and therefore cannot provide medical advice. It is completely fine to reiterate this fact, and also reiterate the mantra:**

"If it negatively impacts you and how you go about your daily life, you may consider consulting the resources I've provided, and go talk to a medical professional."

3

Figure 17: Period Talk Introduction Script with Disclaimer Language.

This toolkit offers users ideas for icebreaker activities, advice on how to use PollEverywhere to solicit the workshop attendees' responses to questions, downloadable and editable slides to accompany each possible presentation topic, a full script to accompany each of the slide decks available, and extended instructions and questions to support the user in facilitating the "Engagement Exercise" (Figure 18), in which workshop participants talk in small groups about their responses to a broad set of period-related questions:



Topics to discuss

Here are a list of topics you can discuss during this exercise:

- Talk about your menarche (first period) story!
- How and when where you taught about menstruation?
- What are some misconceptions you had (or have) around periods?
- Why are you interested in menstrual equity?
- What shocked you from the presentation? What did you learn?
- Does anyone have tips for how they keep track of their periods?
- Does anyone have products that they feel work especially well for flow management? Experiences trying sustainable products?
- Any positive experiences with periods or period health that you would like to share?
- Does anyone know of any good resources for period health that they would like to share?

Discuss

Once the 15 minutes have gone by, have the small groups discuss with the larger group and share their the broad strokes of their conversations.



Figure 18: List of questions for discussion during a Period Talk Engagement Exercise.

The samples, scripts, slides, and activities above essentially transform the reader of the toolkit into an expert facilitator, capable of guiding others through a shared experience. One can imagine uptakes of these materials that are halting or awkward, that are more or less successful at soliciting conversation among workshop participants and sharing information meant to address period stigma. Nevertheless, the uptake affordances evident in these materials are incredibly rich, scaffolding an embodied performance that includes presenting, facilitating, offering advice, soliciting multiple perspectives, promoting an event both before and afterward. The users who take up these scripts, who adopt these templates to give voice to their own experiences, are taking on activist roles through their embodied action, making toolkit materials a potent support for acquiring activist literacies and expertise.

Scaffolding Expertise

As they invite toolkit users to take up their guidance and engage in menstrual advocacy, the toolkits discussed in this essay also provide users with opportunities to demonstrate and develop embodied expertise as advocates. The implications of such scaffolding for the activist learning and growth of young people are considerable.

The rhetorical maneuvers for establishing expertise that Hartelius identifies are evident in the uptake affordances of advocacy toolkits. By inviting potential advocates to insert their personal stories into template letters, for instance, toolkit authors prompt advocates to cultivate identification with an audience and foster a sense of exigence toward menstrual equity efforts. As the toolkit *Ending Period Poverty in Your Community* reminds users, after directing readers to a census database that can be used to search for poverty information about their own local community, “It’s important to have evidence that there is a need for this project, so ensure that you have data ready and available for discussion.” Furthermore, by providing toolkit users with

talking points for engaging others in conversation, toolkit authors invite users to adopt a pedagogical stance toward those they interact with, while tempering that stance with guidance around strategy. And recognizing that expertise emerges in part through participation within networks that affirm one's status, toolkits provide users with agreed-upon definitions, ready-made argumentative talking points, gender-inclusive language, and other linguistic tools that allow menstrual advocates to show their alignment with broader activist networks. Ready-made flyers and sample slides that include names and logos of credible institutions—for instance, the “Drop Period Supplies Here” flyer in Figure 15, emblazoned with two organizational logos—likewise affirm an advocate's expertise through association. As one *Period Supply Drive Toolkit* explains, “Partnering with an area coordinator gives donors confidence that their donations are going to the right place.”

Perhaps most significant are the ways toolkits scaffold performance and in so doing support users' demonstrations of *techné*, of skillful language use. Such skillful use is enabled by scripts that provide reasoned and informed language calling for action; through templates that circulate measured phrases and invite advocates to personalize otherwise routine argumentative formulas; and even through step-by-step guides and advice, which direct advocates to follow protocol, assemble teams, be planful and strategic in forming partnerships and promoting equity efforts, and so on. In these ways toolkits provide advocates with skillful language and guide users toward audience awareness and effective strategy. These expertise maneuvers are among the embodied practices that toolkit users take on when they take up the tools assembled within these documents.

My analysis of menstrual activist toolkits suggests that not only is expertise negotiated, but that negotiation is mediated by genre. Performing genre knowledge can help a novice—whatever their age—operate more quickly to perform expertise. Genre is a variable in the negotiation of expertise. That is, expertise is not (exclusively or fully) a situation-by-situation negotiation, but one where genre (both in the genre selected and the skillfulness with which it is performed) does some of the lifting, helping to settle some pieces of the negotiation in advance. This analysis thus helps us to see how expertise involves *habitus*, a learned bodily disposition and orientation. For people who are regularly dismissed because of their age-related embodiment, by audiences disinclined to affirm young people as capable of holding expertise, genre may be an especially significant route toward achieving expert performance. Activist toolkits become legible through this analysis as textual scaffolds for performance, supporting users as they take up genres and take on—enact—an expert role. Through informational as well as directive materials, menstrual advocacy toolkits operate as sites of rhetorical training, scaffolding performances that can become, over time, embodied capacities for intervening in public and instigating change.



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Appendix of Menstrual Advocacy-Related Toolkits:

- Ending Period Poverty in Your Community: Lessons Learned from Project Local Access. The Flow Initiative.*
- The Ho'ohanohano Initiative Implementation Toolkit.* 2022.
- Menstrual Dignity for Students Toolkit.* Oregon Department of Education. 2022.
- Menstrual Equity: A Legislative Toolkit.* ACLU. December 2019.
- The Menstrual Equity for All Act: A Toolkit for California K-12 Students.* August 2023.
- Menstrual Hygiene Management. The Pad Project.*
- Menstrual Justice in Action Period Packs.* United Church of Christ.
- Period for Change Advocacy Toolkit. How Girl Up USA Clubs and Leaders Can Advocate for Menstrual Equity.* October 2023.
- Period ~~Tax~~ Advocacy Guide.* October 2020.
- Period Supply Drive Toolkit. Alliance for Period Supplies. Version 1.*
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- Planet-Positive Periods: A Toolkit for Sustainable Menstruation.* April 2022.
- Plastic Free Periods Campaign Overview.* City to Sea.
- Student Advocacy Toolkit. Alliance for Period Supplies. olkit for Marking 5th International Dignified Menstruation Day.* Global South Coalition for Dignified Menstruation. 2023.

“Everyone in Gaza is disabled:” Childhood, Menstrual Justice, and Disablement in Palestine

LA EL

Abstract: Starting from the “Everyone in Gaza is disabled” Twitter/Instagram post by @palestinepromise, this piece explores the links between menstrual justice and disability justice in the context of a Palestinian genocide under which all Palestinians are rendered disabled by an Israeli Western-funded attack on Palestinian land and life. First, I outline a menstrual justice framework that incorporates three central axes: disability justice, an end to occupation, and the ungendering of menstruation. Next, I analyze three social media posts from Instagram, Twitter, and TikTok, created by Palestinian and Pro-Palestinian content creators, @palestinepromise, journalist Bisan Owda (@wizard_bisan1), and @fitnfulI, which loosely align with the goals of disability justice, end of occupation, and ungendering, while also challenging Western media’s orientalist and homonationalist views on Palestine. Finally, the piece turns to the film *Farha*, by the Palestinian filmmaker from Jordan, Darin J. Sallam, to consider a brief menstrual representation of a young bleeder in the film. Grounded in Palestinian liberation, this piece strives to record some of the important cultural resistance work Palestinian and pro-Palestinian creators have undertaken in their envisioning of menstrual justice as necessarily linked to the end of occupation, disability justice, and the refusal to suture menstrual bleeding to both adulthood (which denies Palestinian childhood) and womanhood (which denies the existence of menstruators of other genders).

Keywords: [menstruation](#); [Palestinian liberation](#); [ungendering](#); [disability justice](#); [menstrual justice](#)

Doi: [10.37514/PEI-J.2025.27.4.06](https://doi.org/10.37514/PEI-J.2025.27.4.06)

Content warning: *While I do not go into detailed descriptions of violence, this piece discusses Palestinian genocide and mass disablement, and will bring up specific examples of violence in the discussion of the film *Farha* in the final section.*

As the Israeli, Western-funded genocide on Palestine started to intensify in October 2023, countless social media creators, on platforms such as Instagram, X (formerly Twitter), and TikTok, began to direct the public’s attention to the disabling effects of the onslaught. In addition to the 100,000 plus as of January 2025 (but in reality growing) wounded Palestinians, and the effects of starvation, exposure, illness, and deprivation, many content creators posted at the start of the genocidal intensification on how the population at large was being disabled through what Jasbir Puar rightfully identifies as “targeted debilitation” and “the right to maim” (Puar 2017, xi, 128), wherein as L.J. Jaffee outlines “Israeli settler-colonialism is contingent upon ‘disabling’ the Palestinian population” (Jaffee, 117). For example, on Twitter, creator @palestinepromise (now no longer on Twitter) posted an image-text from Instagram of how “Everyone in Gaza is disabled” (Figure 1). As the image from @palestinepromise with black handwritten style type against a pale orange background reads:

Everyone in Gaza is disabled. It’s not just the wounded, cancer patients, & women in childbirth. It’s children with braces that can’t be adjusted. It’s contact wearers with no saline. It’s air strike-shattered glasses with no optometrist. It’s asthma sufferers lacking nebulizers & inhalers.

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It's diabetics grappling for insulin & glucose monitors. It's people with chronic illnesses who need regular treatment. It's women with endometriosis & even debilitating period cramps. It's the deaf yearning for hearing aids. It's people navigating their mental health with no support. (Figure 1).



Figure 1: Access Text: An Instagram post; the image is square with a pale orange background. "Everyone in Gaza is disabled." is written in black handwritten-style type at the top, with the text mentioned ("It's not just the wounded...") below. The top left-hand corner has a black, white, and green dot with a red explosion radiating from the black and "Free Palestine" written above it in a red outline, all caps. The post is by @palestinepromise. The location tag is Gaza, Palestine. The post is reposted by @folkoftheshelf.

Unlike the "we are all disabled" statement sometimes heard in Western contexts that has been critiqued by disability activists and scholars as "a hollow attempt to claim solidarity," (Carlson and Murray, 2), "Everyone in Gaza is disabled" is a different sort of statement. As elucidated by crip activist and writer Leah Lakshmi Piepzna-Samarasinha in a piece posted on the *Disability Visibility Project* (Jan 26, 2024), the phrase "Everyone in Gaza is disabled" asserts that disability justice must think about Palestine and about how disability is necessarily connected to settler colonialism and empire. Taking an expansive view of disability in this sense recognizes that disability does not occur in a vacuum but that it is directly connected to other forms of injustice, and in Palestine, to a broad Israeli genocidal tactic to intentionally maim, wound, and destroy Palestinians. Panelists at a 2024 NWSA panel on disability, Madness, and Palestine (Liat Ben-Moshe, L.J. Jaffee, Yasmin Snounu, Nirmala Erevelles, Kali Rubaii) alongside many other scholars, including Puar and Rita Giacaman, emphasize the point that debilitation is not a side effect of Israeli settler colonialism in Palestine but its main focus.

As someone who writes on menstrual justice in dialogue with disability, I am compelled by how pro-Palestinian disability justice visions, in their expansive view of disability, leave space open for menstruators. @palestinepromise writes that "Everyone in Gaza is disabled. ... women with endometriosis & even debilitating period cramps." This piece is grounded in feminist disability studies frameworks and particularly those related to pain such as articulated by Cara E. Jones, Ela Przybylo, and Alyson Patsavas, critical menstruation studies including the work of Chris Bobel and Breanne Fahs, and Palestine studies such as the work of Jaffee, Snounu and co-authors, Edward Said, Nadia Abu El-Haj, and Ilan Pappé and co-authors, to argue for

a robust model of menstrual justice that is committed to the liberation of Palestine. First, I outline a menstrual justice framework with attention to how it complicates ideas of “girlhood” and menstruation as well as how it must center disability, antioccupation, and anticolonialism. Next, I look at the robust ways in which Palestinian and pro-Palestinian social media posts argue for menstrual justice, focusing on three posts that align with the menstrual justice principles I outline of centering disability, ending occupation, and ungendering. Finally, I look at how menstruation is portrayed in the film *Farha* (2021) directed by Darin J. Sallam, a Palestinian filmmaker from Jordan, and representing a young bleeder’s menstruation amidst the context of the 1948 Nakba. My arguments in the context of this special issue on “Girlhood and Menstruation” are that a menstrual justice framework is needed to fully liberate menstruators. Menstrual justice, in turn, needs to be understood robustly as including a commitment to thinking menstruation in dialogue with the perspectives that disability justice offers, a commitment to challenging colonial occupation, and an acknowledgement of the limits of gendering menstruation through language of womanhood and girlhood. Specifically, I argue that despite what Puar (2007) years ago critiqued as Western media’s homonationalist and white feminist framing of Palestine as a “backwards” place, Palestinian and pro-Palestinian narratives of menstruation, as exemplified by three social media posts and the film *Farha* (2021), actually portray a truly robust vision of menstrual justice, including for children who menstruate.

Menstrual Justice: Focusing on the Three Pillars of Disability Justice, End of Occupation, and Ungendering

In her groundbreaking work, Margaret E. Johnson outlines menstrual injustice as “the oppression of menstruators, women, girls, transgender men and boys, and nonbinary persons, simply because they menstruate” (1–2). In other words, menstrual injustice includes the economic, social, relational, and emotional costs that menstruators pay as a consequence of having menstruating bodies that are socio-culturally denigrated. A framework for menstrual justice, as outlined by scholars such as Margaret E. Johnson, Swatija Manorama and Radhika Desai, and Ela Przybyło, is in turn committed to addressing and eliminating menstrual injustice while recognizing the complex, varied, intersectional, and geopolitically diverse conditions menstruators navigate. In this section I will briefly outline a menstrual justice framework, its grounding in justice models, and what a focus on the three specific principles of disability justice, end of occupation, and ungendering menstruation provide for thinking menstrual justice.

As a justice-based framework, menstrual justice is cognizant of the limits of a rights-based framework, recognizing that institutions including governments are often ignorant and unreceptive to the variegated needs of menstruators and other marginalized social groups. Menstrual justice approaches menstruation intersectionally and as connected, though distinct from, other social justice undertakings including reproductive justice, disability justice, racial and gender justice, and trans justice. For example, scholars such as Iris Lopez, Dorothy Roberts, and Loretta Ross discuss how reproductive justice emerged as a framework from women of Color in the U.S. who recognized the limits of a reproductive rights agenda that was only serving white women and ignoring histories of eugenics, forced sterilization, and coerced birth control on the bodies

of Puerto Rican, Indigenous, Black, and other People of Color. As the collective, Sister Song, outlines, justice in the reproductive context acknowledges bodily sovereignty through freedom to have or not have children but also other elements like access to nutritious food, clean drinking water, and safe environments free from occupation.

Similarly, disability justice, as outlined by Patty Berne and the art troupe Sins Invalid, goes beyond thinking about rights for disabled people and seeks to imagine worlds that are built with disabled people in mind and that foster care, community, cross-disability solidarity, collective liberation, and access as matter of course. And trans justice, drawing on the Trans Justice Funding Project, asserts freedom to bodily autonomy, access to affirmative medical procedures and medications, while envisioning communities beyond the scope of transphobia including for the most marginalized trans people such as sex workers, incarcerated people, and migrants. Menstrual justice is linked to all these visions for justice, yet it is also distinct. It is valuable to understand the links between trans, disability, and menstrual justice because too often these are understood as pertaining to separate bodyminds (Price), as if disabled and trans people do not also menstruate. Yet notably, it is also important to recognize menstrual justice as distinct from reproductive justice with which it is often implicated because menstruation is not only about fertility. Many menstruators do not want to and will not have children, and understanding menstruation solely through reproductive frameworks can be dysphoric to them. Also, subsuming menstruation under reproduction often leads to the issue of it being sidelined in research and as important *only if* it is linked with obstacles to fertility. Further, because menstruation is often tied to pain and menstrual disabilities such as endometriosis (Endo), fibroids, and Polycystic ovary syndrome (PCOS), in many ways menstruation makes more sense in dialogue with a disability justice framework.

In *The Palgrave Handbook of Critical Menstruation Studies*, Ela Przybylo and Breanne Fahs write that “menstrual justice ... includes thinking about menstruation, menstrual pain, and access to menstrual products intersectionally, ... seeing access to menstrual products, including pain control, as a human right as well as understanding menstrual pain as a form of chronic pain that necessitates proper access to care” (2020, 376). Recognizing that menstruation often coincides with pain (dysmenorrhea), which can be severe, ongoing, and chronic, and that it can intensify many menstrual disabilities (those disabilities that are linked to, aggravated by, or associated with menstruation, such as Endo, fibroids, and PCOS), menstrual justice must be perceptive to the realness of menstrual pain and disabilities as well as to questions of access. Access includes access to menstrual products such as tampons, pads, and cups, to painkillers for managing period pain, to health care, as well as to menstrual suppressants that are electively (and not coercively) chosen. Lack of access to menstrual products, including due to period poverty, also exacerbates mental health and psychological distress, including depression and anxiety (Muhaidat et al.). Access also necessitates that the products that are available do not introduce further harm into the bodies of menstruators, as was the case with Procter & Gamble’s 1975 super absorbent tampon, Rely, in the U.S., which increased the chance for Toxic Shock Syndrome leading to many deaths and injuries, as discussed by Sharra Vostral, and as is the continued case with the high concentration of toxic substances found in menstrual gear (DeVito et al.; Vaughn). A menstrual

justice framework strives to be attuned to disability justice through an attentiveness to pain, to the demands of disabled menstruators, to the links between menstruation and disabilities, and to what OB/GYN Charis Chambers named and Przybyło discusses as “period trauma” (Przybyło 2025, 64; Bunch)—or the many ways periods are traumatic for menstruators. Because menstrual disabilities, menstrual trauma, and menstrual pain are all frequently minimized by medical professionals and society at large, an investment in centering these as part of disability justice is important (Hoffmann). Further, drawing on disability frameworks, such as those on pain (as explored by Patsavas and Margaret Price), justice and liberation (as in the work of Berne and Piepzna-Samarasinha 2018), and robust understandings of access (as Logan Smilges explores), strengthens understandings of menstrual justice.

End to colonial occupation is, I would argue, also a central tenet of menstrual justice, as it should be of all justice frameworks. Under conditions of occupation, war, and genocide, menstruators of all ages are bound to have more difficult experiences with menstruation. While menstruation is difficult even under conditions of peace and safety, it becomes a horror for people under occupation, war, and genocide, with menstruators commonly experiencing little to no access to period products, no private places to wash and change any fabric that might be modified for menstrual absorption, little access to running water, little access to pain relief, and few opportunities to rest and recover. As I will discuss in the following sections, this is certainly the case for menstrual bleeders in Gaza, for whom access to menstrual products is blocked by Israeli control of aid. The horror of menstruating while in an occupied nation undergoing the horrors of war, is often attested to in journalistic exposés. While historians and media have historically failed to cover the specific injustices of menstruating while at war or under occupation, existing exposés suggest that it becomes one of the most harrowing experiences for survivors—trying to manage menstrual flow without access to toilets, water, menstrual gear, and pain management all while undergoing brutal attacks on one’s nation, community, and home (e.g. Batrawy). This is all the more so for young bleeders—children and girls—who have not yet learned how to manage their periods or who perhaps experience menarche during a siege or colonial invasion. In Gaza, there is an estimated 249,000 menstruators who are children or adolescents (Taha, 1).

Palestinians under occupation also face brutal conditions in Israeli prisons if abducted or detained, including lack of access to menstrual products, menstrual shaming, and violence. Also, because many children are abducted and imprisoned, some also experience their first periods in these conditions. Malaka Shwaikh, drawing on journalist Reem Abu al-Laban’s work from between 2015 and 2021, writes that in interrogation rooms, prison cells, and *al-posta* prison vehicles, prison authorities exert “gendered control over menstruating bodies” (36). In similar ways, control over menstruating bodies, including through a denial or limit on menstrual products, is prevalent in prisons around the world, including in the U.S. (Shwaikh, 34). Menstrual justice thus needs to advocate for access to safe, nontoxic conditions free from war, genocide, abduction, imprisonment, and colonial occupation, all of which make the menstrual experience a harrowing one unlike any other.

In their published work, Przybyło outlines a list of upwards of 10 elements of menstrual justice, one of which includes ungendering. Ungendering “questions the naturalization of certain phenomena as the property of gender, including the idea that menstruation is the property of only one gender” (2025, 15; 2024). While historically menstruation has been fused to womanhood, Przybyło argues this is disadvantageous for menstruators for several reasons. First, it is factually inaccurate because many women do not menstruate, ranging from postmenopausal women to sports athletes to transgender women (some of whom nonetheless experience period symptoms), and because many people of other genders do menstruate including transgender men and nonbinary people. Second, children who menstruate are *not* women, and using the language of womanhood to describe menstruating children rhetorically denies them their childhood, as I will explore in the context of Gazan and Palestinian menstruators. This is especially important because as the age of menarche or first period drops around the world, more and more menstruators are in fact children, and not women, and it is incumbent on researchers to use language that rhetorically emphasizes this (e.g. Demerath et al.). And third and finally, the use of the language of women to describe menstruators also does a disservice to cisgender women by binding the two together and suggesting that women must bleed and that bleeding is a sign of “true womanhood.” Ungendering, instead, follows critical menstruation studies scholar Chris Bobel to opt for *menstruator* language to acknowledge the problematics of describing menstruators as women. Removing the gendering of menstruation is a step toward menstrual justice because it allows for more inclusive, broad, and descriptively accurate language that strives to do less harm, while recognizing that children as well as people of all genders can and do menstruate and that many women do not. While there are many more elements to menstrual justice and menstrual justice needs to be thought of as flexible framework amenable to change across geopolitical contexts, the three pillars of disability justice, end to occupation, and ungendering provide an important starting point.

Menstrual Justice for Palestinians on Social Media

Now that I have unpacked the importance of justice frameworks and focused on three central principles of menstrual justice, I want to focus on three tactics that Palestinian and pro-Palestinian content creators articulate online in relation to menstruation: (1) that disability justice and menstrual justice are linked, (2) that menstrual shame and secrecy are tactics of a Western genocidal imperialism, and (3) that menstruation needs to be ungendered not only to recognize that people of all genders menstruate but also that a large portion of menstruators are *children* and not women. As readers will observe, these three tactics loosely align with the three principles of menstrual justice I outlined above by articulating a link between menstrual and disability justice, focusing in on an analysis of how Western media and Israeli occupation make it intentionally difficult for menstruators in Gaza to exist, and looking at how creators center ungendered language toward emphasizing that children and people other than cis women also menstruate. In what follows, I discuss the importance of these interventions and how they challenge Western media’s gaze by way of discussing three social media posts. The first post on Twitter/Instagram by @palestinepromise, with which I started this piece, makes a deliberate link between disability justice and menstruation in occupied Gaza; the second, a TikTok by journalist Bisan Owda (@wizard_bisan1) refutes a Western imposition of menstrual

shame and instead refocuses us on the links between menstrual product access and Israeli occupation; and the third, a Twitter post (of an Instagram post) by @fitnfulI, refuses to buy into a homonationalist logic that locates Palestine as unqueer and untrans by asserting the importance of ungendering menstruation.

Importantly, these three narratives are vital interventions made by content creators that are not frequently covered in Western news media which tends to speak of Gaza as a “war-zone” and the lack of period pads as a natural byproduct of a “war-zone,” avoids mentions of Israel’s genocide of Palestinians, talks about menstruators as women (and sometimes “adolescent girls”), and discusses menstrual secrecy as part of “Gaza’s traditional society” (i.e. Batrawy for *NPR*). Such Western media framings have several effects. By rendering period product scarcity a natural byproduct of war, Western media intentionally avoids Israeli culpability for both the genocide and the blocking of aid to Gaza. Further, by talking about the issue using the language of women and “adolescent girls” only, Western media retrenches a homonationalist vision of Palestine as a place queer and trans people do not exist while simultaneously erasing Palestinian childhood. And through language such as “secrecy” and “Gaza’s traditional society,” Western media deflects from the problem of Israeli genocide and blocking of aid and renders Palestinian society as retrograde, backwards, and of a different time—all common rhetorical tactics of settler colonial powers. Palestinian and pro-Palestinian social media creators advocating for menstrual justice explicitly challenge these faulty narratives and refocus the conversation on menstrual justice. Further, through social media, Palestinians take back the “permission to narrate” their experiences of genocide, occupation, and survivance, something that is routinely denied them by Zionists, Israel/is, and their apologists (Said, 31). In short, then, social media platforms, even if imperfectly and inconsistently, did and do offer Palestinians the opportunity to narrate firsthand the atrocities that ensued after October 2023 and are thus vital texts for studying Palestinian resistance.

First, some of the pro-Palestinian content I have seen online deliberately links menstrual justice to disability justice. There are several reasons why this link is an important if often under-utilized one. First, disabled people menstruate. Second, many disabilities are connected to menstruation (i.e., Endo, chronic pain, fibroids, PCOS). Third, and importantly, not having access to menstrual products is an access issue. The last of these is the connection we see most strongly in the @palestinepromise post with which I opened this article. @palestinepromise is drawing attention to the fact that under an Israeli occupation and genocide, access to medicine and assistive technologies needed to be able to hear, see, move, manage trauma, as well as manage pain and bleeding, is not available—indeed—is actively, deliberately, strategically barred as part of an Israeli strategy of disablement. This expansive view of disability justice recognizes that menstruators require menstrual gear and painkillers, among other technologies, and that these access technologies are just as important as glasses, canes, chairs, prosthetics, or hearing aids. Preventing access to items like menstrual gear is in turn another tactic by which Israel dehumanizes and debilitates Palestinians.

Writing on Gaza under siege, Christine Sargent and Michele Friedner reflect on experiences of children relying on cochlear implants to communicate who after October 2023 were suddenly not able to charge them and of recently implanted children who are unable to attend therapy sessions to access post-

surgery care. In parallel though distinct ways, menstruators who rely on pads, tampons, or pain control, and who are not able to access them, are being barred from their access needs. I am not saying that menstruation in itself *is* a disability per se but that disability justice is a highly effective tool through which to understand menstrual justice. Access to menstrual gear and pain relief are both human rights and access needs for menstruators. Not being able to manage one's bleeding in a way that is gender affirmative and culturally appropriate is a form of bodily and psychological violence utilized by colonizers and occupiers.

While menstruation is a difficult experience even under conditions of peace due to pain, potential dysphoria, and cultural misogynist discourses that denigrate the bleeding body, what is important to recognize is that in Gaza access to these products is actively being blocked by Israelis at the border through both the prevention of aid entering Gaza and the active destruction of aid—that is scarcity is being manufactured by Israel. Even in the first months after October 2023 when some limited aid was coming in, menstrual products were not commonly included, as reported by Palestinians online. Casting shade, Peabody-winning journalist and content creator Bisan Owda (@wizard_bisan1) shared in a video from Dec 7, 2023, “the thing is I don’t know where’s the UN women, where’s the UNFPA, where’s the UNICEF, the UNRWA, where’s the rest of the INGO’s I don’t know if [...] they are not wise enough to put pads too in the 8 trucks that entered Gaza” (Figure 2).

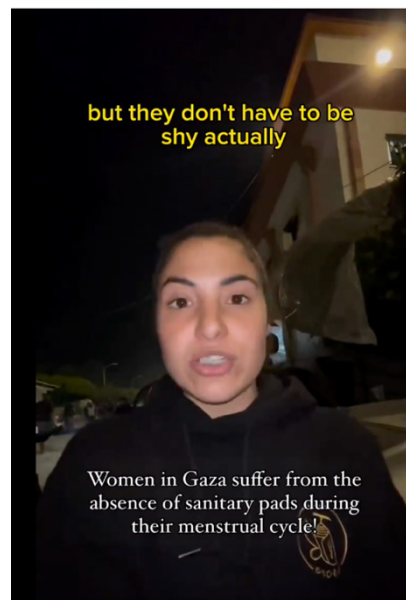


Figure 2: Access Text: A still from a TikTok by @wizard_bisan1. Bisan, with light olive skin, dark hair, and in a black sweatshirt, is speaking against a dark night background with a building behind her left shoulder. At the top in yellow sans serif is text of her speaking, which says “but they don’t have to be shy actually,” and at the bottom in white serif is text she added, “Women in Gaza suffer from the absence of sanitary pads during their menstrual cycle!”

In those first months after October 2023, as people on Twitter reported, menstruators who had access to birth control took to menstrual suppression. One reason for this was that birth control was still available in some pharmacies and was substantially cheaper than pads. Here menstrual suppression was less an

affirmative opportunity to decide when and if one bleeds but a response to conditions of displacement and lack of access to menstrual gear—in other words, essentially a tool of eugenics. As reported on social media, most menstruators used tent scraps and other textile fragments instead of menstrual pads or tampons. In addition, due to ongoing displacement and bombing by Israelis there were and are few washrooms and few private places to care for one's body; for example, in Rafah it was estimated that one toilet serviced 480 people ("Menstrual Health Management;" Taha, 2). The management of periods, not even mentioning menstrual pain, which is common for upwards of 80% of menstruators (Ju, Jones, and Mishra; Grandi et al.) and 90% of children and adolescents who menstruate (Ghandour et al.), is barred through lack of access to menstrual products, washrooms, water. Preventing menstruators from being able to manage their periods is another tactic of disablement that not only aims at attacking the body but also at demoralizing Palestinian bodyminds and painting Palestinians to a Western audience as uncivilized, bleeding, unmanaged – "fortified by racist and ableist portrayals of Palestinians as inferior, deficient, and subhuman" (Jaffee, 122).

Yet Pro-Palestinian and Palestinian online content creators refuse this link between shame and bleeding. As Bisan (@wizard_bisan1) shared in the video mentioned above from Dec 7, 2023:

women now are simply exposed to psychological and physical health risks because there's no products to use during their periods women are shy to tell you of this but they don't have to be shy actually the world is not shy to let us to death for 62 days now so they don't have to be shy to tell you that there's no pads to use in Gaza (Figure 2).

Appearing in a black sweatshirt with her dark brown hair pulled back against a white building and the night sky, Bisan tells it like it is: the shame should not belong to menstruators, it should belong to the West for partaking in a genocide that is making it impossible to meet basic access needs. Shame, notably, is a common tactic imposed on women—cis and trans—especially in Western contexts. Menstrual shame has a long Western history that has been strategically utilized by menstrual product companies to sell menstrual products, as Przybylo and Fahs (2020) discuss. Menstrual shame also has the effect of individualizing the menstrual experience, making it a personal burden a menstruator must bare alone and hide from non-menstruators around them—usually cisgender men. In the context of violent genocidal occupation, shame is also intentionally manufactured to make it impossible for menstruators to take care of their bodies and to, again, destroy the spirit of the people. Menstrual justice, instead recognizes, as Bisan does, that "oppression is inextricably intertwined with the Israeli state's settler-colonial project in the region" so that lack of menstrual product access and menstrual shame are manufactured (Jaffee, 117).

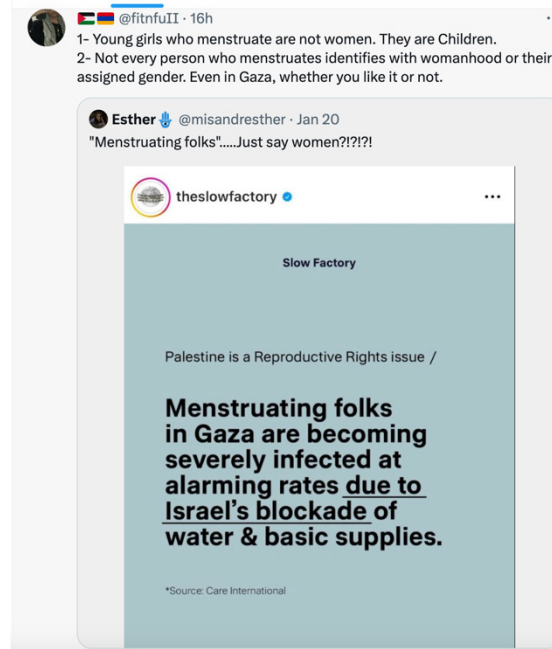


Figure 3: A Twitter-reposted Instagram post. The IG post is black sans serif text against an ashy pale blue background. The text by @theslowfactory reads, “Palestine is a Reproductive Rights issue” and in bigger bolded font, “Menstruating folks in Gaza are becoming severely infected at alarming rates due to Israel’s blockade of water & basic supplies.” This post was added by user Esther (@misandresther) to Twitter with the comment “Menstruating folks Just say women?!?!?!” and then Esther’s post was reposted by @fitnfulI, as discussed below.

Finally, content creators are also challenging women-only menstruation language. This has two important goals. First, it challenges the Israeli and U.S. deployed homonationalist idea that Gaza, Palestine, and Muslim-majority countries in general are by default homophobic and transphobic and that there are no queer and trans Palestinians. As a post on Twitter by @fitnfulI indicates, “Not every person who menstruates identifies with womanhood or their assigned gender. Even in Gaza, whether you like it or not” (Figure 3). This post by @fitnfulI, who on Twitter indicates they are Gazan and use they/any pronouns, is a response to another user @Esther who responds to an IG post created by @theslowfactory, which uses menstruator-forward language. With black sans serif text against a grey-blue background @theslowfactory IG post indicates: “Menstruating folks in Gaza are becoming severely infected at alarming rates due to Israel’s blockade of water & basic supplies” (Figure 3).

Menstruator language is, importantly, not a placeholder or replacement for “women.” Rather it is a term used within critical menstruation studies, such as by Bobel, to challenge the idea that only women menstruate as well as that all women menstruate. @Esther responds to the menstruator-forward language by saying “Menstruating folks’.....Just say women?!?!?!” to which @fitnfulI adroitly responds, as described earlier. Transexclusionary radical feminists like JK Rowling argue against this language on the grounds that it erases some of the specificity of women’s experiences. I disagree with this claim and believe that menstruator language can actually sharpen our analysis of how menstruation has been historically used against women by attaching menstrual bleeding to women through essentialist notions of womanhood.

The second important goal of challenging a woman-focused language around menstruation is likewise adroitly observed by @fitnfulII, namely that it erases Palestinian children. As they write “Young girls who menstruate are not women. They are Children.” This claim is so crucial in a Palestinian context. The “womaning of menstruation” (Przybyło 2025, 43) not only denies that other genders menstruate but also ties bleeding to *adult* womanhood even while menarche is occurring more and more frequently in children. This relates very deeply to the dehumanization of Palestinians since in Western accounts and media portrayals Palestinian children are frequently denied their childhood, portrayed as adults, as men, women, and even more frequently as “terrorists.” It is thus vital to undermine ideas that menstruation is the property of adult women and adult women only and that menstruation is a sign of “womanhood” and “adulthood” as a means to reassert the childhood of young bleeders. I will also add here that I have seen other Palestinians online make the argument that using the language of “menstruator” is in itself dehumanizing or that this level of attention to language is a neoliberal colonial tool distracting us from taking action to end genocide. While I disagree with both these arguments, the first for the reasons already specified and the second because it detracts from the importance of the role that menstrual trauma plays in genocide and the importance of gender and trans liberation, it is also useful to understand that ungendering, as Hortense Spillers and more recently other scholars including Riley Snorton have argued, has been used historically to disenfranchise and dehumanize people. While I do not think this is what is happening in social media posts that advocate for ungendering as part of a robust framework of menstrual justice, it is true that ungendering is used by Israel to discount the specificity of the lives destroyed. The three social media posts I analyzed, loosely correspond with a vision of Palestinian menstrual justice that: dialogues with disability to recognize the way Israel intentionally manufactures disability in Palestine, including through lack of access to period products, emphasizes justice as necessitating the end of war and occupation, and understands that ungendering menstruation plays a role in seeking robust menstrual justice for all menstruators.

Echoes of Menstrual Justice in *Farha* (2021)

As many following the Palestinian genocide on social media quickly learned due to the educational efforts of Palestinians and allies, October 2023 onwards is not the first time that Palestinians have been displaced, mass murdered, and mass disabled, while the land they steward is mercilessly razed along with trees, non-human animals, water supplies, universities, hospitals, and homes. In this section, I begin with a discussion of the 1948 Nakba for context and then move into an analysis of Darin J. Sallam’s film *Farha* (2021), set during the Nakba. I pay attention to the possibilities and limits of understanding the film as a vision for Palestinian menstrual justice, reading into some of the debates to point to how the film might be considered a *hasbara* film, or a film that is either explicitly or indirectly sponsored by Israel with the goal of minimizing Israeli culpability for genocide.

As a means by Western powers to create the state of Israel on stolen Palestinian lands, mass killing and displacement of Palestinians took place in an unprecedented way in 1948, known in Palestinian Arabic as Al-Nakba, or catastrophe. During this ethnic cleansing, Zionist settler militias murdered an unknown

number of tens of thousands of Palestinians, razing villages to the ground and poisoning wells, and forced about half of the then Palestine's population into displacement, an estimated 750,000 people. The villages, towns, and the majority of Palestinian land, was then settled by Zionists and replaced with Hebrew names. Zionism, in this sense, "is an ideology and a political movement that subjects Palestine and Palestinians to structural and violent forms of dispossession, land appropriation, and erasure in the pursuit of a new Jewish state and society" (Salamanca, Qato, Rabie, and Samour, 1). The Nakba, in turn, is less a historical event, and more part of the structure of settler colonialism, "manifested today in the continuing subjection of Palestinians by Israelis" (2). Darin J. Sallam's film *Farha* (2021) focuses on the events of the 1948 Nakba by way of a 14-year old protagonist, by the same name, as she sees her villages sacked first by the British army and then by Jewish settlers, her family murdered off, and her way of life ended.

Sallam is a Palestinian diasporic director based in Jordan, and *Farha*, her first full-length feature film, was premiered at the Toronto International Film Festival in 2021 and has been available on *Netflix*. Sallam's film is based on a story she heard from her mother (Bsoul). As Sallam indicates, "I wanted to take this opportunity to show this other side of the narrative. It's always talked about from the Israeli side, but the Palestinian side has been ignored in cinema" (Carew, 78). Yet, it is important to point out that reviews of the film, such as by Terri Ginsberg and John King, have argued that *Farha* might actually be a *hasbara* film, that is a film that is directly or indirectly sponsored by Israel or its allies to portray Israelis positively, normalize settler colonialism, and orientalize the image of Palestinians, although there were also outbursts of Israeli anger at having the Nakba represented at all when *Farha* was made available on *Netflix*. Reviews by Samah Bsoul, Ahmed D. Dardir, and Terri Ginsberg and John King, argue that *Farha* softens the Nakba for viewers, evokes vague language in relation to Zionist settlement and anti-Palestinian violence and murder, and engages in orientalist portrayals through an easy storyline, reductive costuming, and the rendering of Palestinian gender relations as intrinsically patriarchal. In the words of Ginsberg and King, the film "offer[s] audiences little ... with which to advance their knowledge of that heinous event or to heighten their sympathy for Palestinian resistance" (256). Taking these critiques into account, I want to recognize the constraints, including financial, under which Sallam likely worked to make the film possible and how the final outcome, as "covert *hasbara*" (257) might not fully embody what she imagined, though she may not be able to comment on this. And yet I still think it is valuable to think about how the film encapsulates messages of Palestinian justice including menstrual justice, especially alongside the social media posts I already analyzed. It also importantly centers a story of a young girl in the context of the Nakba, even if it does so in imperfect ways. While Palestinians are denied in Edward Said's words, "permission to narrate," this is perhaps even more true for Palestinian women, girls, and gender minorities (31). As one story among others, *Farha* contributes to the extensive evidence on the Nakba, the "endless sea of memories from events that are now documented beyond doubt by historians, even Israeli ones" (Ofir, n.p.), even if this documentation and acknowledgment has led to little material change and, indeed, atrocities against Palestinians are even celebrated by Zionists as necessary for the Israeli state (Abu El-Haj, 259).

For most of the film, 14-year old Farha (played by Karam Al-Taher) witnesses the atrocities that unfold at the hands of Zionist settlers from behind the closed door of a cellar where she is hiding, and where very limited light leaks in, contrasted with the beginning of the film in which viewers get a glimpse into Farha and her community's vibrant life, filled with family, food, friendship, reading, and the flows of growing up. She finds herself in the cellar, because as Farha's father is looking for firearms to defend his family and community from the violent settlers, he asks her to stay in the cellar, with a dagger for protection, locking her in. As viewers we stay with Farha in that dark space, listening in on and partially seeing the events that unfold. The horrors of genocide unfold in the village, as a family of two parents, two children, and a baby is executed in front of Farha's home, which she can see through the cracks.



Figure 4: Access Text: A film still from *Farha*, showing the brief moment in which Farha discovers her first period. Farha, with olive skin and dark disheveled hair is in the cellar, with her back against the cellar door and a white wall behind her. A ray of light is on her hair in the otherwise dimly lit space. She holds up her hand, covered in blood, with an expression of shock on her face.

During her time in the cellar, Farha also begins to menstruate (Figure 4). This happens shortly after Farha has witnessed the murder of the family, with the freshly born baby left behind. With the baby crying in the background, Farha grasps her abdomen in pain and discovers blood on her dress. Reaching under she removes her hand with fresh red blood and horror on her face, the scene connecting with the fresh blood of the massacred family from shortly prior. The scene ends with Farha singing to herself while lying on the ground near the cellar door as the day turns to dusk. What does this short scene of menarche tell viewers about menstrual justice as it intersects with Palestinians' ongoing fight for liberation?

I have not seen mentions of this brief scene in any reviews of the film, speaking to the ways in which menstruation, including menarche for young bleeders, is often sidelined and ignored in narratives of war, occupation, and colonial violence. Sallam's brief inclusion of the moment, barely notable, could be argued to be merely a background element that speaks to Farha's coming of age during the Nakba or it could be understood as speaking to how the trauma of what Farha witnesses forces her body to grow up too quickly. I read the quiet moment as a textural element that enfleshes Farha as embodied, menstruating, and having to navigate the trauma of a first period amidst the horrors of Zionist violence and settlement. Here I see menstrual justice as directly connected to the pillar of ending occupation, as we get momentary insight into

the twin horrors of having to navigate a highly gender-coded new bodily experience alone and in a violent context. While the cellar protects her body, Farha is deeply affected by being an intimate witness to the ethnic cleansing of her village, the presumed death of her dad, the separation from her closest friend, and the horror of the murder of the family she saw through the cellar door. Although I am not claiming the film is outright making an argument about menstrual justice, it is presenting a portrait of a 14-year-old person having to contend with ethnic cleansing while also menstruating—and even this is highly extraordinary.

Yet, while as a 14-year-old Farha is a child, I would suggest that the context of when menarche happens—shortly after seeing a heinous crime—positions her as less a child and more as someone “becoming a woman” and here I would agree with critics’ observations of orientalizing messages in the film. As a coming-of-age narrative, menstruation functions here against the menstrual justice principle of ungendering which can keep intact the childhood of very young menstruators. Instead, I get the impression that we are to interpret Farha as having to grow up too quickly because of the atrocities witnessed, and that the placement of the menstrual bleeding scene following the massacre of the family retrenches that she is not a child who got her first period, but a person who is being catapulted into adulthood or womanhood. Yet even in this sense, the film perhaps suggests that menstrual justice, and the right of children who menstruate to *remain* children, is not possible in a context of violent occupation, settlement, and colonization. In this sense, Sallam’s brief portrayal of Farha as a young first-time menstruator can work effectively to amplify the need for menstrual justice to always remain attuned to geopolitical contexts, to the need for the liberation of Palestine, and to decolonization as the route to truly just menstrual futures for children.

Free Palestine: Toward Menstrually Just Futures

In this piece, I explored menstruation and girlhood in a Palestine under occupation through a menstrual justice perspective informed by critical menstruation studies, feminist disability studies, and Palestine studies. Outlining a framework of menstrual justice as including disability justice, end of occupation, and ungendering, I proceeded to look at Palestinian and pro-Palestinian social media posts advocating for menstrual justice as well as Darin J. Sallam’s representation of menarche in *Farha*. I argued that a menstrual justice framework must be invested in ending settler colonialism in Palestine and everywhere, for the reason that menstruators, including young menstruators, suffer under colonial occupation and war. Through the blocking of aid that causes lack of period products, absence of sanitary and private conditions to rest and remove menstrual gear, and the traumatic effects of war and genocide on both individual and collective bodyminds, there is no menstrual justice, including and especially for young bleeders, without a free Palestine.

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Red Monsters and Mythic Villains: Redefining Menstruation and Girlhood in *Carrie* and *Turning Red*

Olivia Kumiko McDuffie

Abstract: Beliefs surrounding menstruation and myth are woven together in two films prevalent in the world of adolescent media: Brian De Palma's *Carrie* (1976) and Domee Shi's *Turning Red* (2022). Carrie's experience with menstruation highlights the harm of period stigma, specifically with an emphasis on religious myths surrounding menstruation. These myths prevent Carrie from having the proper education of her body but also redefines menstruation as the core of her villainy- accenting the societal anxieties about female bodily autonomy and power. Myth flows within *Turning Red*'s fantasy plot, as the main mythic element is the women of the Mei's family turning into giant red pandas—a metaphor for puberty. Transformation is portrayed as a burden but also a source of empowerment, as Mei finds community within her friends, family, and herself. A push for a stronger and safer community for menstruators and young girls lies at the core of this discussion, calling for positive representation of menstruation for all gender identities. Through the characters of Carrie and Mei, menstruation and girlhood are emphasized as experiences that not only need but demand a positive and educated community. In other words, as Mei Lee states "I'm thirteen! Deal with it!" (*Turning Red*).

Keywords: [menstruation](#), [girlhood](#), [myth](#), [feminist theory](#), [film analysis](#), [Carrie](#), [Turning Red](#)

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When Meilin Lee (Rosalie Chiang) screams out the line "I'm a gross red monster!" in the film *Turning Red* (Domee Shi, 2022), she enters a conversation that spans much farther and wider than audiences could imagine. This conversation takes place within a specific ideology of girlhood in which young girls are taught that the changing of their bodies will make them grotesque. Menstruation is offered as the catalyst for this monstrous change within *Turning Red* as the fear of puberty is used to propel the film's plot. The use of horror tropes to portray the transformation from girlhood to adolescence that menstruation signals is best highlighted by examining *Turning Red* in conversation with the explicit horror of *Carrie* (Brian De Palma, 1976). Both films offer a unique outlook on the marginalization of girlhood and menstruation through the terror triggered by the girl's transforming body. While *Carrie* reinforces menstrual myths, *Turning Red* reframes them yet the two still emphasize the ramifications of myths surrounding menstruation—whether stemming from religion, family, or society. As Carrie White (Sissy Spacek) and Meilin (called Mei for short) mirror each other through experiences with the "beastly" transformations of their bodies, menstruation becomes a playground for discussions of why powerful menstruating bodies are deemed monstrous. Ultimately, both

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Carrie and Mei gain power by becoming menstruating teenage girls – though Carrie succumbs to this power, while Mei is able to harness it.

Within the horror genre classic *Carrie*, the first instance of fear and shock enters the film as Carrie White starts her period for the first time. The connection between horror and menstruation continues throughout the film, as a constant symbol of Carrie's turn into both victimhood and villainy. Experiencing this change places both Carrie and Mei into the "victim" and "villain" categories. Indeed, both films portray periods as an attack on the young, innocent girls; this attack becomes a catalyst for what turns them both into "monsters". Both characters are shown in this villainous light for most of their films. Girlhood is also under attack through this association between bodily transformation and terror, as young girls viewing these films are being presented with the idea that girlhood might equal monstrosity. Menstruation is not an unattachable experience of girlhood, as many girls and women do not experience periods—but transformation is an unattachable experience of girlhood. A beastly portrayal of change in girlhood can produce negative beliefs surrounding any feature of girlhood whether it simply be the heightening of emotions. This ultimately tells audiences that girlhood is something not only to fear but something to detest. Once Carrie has experienced her first transformation in the film she continues to transform until ultimately, she becomes a bloody, murderous demon. Mei, however, gets to work through the experiences and emotions she feels—which should be unsurprising to audiences as this is a Disney PIXAR film. Transformation is portrayed as a burden for Mei but also a source of empowerment, as Mei finds community within her friends, family, and herself.

The topic of community is at the very core of the conversation that occurs when putting these two films together on menstruation and girlhood— more specifically the immense need for community. It's no secret that menstruation is a topic that in the past has been held secret or ignored within both the media and societal discourse. A prime example is Judy Blume's 1970 girlhood-forward novel titled *Are You There God? It's Me, Margaret*. The novel was banned for "General filth. Explicit sex and reproduction. Menstruation, choosing a religion" (Curry 34). When menstruation is ignored or misrepresented, it directly harms the physical and mental health of those who menstruate. In a world where menstruation representation, like Blume's novel, is often labeled unnecessary or improper for consumption, it is imperative that people who menstruate find a strong understanding of menstruation to gain a strong understanding of themselves. It is the exclusion or misrepresentation of menstruation from discourse that maintains the cycle of harm to the physical and mental state of menstruators, from the minute they miss out on the information they so vitally need and well into their older years.

Community, in its most basic definition, is a group of people who inhabit the same space, or all have a specific characteristic in common. The larger connotation of community on the topic of menstruation is that we live in a menstruating world, a simple notion often left unsaid. The menstrual community features every person who menstruates, illuminating that the issues surrounding menstruation discourse does not solely affect girls and women but trans and nonbinary individuals as well. The menstrual community, however, cannot only include those who menstruate—it must include everyone regardless of menstrual identity. When

living in a menstruating world, everyone becomes part of this community and must educate themselves on what menstruation is to ensure a safe environment for all.

Menstruation education is a form of protection for menstruators, a way of preserving the health of the mind and body. The lack of education becomes a problem not just for the menstruator, but for the larger understanding of menstruation and of girlhood. A study on adolescent girls and knowledge of menstruation found, “that only 24% of study participants knew about menstruation before attaining menarche” (Shrestha 3)—“menarche” being the first occurrence of menstruation. When there is such a large gap between the knowledge of menstruation and the actual experience of menstruation, the middle is subject to patriarchal jargon and abusive beliefs or myths surrounding periods. For Carrie and Mei, these myths come in the form of religious beliefs and generational metamorphosis. The lack of an educated community helps trigger the terror that ensues in both *Carrie* and *Turning Red*, both beginning with the first glimpse of a period.

First Period “Scare”

Within the first minute of *Carrie*, it is made clear to audiences that Carrie is unpopular at her school and is heavily bullied. The first glimpse we see of Carrie occurs during a girls’ P.E. class in which she misses a play during the volleyball game, and her teammates angrily yell at her. We see her quietly take the bullying, even when a teammate hits her on the head with a hat which indicates that this bullying is common for Carrie. The first few minutes of the movie places Carrie into an already uncontrollable and violent environment, leading her to seek refuge after the P.E. class. We see Carrie next as the group of girls are in the locker room changing and cleaning off. The camera shot moves slowly as it pans around the group of teenage girls and the tone is set with a soft piano scoring. Once the camera reaches Carrie, we see her taking a shower alone. She is now separated from the harsh bullying earlier experienced, metaphorically washing off the cruel words that came from her peers. There is a major sense of peacefulness and calm as audiences see Carrie able to take a breath in safety; However, only until Carrie reaches down her body and discovers blood on her hands. Real horror has now entered the film, disrupting the brief moment of peace and safety.

What was once a graceful and almost angelic scene has now turned into a shocking and explicit display of panic for both Carrie and the audience. As Carrie fanatically searches and screams for help, she is only met by the taunting and abuse of her classmates. The other girls in the locker room start mocking and throwing sanitary products at Carrie, yelling “Plug it up! Plug it up!” (*Carrie* 00:05:08-00:05:12). Carrie’s reaction to finding the blood on her hands shows that she is extremely undereducated about menstruation. As the other girls immediately conclude that Carrie had started her period; Carrie thinks she was badly hurt or injured. This sets up Carrie as a victim to her own body, as we come to find that Carrie’s injury is the natural occurrence of the menstrual cycle. Scholar Shelley Lindsey compares Carrie’s shower scene to the infamous shower scene from Alfred Hitchcock’s classic horror film *Psycho* (1960)—a psychological horror movie featuring the brutal murder of a young woman while in the shower. *Psycho*’s shower scene has been referenced throughout pop culture and is considered the most memorable moment of the movie. Lindsey argues that “we associate

Carrie's menstruation with a bloody attack, with blood flowing from an inflicted wound" (Lindsey 35). The comparison between *Psycho* and *Carrie* is perhaps the perfect way to display how menstruation is being represented in this scene. As *Psycho*'s Marion Crane (Janet Leigh) is viciously stabbed to death in the shower, *Carrie* is shown in the exact same placement as Marion but with her pain coming from within. It's also important to note that *Psycho* and *Carrie* are both extremely well-known open displays of the naked female body in media. In their most natural and exposed forms, both females have pain inflicted upon them, and appear as "victims". When menstruation is associated with horror, it pushes the idea that menstruation is some atrocious and horrid attack against the body that robs those who menstruate of control over their own body.

The *Carrie* shower scene was meant to invoke these unpleasant feelings of fear and agony. Actress Sissy Spacek shares in an interview about the scene, "I went to [director] Brian De Palma and said: 'Tell me about this scene, what is it like?' And he turns to me and he says: 'It's like getting hit by a Mack truck'" (Keller, "*Carrie's* Shower Scene"). This scene was about invoking brutal harm onto the character of *Carrie*—which creates two outcomes. The first is that *Carrie* becomes victimized by her own body, which implies that people who menstruate are victims of their own bodies—this idea directly harms the way they view themselves. Menstruation is a natural occurrence and that word "natural" when used in a negative light can teach young girls and young menstruators that they are natural victims—destined to have pain and harm inflicted upon them. The second outcome follows the same idea: menstruation comes from within the body. Just as young menstruators can believe they are natural victims, it's more plausible that they come to believe they are natural villains. In the shower scene, what is the cause of harm for *Carrie*? Her period.

Menstruation enters *Turning Red* perhaps in an opposite way than it does in *Carrie*. Instead of a visual display of menstruation, audiences are shown a discussion of periods first. Rather than starting her period, Mei has woken up as a giant red panda and doesn't realize it until she looks in the bathroom mirror. Shocked at her own reflection, Mei screams and causes her mother to come running to the bathroom door in panic. Mei's mother, Ming Lee (Sandra Oh), tries to assess the situation from the other side of the door—asking Mei the big question, "Did the red peony bloom?" (*Turning Red*, 00:17:10-00:17:13). This question is a euphemistic way of asking Mei if she has started her period, with floral imagery often used to avoid openly describing body parts specifically for women. Mei, confused and in a state of panic, responds with a hesitant "Maybe?" (*Turning Red*, 00:17:15-00:17:16) which causes her mother to spring into action and burst through the door. To hide her new appearance, Mei rushes into the shower with the curtain blocking her body. Thus, Mei has landed within the same setting as *Carrie* when she started her period.

Though Mei does not reach down and find blood on her hands, she is still experiencing a major transformation with the key color of this transformation being red. As she hides within the shower, Mei is not only within the same physical setting as *Carrie* in her transformation scene but also in the same emotional state. Mei is in immense distress as she tries to grasp the idea that she is now a giant red panda with red fur and sharp teeth. We see the emotional state of distress shown through Mei's dialogue and actions. Her mov-

ing into the shower to hide from her mother signifies a sense of shame that Mei feels about her body, hiding from the one person who could probably help her most. Within the course of the two minutes, Mei experiences various types of emotions: from confusion to panic, fear, sadness, anger, and back to sadness. We hear Mei cry in the shower and out of fear yell angrily at her mother as she tries to provide Mei with support. This signifies the quick emotional transformations that her new body pushes out of her, but it also stands in for the emotional fluctuations that can come with a menstrual cycle. The combination of fast-moving emotions varying from sadness to anger is associated with the hormonal side of menstruation, which is often ridiculed and used against young girls or women expressing any kind of emotion. It's fairly common to hear the phrase "oh, she's on her period" when a woman expresses any kind of emotion or anger, whether said in a calm way or not. This is an example of how aspects of menstruation are used to demean women and those who menstruate, which in turn causes menstruators to think of themselves the way Mei describes herself within the scene.

After lashing out at her mother, Mei bursts into tears and exclaims the previously quoted line "I'm a gross red monster!" (*Turning Red*, 00:17:42-00:17:47). Mei uses the word "gross" to describe her new state, which has connotations of repulsiveness. It's a commonly used word, but it's an extremely harsh one to call oneself—especially coming from a young girl. However, labeling oneself "gross" is part of the same trajectory from victimization into villainy earlier discussed that is produced by the stigma society places on periods. The word "gross" in this line falls into that victimization category and the word "monster" falls into the villainy category. Mei has found herself victim to her own body and in the same vein a villain to her community (and perhaps herself).

Portraying menstruation as the catalyst for becoming a villain is where the effects of period myths unveil themselves. As Carrie reacts to reaching menarche (the first occurrence of the menstrual cycle) in a confused and shocked state, it's clear that she has been uneducated and miseducated about puberty and menstruation. It should also be noted that the other young girls in the *Carrie* shower scene are also miseducated about menstruation as they see that Carrie doesn't know she started her period and that entices them to bully her more harshly. Carrie is obviously without community in her experience with girlhood and menstruation, but it seems the other girls in this scene are as well. For Carrie, however, audiences come to learn that the reason for her miseducation on puberty and menstruation stems from her mother's relationship with religion.

Religious Discourses in *Carrie*

We see throughout the film that Carrie's mother, Margaret (Piper Laurie), uses Christianity as a way to control and punish Carrie. She uses Christianity as a means to abuse Carrie, to keep her sheltered from the world intellectually and emotionally—as well as physically as we see her mother lock in her a closet as punishment for sinning. The religious aspects of the film mirror the representation of menstruation in the film, as we have already first associated horror with menstruation from the shower scene and thus the bloody horror that follows carries the trace of that connection. The association of an "evil" menstruation that comes

from repressive religion appears in the film distinctly when Carrie has returned home after starting her period. Her mother receives a call from the school about what happened that day, and this unleashes an abusive reaction. Margaret begins citing religious beliefs surrounding Eve from the Bible, repeating the phrase “Eve was weak” (*Carrie*, 00:15:05-00:15:07) and forcing Carrie to do the same. Speaking as if she is performing a sermon or an exorcism, Margaret reads out the line “And the Lord visited Eve with a curse. The curse was the curse of blood” (*Carrie*, 00:15:16-00:15:20). The crying and frightened Carrie replies to her mother from the floor with “You should have told me, Mama” (*Carrie*, 00:15:20-00:15:22). There are a significant number of reasons why this interaction is abusive to the existence of menstruation—all of them, however, create the impression that periods are something wicked and evil.

Analyzing each of the above quotes in the given order, Margaret has already set the tone of the discussion as inherently harmful and misogynistic. By claiming that Eve was “weak,” she reiterates the patriarchal belief that all women are inadequate and lesser beings—as Eve was the first woman in the Bible, all women after her are cursed to the same fate. Eve’s punishment for being weak is stated as the “curse of blood”: menstruation. This religious belief claims that the menstrual cycle is a form of punishment, something given to produce shame and discipline. Through these beliefs, menstruation is portrayed as something that imprisons its victims—telling every person who menstruates that they have done something bad to deserve this punishment. As stated earlier, when menstruation is equated to horror, the characters within the film and the viewing audience are encouraged to believe that menstruators have evil “naturally” within them. Not only is the curse given as punishment, but it is given by the Lord—it is given by the creator of the universe. It’s a heavy penalty to bear; the natural process of menstruation has been portrayed as the “natural” result of shame and sin. However, when Carrie reaches out to her mother, she breaks this extreme portrayal of menstrual shame by asking the basic yet important question of why her mother didn’t just tell her about periods. Perhaps the traumatic events that happened earlier in the day by Carrie’s classmates wouldn’t have occurred if Carrie was aware of menstruation prior, but most definitely Carrie would have not experienced the terror that she felt in relation to her own body. Margaret ignores Carrie’s questions and pleas, emphasizing that she is using religious beliefs not only to denigrate girlhood and menstruation, but directly and most urgently to harm her own daughter.

Continuing the discussion of how patriarchal religious beliefs affect women and those who menstruate, the biblical Book of Leviticus states that “When a woman has a discharge, and the discharge in her body is blood, she shall be in her menstrual impurity for seven days, and whoever touches her shall be unclean until the evening” (*English Standard Version*, Leviticus.15:25). There are four key words in this verse: discharge, blood, impurity, and unclean. The first two words are fluids that come from the body, and the latter two words are false descriptors. To equate menstruation with filth is an extremely harmful belief to share not only to those who menstruate but to those who do not menstruate. It warps the understanding of menstruation into something bad and foul—it’s exactly what causes people like Mei to use the word “gross” to describe their own body. The idea of being “unclean” is echoed in the shower scene from *Carrie*, as Carrie was washing herself when she noticed the blood from her period, pushing the idea that the innocent and pure Carrie

experienced menstruation and was now transformed into someone impure and unclean.

The verse from Leviticus also produces the effect of making menstruation not only something for the menstruator to fear, but for everyone around them to fear as well. The verse states that if one touches a woman in “menstrual impurity,” they will also become unclean. Not only is the natural occurrence of menstruation in the body being shamed, but menstruation is figured as so evil that it spreads its impurity and sin just by touch. This idea portrays the menstruating female character as a villain- she is not only spreading her evil to you, but she is also doing it due to her own biology. An article from the *International Human Rights Law Review* argues that “In Christianity, menstrual taboos were a major reason to keep women from positions of authority” (Anthony 297). The depiction of menstruation from the Bible has been used to shame those who menstruate, and to justify discrimination against women. Because if a menstruating woman comes into power—if you let her win prom queen – she’s going to use her telekinetic powers to kill us all.

After the prom night from hell, where a vengeful Carrie slaughters her high school classmates, the film ends with a nightmare that Carrie’s classmate Sue (Amy Irving) has of visiting Carrie’s grave. The scene is shot similarly to the beginning of the shower scene, slow paced with a soft white haze frame. We see Sue wearing a long flowy white dress carrying a bouquet of flowers as she slowly walks to Carrie’s grave as an almost hopeful-toned score plays. When Sue kneels down to place the flowers on the grave, we receive a better view of what is written on the gravestone: “Carrie White burns in Hell” (*Carrie*, 01:35:11). The camera focuses on Sue’s tears, the gorgeous flowers, and her hands slowly placing them down- until the entire scene flips into horror as Carrie’s bloody hand reaches from under the ground and grabs Sue. The horror in the film *Carrie* begins and ends with the image of a young girl’s bloody hand. Blood is of course the major symbol throughout the film, perhaps most popularly known from the prom scene where Carrie has pig’s blood poured on her as she wins Prom Queen. However, the image of her single bloody hand is a direct reference to where blood first enters the film- Carrie starting her period. Both scenes are set up identically, with a serene and peaceful start and a shocking move into horror. The scene also reinforces the religious beliefs that surround the narrative of the film. Carrie is buried with a “For Sale” sign broken and made into a cross, with the “Carrie White burns in Hell” graffiti in large red letters (*Carrie*, 01:35:11). The phrase references biblical Hell, as the people of the town believe that Carrie was so evil that she now burns in a fiery separation from God. However, as Carrie is seemingly coming back from the dead in the nightmare, she not only has been rejected from a Christian heaven, but also from a Christian hell. Using the color white in this scene also references biblical elements, as white is often regarded as a color that symbolizes innocence and purity. In the scene, Sue wears a long white dress and becomes a representation of Christian hope and virtue. Just as the naked and bare Carrie experienced her first period in the shower, the red bloody hand disrupts the peace and faith of the world. From start to finish, this film conveys the message that at the core of the horror portrayed stands a menstruating girl.

Placing the visual and contextual example of a menstruating girl as the main source of evil in a horror film leads us into a larger discussion of the male gaze vs. female gaze in portrayals of menstruation and

girlhood. The first and most explicit example of the male gaze in *Carrie* appears within the opening shower scene: young naked minor girls standing around the locker room and the nude Carrie White washing her body. What occurs from this portrayal is that viewers are positioned as voyeurs. We are not meant to align ourselves with Carrie, nor are we positioned as bystanders; instead we are encouraged to feel as if we are spying on Carrie (and the other young girls). Voyeurism becomes a crucial element in the private and vulnerable scenes of *Carrie*, such as the shower scene—However, the audience stays within this visual framework even in the pivotal scene of the film in which Carrie reaches her full power.

The prom night from hell features Carrie in her most demonic glory as she uses her telekinetic powers to slaughter her classmates and school staff. Audiences are given a much different view of Carrie than how she was introduced, instead of an innocent and clean young girl she becomes a violent and hellbent demon drenched in pig's blood. She is no longer a pleasurable object of the male gaze, yet she is still presented under a patriarchal form of voyeurism. Scholar Saoirse McAllorum argues that “Carrie may drive the plot of the film but the camera remains to be male and subsequently encouraged to eroticize” (20). The eroticization of Carrie appears throughout the prom scene, one example being when the pig's blood is poured on her and the camera replays the shot three times—signaling to the audience to take full attention to the humiliated and degraded young girl. The presence of the male gaze during scenes of menstrual representation in *Carrie* mimics the way that Christian myths surrounding menstruation have been used or manipulated to condemn female power. In a discussion about menstruation in the horror genre, scholar Erika M. Thomas states “our fear of Carrie represents society's fear and resistance to the women's liberation movement and the potential powers that can be held by women” (Thomas 6). Recalling the earlier mentioned quote from Sissy Spacek, not only was violence against women the moving force of the horror in *Carrie* but the switch from innocent girl to murderous demon reinforced the idea that women have evil naturally within them. A tag line featured in a promotional poster for *Carrie* states “if only they knew she had the power,” which implies that the blood-soaked evil enchantress was always lurking the halls of that high school—and if they had controlled her more effectively, she would not have risen to power. In every shot of the horror film, Carrie White is an object, and audiences are encouraged to erotize and fear her. Similarly, the effect of creating a voyeuristic audience viewing menstrual scenes is that menstruation becomes a source of fear. Once menstrual blood arrives on screen, it becomes an omen of danger and villainy: this portrayal teaches young menstruators that it will do the same for them.

Myth in *Turning Red*

This idea echoes within *Turning Red* even with myth taking a different stance within the plot starting when Mei's mother discovers that Mei has not started her period like she believed but has experienced her first transformation into a giant red panda. With reluctance, Ming shares with Mei that the transformation into a red panda is something passed down through their family. The myth given in this scene is that Mei's ancestor named Sun Yee had a strong connection to red pandas, so much so that she asked the gods to change her into one. The gods granted the wish as a way for Sun Yee to protect her children and herself, as

her home was in wartime Korea and Sun Yee was left solely responsible to protect her family. Sun Yee was able to harness her emotions and turn into a giant red panda that could shield and defend. Ming explains to Mei, “Sun Yee passed this gift to her daughters, for when they came of age. And they passed it to theirs. But overtime, our family chose to come to a new world. And what was a blessing became...an inconvenience” (*Turning Red*, 00:27:57-00:28:13). The myth taking place here is set within the boundaries of girlhood or coming of age, the red panda transformation occurs once the young girl in Mei’s family has reached a certain age (presumably preteen/teen as we later find out Ming transformed as a young teenager). However, the larger discussion that this myth produces is intimately tied to girlhood and menstruation, as the myth is a metaphor for puberty.

Puberty was the main focus of the film *Turning Red* when it was being pitched within Disney Pixar. Director Domee Shi, explains “We use the red panda in this movie as an adorable metaphor for the scary, unadorable, awkward, and cringy changes we go through during this age” (Reif, “13 Going on Panda: *Turning Red*”). The myth featured in *Turning Red* exists only within the film, yet the effect of the myth illustrates how narratives surrounding puberty affect our understanding of menstruation. The entire film features an open discussion about the hardships and beauty of puberty. Though Mei didn’t actually start her period, menstruation is still following the same journey that the topic of puberty follows in this film. Before we are even given the idea of Mei’s generational transformation, the word “period” enters the space and therefore creates a specific association between Mei’s transformation and menstruation—which is proven with Mei’s instant response to Ming’s explanation about their ancestor Sun Yee.

In a fit of anger, Mei screams out “Are you serious?? It’s a curse!” (*Turning Red*, 00:28:15-00:28:22). The use of the word “curse” here reinstates the idea of victimization vs. villainy. Being cursed means that one has done something wrong to deserve a form of punishment. Thus, Mei is a victim of this curse but is also heavily being portrayed as a monstrous villain during the delivery of the line. As she moves through the question “Are you serious?” (*Turning Red*, 00:28:15-00:28:20), her voice rises from low to a powerful scream and her body rises in anger. She physically becomes bigger as her eyes light up neon red and she lunges with claws grabbing towards the painting of Sun Yee while screaming “It’s a curse!” (*Turning Red*, 00:28:20-00:28:22). As the scene plays on, multiple similarities are created to the scene in *Carrie* where Carrie and her mother have their first interaction after Carrie starts her period. Continuing Mei’s fit of rage, she yells at the painting of Sun Yee “You cursed us! It’s all your fault!” (*Turning Red*, 00:28:22-00:28:25). The word curse appears within the *Carrie* scene as Maragret yells at Carrie about the “curse of blood”. Similarly, the idea of menstruation or rather puberty being a curse comes from an ancestral woman in both films. For Carrie, the curse of menstruation comes from Eve which is reinforced in the scene as Carrie’s mother chants that Eve was weak and sinned. Though Ming does not present the myth in this manner, Mei exclaims to Sun Yee that she is the reason that their family is cursed to become red pandas. This action disempowers both Eve and Sun Yee as women with the immense power to create and protect family lines. It also heavily stigmatizes menstruation, as yet again menstruation is equated with punishment and shame.

The negative portrayal of the transition between girlhood and adolescence is cemented by Mei's mother as she tries to comfort the angered Mei. She tells Mei that there is a cure for the red panda transformation. Stating that there is a "cure" to this change insinuates that the change is something bad, something harmful to the body and in need of remedying. Ming continues by explaining that the cure comes in the form of a ritual in which Mei will need to lock away her ability to transform into the red panda forever. She then tells Mei, "There is a darkness to the panda, Mei-Mei. You only have one chance to banish it, and you cannot fail. Otherwise, you'll never be free" (*Turning Red*, 00:29:17-00:29:29). As Ming shares, Mei looks into her mother's eyes with a fearful look which later turns into understanding and hope as she believes what her mother has told her. However unintended, what Ming has said to Mei is harmful, as she explicitly equates the red panda to danger and imprisonment. She has not only added immense pressure to Mei but has convinced her that this transformation is a curse.

Though the premise of this scene is Mei's mother educating her about the transformation her body is currently going through, Mei is still experiencing some of the frustration and anger that Carrie felt when she asked her mother why she didn't tell her about periods. Still moving through her anger, Mei exclaims to her mother "Why didn't you warn me!" in which Ming responds "I thought I had more time" (*Turning Red*, 00:28:42-00:28:43). Mei's mother believed she was protecting Mei by not sharing about the familial curse. However, she was only protecting herself as we later are shown in the film that Ming's experience with transforming into the red panda was extremely traumatizing. Though well-intentioned, Ming's secrecy resulted in Mei being introduced to the changes to her body and mind in a shocking traumatic way. The initial experience with the transformation is negative, which fuels Mei's understanding of this new process as negative. The red panda along with its connotations have now been labeled a "curse" - which is the main issue that Mei must process during the course of the film's plot.

Menstrual Communities

As Mei tries to find a way to banish the red panda, she discovers she can return to her human body once she is able to regulate her emotions. Early in this discovery process, she realizes that the quickest and most efficient way to calm down is to think of her friend group. Mei pictures her friends hugging and laughing together and is able to return to her human state almost instantly. Her community of friends helps her feel grounded, but they don't completely take away her ability to transform— which is a good thing. It proves that Mei doesn't need a cure for her new phase in life, which is why she experiences conflict before the ceremony that will rid her of the red panda. Mei's father (Orion Lee) comes to speak with her before the ceremony to offer her comfort and perhaps a better understanding of what the red panda represents. To Mei's surprise, he tells her of how massive Ming's red panda was when she was young. He emphasizes that Ming was incredible in that state, she was strong and powerful. Mei's facial expression shows her wonder at this new outlook on the red panda (and her mother), but she quickly changes her mood to sadness and responds, "But I'm a monster" (*Turning Red*, 01:05:07-01:05:10). Her father sighs before sharing one of the strongest lines in the film, "People have all kinds of sides to them, Mei. And some sides are messy. The point isn't to push the bad

stuff away, it's to make room for it. Live with it" (*Turning Red*, 01:05:12-01:05:29). Mei has internalized that the parts of the red panda that are scary in turn make her a monster. There's an important distinction to be made in her father's response— he doesn't immediately tell her that she isn't a monster. Rather he recognizes that it's the belief that she cannot be imperfect that makes her believe that harmful idea about herself. The message he delivers to Mei is that she can and should embrace every side of herself, and that the bad parts don't make someone bad.

This message allows the film to reframe negative portrayals of the changes menstruation brings, challenging the idea that menstruators are red monsters and that girlhood's end will change a girl into a mythic villain. While the association of horror and terror with these experiences is harmful, *Turning Red* suggests that the answer is not to hide the unfortunate parts of menstruation and girlhood away. Experiencing any kind of change can be scary and confusing—these adjectives describe both menstruation and girlhood for a character like Mei. To embrace all sides of something creates the means to fully understand it and understanding leads to empowerment. The call for an educated community is founded within the belief that understanding an experience that is universal yet varied makes room—it creates a space for people to understand their lives in their entirety. When a safe and accepting environment for menstruation is created, the body and mind in return become safe and accepted. We see this represented by Mei coming to terms with her transformation and welcoming all sides of herself.

At the end of *Turning Red*, Mei has decided to keep her red panda which means she can continue transforming into and out of her human body. The final lines of the film are narrated by Mei, "Sometimes I miss how things were, but nothing stays the same forever. We've all got an inner beast. We've all got a messy, loud, weird part of ourselves hidden away and a lot of us never let it out. But I did. How about you?" (*Turning Red*, 01:28:40-01:28:56). Transformation is here figured as something inevitable, but that change can be for the better. Mei still uses the language of beast or monster, but she uses it not to villainize people but to show that "bad" sides do not make someone inherently bad. In fact, Mei claims that embracing the beastly side of her is what empowered her. Throughout the comparison of Carrie White and Mei Lee, power has been displayed as something that both girls have within them that causes others to fear them. While both characters have a full power moment in their films, Carrie's display of power is an action of anger and self-defense whereas Mei is able to channel and embrace her power. As Mei embraces this newfound power within this scene, the film also celebrates Mei's supportive community. When Mei narrates the last sentences of the film, the camera focuses on a photo hung up in the Lee family's temple. The frame holds a photograph featuring panda Mei, her friends, her family, and Mei's favorite boyband members- it's also signed by the members. The photograph represents the strength of community that Mei has developed through coming to terms with the new stage of her life. Having all of these people in the same photograph (that is also signed by the boyband members) was not something imaginable at the beginning of the film, but as Mei found herself, she found her community.

While *Carrie's* representations of menstruation and girlhood are cloaked and restrained by the male gaze, perhaps what sets *Turning Red* free is director Domee Shi's determination to place her own girlhood into

the film and emphasize the importance of having various communities. In an interview about the film, Shi shares,

I was definitely Mei when I was 13, and I still identify with her now. I was that good little mama's girl who one day, BOOM, puberty hit. I was bigger, hairier, more emotional, and fighting with my mom almost every day. And making the movie was a reason to go back in time and unpack what was happening.

(Yuen, "Turning Red Explores Uncharted Animated Waters")

Turning Red is filled with different facets of girlhood (and womanhood), all coming from experience—as the film production states the production team was mostly made up of women. The point is not to say that men or non-menstruating people cannot make films about menstruation or girlhood; but rather to say it's the community behind representation that makes good representation good. The presence of community and education in *Turning Red* is what separates Carrie White's ending from Meilin Lee's ending. Carrie was never told that experiencing menstruation and girlhood does not make her a villain, and that the myths surrounding these topics do not define her. The tag line featured in the promotional poster of *Turning Red* states, "growing up is beastly". Though similar to the way *Carrie's* poster connects girlhood to the monstrous, the *Turning Red* tag line moves to empower its audience by embracing the entirety of this transitional period. At the core of *Turning Red* is a declaration that an educated community creates an empowered community for a menstrual and girlhood forward world.

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Period Talk: Working Back to Menstrual Girlhood through *Rookie* Mag

Kelsey Hawkins

Abstract: This article examines the emergence of “period talk” in *Rookie*, a now-archived online magazine for teen girls, as a site for both resisting menstrual stigma and reimagining menstruation outside dominant cultural narratives of shame, silence, and pathology. By employing critical discourse analysis and feminist memory-work, the author analyzes the menstrual discourses circulating through *Rookie*’s articles and comment sections alongside her recollected experiences of menstruation. She argues that period talk, as it manifests in *Rookie*’s menstrual content, offers girls unique and powerful kairotic opportunities to share their experiences with menstruation, proliferate menstrual knowledge, and challenge menstrual stigma in digital ecologies, illustrating the rhetorical power of girls’ digital literacies and communication practices and the affordances of mixed methodologies for recovering and reframing researchers own menstrual histories.

Keywords: [menstrual rhetorics](#), [genderlects](#), [girl talk](#), [period talk](#), [menstrual stigma](#), [girls’ media](#), [memory work](#), [critical discourse analysis](#)

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“If research hasn’t changed you as a person, you haven’t done it right.”

Shawn Wilson, *Research is Ceremony*

I was a late bloomer. I started my period in the summer between my freshman and sophomore years, at 15 years old. It started with vague discomfort in my abdomen – cramps. Then the blood came. As soon as I saw it, I felt the deep ache of irrevocable loss. I’d been dreading this day since my best friend began complaining about her period all the way back in fifth grade. But it wasn’t the pain I feared so much as what the physical condition of menstruation signified. Bound up in the knot of blood and hormones and adolescence was the knowledge, subconscious yet powerful, that the onset of menarche represented the cessation of childhood and a surrendering of the liberties afforded by/to my premenstrual body. I understood that I would no longer be able to move through the world in the ways I once had – freely, without consideration for things like stains or PMS symptoms. After I saw the blood, I put on a pad for the first time. It irritated me all day. I hated its nagging presence and the constant reminder that I was now, officially, encumbered, materially and also symbolically by the condition of menstruation. I languished in my mother’s bed all day, brooding and grieving. I suppose it may have been the hormones, but I remember feeling sincerely despondent. How could I spend an entire week each month straining against the nature of my own body for the rest of my life?

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Introduction

For many girls, their first period is an affectively negative experience; they describe feelings of dread, loss, humiliation, and sadness when recalling their initiation into adolescence. These girls often associate puberty with a reluctant movement into womanhood that activates a grieving process for the loss of their girlhood¹. Menstruation continues to be a complicated issue as girls experience the corresponding limitations of both the physical menstrual body and the normative gender expectations which are projected onto it. Additionally, people who menstruate often encounter negative social stigma surrounding periods, period care, and the menstrual body in many domains of their lives.² Due to the social shame and silencing engendered by menstrual stigma,³ girls often rely on informal, digital channels to access and participate in discourses surrounding menstruation and the menstrual body⁴ However, there is growing interest in menstrual (in)justice⁵ in girls' digital self-representational practices,⁶ and in media produced for and by girls⁷ that highlights the power and efficacy of girls' digital literacies and rhetorical practices to resist and even subvert menstrual social stigma.

In this article, I analyze media produced and circulated in Rookie, an online teen-based magazine, in order to explore ways girls construct menstruation, gender, menstrual experiences, and themselves within digital contexts. Drawing on scholarship at the intersection of girlhood studies, digital rhetorics, and critical menstrual studies, I theorize "period talk" as the set of discursive practices that girls employ within digital ecologies to share their experiences with menstruation, proliferate menstrual knowledge, and challenge menstrual stigma. Ultimately, I hope my research clarifies how negative associations with menstruation shape girls' relationship to periods and their own bodies; how girls resist gender norms and menstrual stigma, shame, and injustice through their digital rhetorical practices; and the possibilities of blending feminist and girlhood methodologies for (re)imagining our own relationships to menstruation and menstrual bodies.

"Girl Talk" and Girls' Digital Media

The first wave of girls' media scholarship arrived in the 1990s, as scholars like Angela McRobbie, Susan Douglas, and Dawn Currie inaugurated girls' media studies as a legitimate and generative area of critical inquiry and academic research (Kearney). Much of the early discourses surrounding girls' media centered on representations of girlhood and girls' consumption of popular commercial media such as magazines, film, and television. The second wave of girls' media studies, ushered in with the publication of studies on girls' media culture, like *Mediated Girlhoods* (Kearney), *Girl Zines* (Piepmeier), and *Girls Make Media* (Kearney),

1 See Musu Bakoto Sawo.

2 For more on this stigma, see Ingrid Johnston-Robledo and Joan C. Chrisler.

3 On menstrual taboos, see Alma Gottlieb; on menstrual concealment, see Jill M. Wood; on menstrual shame, see Maureen C. McHugh.

4 For an analysis of these, see Lise Ulrik Andreason.

5 See, for example, Margaret E. Johnson, Anita Diamant, Tomi-Ann Roberts, Shailini Vora, Swatija Manorama and Radhika Desai, and Chris Bobel and Breanne Fahs.

6 See Sarah Hill, Rebekah Willett, Laila Nashid, and Amy Shields-Dobson.

7 See especially Mary Celeste Kearney, Jessalynn Keller, and Su Holmes.

shifting the scholarly focus to girls' reception, uses, and production of both popular and alternative, often self-made media. Researchers within girls' media studies such as Jane Greer, Sun Sun Lim and Jemima Ooi, and Sarah Banet-Weiser began to critically explore girls' textual productions, particularly their use of digital information and communication technologies to create rather than simply consume media by and for girls. Since the publication of Kearney's *Mediated Girlhoods*, critical inquiry into girls' uptake of digital technologies, their digital rhetorical practices, and digital media produced for and by girls has continued to proliferate.

Analyzing girls' digital media production and reception practices also offers unique insight into the ways that genderlects, especially "girl talk," emerge and operate within digital contexts. In her study on gendered discourses in the eighth-grade classroom, Heather A. Blair establishes "girl talk" as a particular genderlect or distinct language pattern and communication style associated with different genders, that is integral to the construction of gender within the community of students she studied. Blair argues that girl talk possesses its own set of sociolinguistic rules (316) and is a central vehicle for "doing gender" in the classroom (321). Girls in Blair's study used the particular linguistic, stylistic, and rhetorical features of girl talk to define and present images of themselves, build relationships with each other, and co-construct the "girl" identity operating within the classroom.

Working from Blair's conception of "girl talk," I theorize "period talk" to describe the set of discursive practices that girls and other menstruating individuals enact in order to process the implications of occupying the menstrual body, resist both menstrual shame and stigma, and construct empowered and agentic representations of menstruation. Like other linguistic and rhetorical systems, period talk operates through and is shaped by the mediums, digital and otherwise, through which they emerge and circulate. Within the context of my current research, I use "period talk" to describe the discursive, rhetorical, linguistic, and stylistic practices employed by girls on *Rookie* magazine's digital medium in order to "do" menstrual girlhood.

Rookie Mag

Rookie was a US-based online magazine "for and by teenagers" ("About"). Founded by teen fashion blogger Tavi Gevison in 2011, *Rookie* operated for seven years, publishing 78 issues before shuttering its doors in 2018. The magazine published a wide variety of genres including articles, Q&As, collages, photo journals, comics, and beauty tutorials. Contributors to the magazine primarily consisted of journalists, celebrities, and readers—most of them teenage girls themselves—and covered issues ranging from fashion, popular culture, sex, mental health, technology, relationships, and social issues. *Rookie* is a generative site for understanding girls' digital rhetorical practices and the ways that they digitally construct menstruation and girlhood because its mission, messaging, and content are explicitly girl-centric. Puberty and menstruation are common topics explored across *Rookie's* issues, and contributors often highlight the ways that menstruation shapes girlhood and girls' experiences. In analyzing various components of the publication, both content published by *Rookie's* contributors and the interactions that take place in comment threads, digital constructions of

girlhood, menstruation, and menstrual experiences emerge to clarify girls' relationship to menstruation and their menstrual bodies.

Methodology

As Kearney explicates in her overview of the field's second wave ("Girls' Media Studies 2.0"), girls' media studies is rooted in the disciplinary values, theories, and methods of both cultural studies and women and gender studies. Situated at the intersection of these disciplines, my research is similarly shaped by the methodological approaches privileged by cultural and women's studies respectively. In order to identify and analyze the manifestations of period talk on *Rookie's* website, I employed critical discourse analysis (CDA) and feminist memory-work, allowing each methodology to in/transform my interpretations of how girls "do" menstruation online.

CDA comprises an interdisciplinary approach to investigating the ways in which power is constructed, reproduced, and resisted through discursive structures and systems.⁸ As a framework for textual analysis, CDA allows researchers to "assume a political stance of defending and promoting the rights of girls" (Mitchell and Reid-Walsh, "Girl-Method" 215) while emphasizing girls' media as sites of agency and empowerment. In order to perform a critical analysis of girls' menstrual discourses on *Rookie*, I used the website's tag function to search for content using the tags "period" and "menstrual cycles." This search generated a list of 28 results with content including "dear diary" entries, comic strips, videos, editorials, interviews, personal essays, and creative writing. Of these 28 results, I eliminated six from my analysis: five which only briefly mentioned menstruation and one video which is no longer accessible for viewing. Guided by Blair's findings on the discursive, linguistic, and stylistic features of girl talk, I created categories for identifying and coding *Rookie* users' rhetorical practices in relation to menstruation. These coding categories identified instances of girls engaging in personal interactions, using humor, employing what Blair calls "teen slang," telling stories, engaging supportive mechanisms like mirroring or echoing, and dialoguing across social and embodied difference. Five major themes emerged. In particular, my analysis revealed the ways that girls on *Rookie's* website used period talk to 1) construct and share menstrual knowledge, 2) process negative associations or experiences with menstruation, 3) form positive attitudes towards menstruation and the menstrual body, 4) challenge normative gender expectations and menstrual stigma, and 5) celebrate digital spaces as sites for identification and community-building.

My examination of period talk on *Rookie's* website also inspired a process of re/uncovering my own experiences with menstruation, many of which were reflected throughout the content I analyzed. Mitchell and Reid-Walsh explore self-reflection as a generative avenue for enacting critical research within girlhood studies ("Girl-Method"; "Mail-Order Memory Work"). They argue that "somewhere in the process of doing research with and for girls, we should consciously work with our own histories" using feminist memory-work to "work back to girlhood" ("Girl-Method" 226). First theorized by sociologist Frigga Haug, the process of

8 For a further definition of critical discourse analysis, see Teun A. Van Dijk.

memory-work involves collecting, analyzing, and theorizing written memories to “uncover the social meanings embodied by the actions described in the written accounts and to uncover the processes whereby the meanings – both then and now– are arrived at” (O’Reilly-Scanlon and Dwyer 88-89). Within the context of girlhood studies, memory-work allows researchers to “try to understand contemporary girlhood ... by exploring our own girlhoods” (O’Reilly-Scanlon and Dwyer 82). I engage memory-work in addition to my analysis of *Rookie*’s texts in order to understand contemporary menstrual girlhood while/by interrogating my own identity and self-concepts as they relate to menstruation. In this way, I connect my prior experiences with menstruation to the larger social knowledge(s) engendered by contemporary girls’ period talk.

Period Talk

In order to attend to both the discursive practices of *Rookie*’s contributors and my own memories of menstruation, the remainder of this article coalesces my perspective on menstrual girlhood with the perspectives of the girls participating in period talk in and through *Rookie* magazine. Below, I braid narrativized sections of my memories surrounding menstruation with analyses of *Rookie*’s content in order to explicate the five themes that emerged from the process of CDA and “work back” to a more clarified and complete understanding of my own menstrual girlhood.

Building Menstrual Knowledge

Many contributors and readers on *Rookie*’s website emphasize the importance of knowledge and awareness regarding menstrual issues and encourage each other to discuss their periods. In an article titled “What I Wish I Knew About my Period,” *Rookie* author Elizabeth Olson shares regrets about her early menstrual experiences writing, “I wish I had FOUND SOMEONE TO TALK TO! I had so many questions and fears about the whole business, and I think I would have been so much less self-conscious, and so much HAPPIER, if I had only had access to some friendly advice.” Other contributors echo Olson’s desire for access to menstrual knowledge. In a satirical “investigative report” titled “Puberty Is What’s Up,” Pixie Casey shares the exigency for her research saying, “I wanted to know about periods in case I get mine soon.” Reflecting on her lack of guidance and support, Olson encourages readers to have open conversations with the girls and women in their own lives: “So, talk to your friends! Talk to your cool older cousin or aunt or sister or your best friend’s cool mom or your OWN cool mom.” Similarly, in “How to Survive Puberty,” Monika Zaleska tells readers that “finding out as much as you can about what is going on—and how to deal with that—can be a big help.” At the end of Olson’s article, she concludes by calling *Rookie*’s audience to “leave your questions—and your good advice—in the comments.”

Members of *Rookie*’s community responded enthusiastically to Olson’s call, using comment sections and their own publications to circulate information about menstrual cycles, health and safety advice, tips for managing PMS symptoms, and period product recommendations. Contributors also leverage the affordances of the magazine’s digital space to share information more directly through hyperlinks. In a “Dear Diary”

entry from January 20, 2017, contributor Thahabu discusses her purchase of a menstrual cup, advising readers on the “hundreds of other brands that come in various sizes and shapes” (Barlow et al.). Olson similarly shares recommendations for alternatives to tampons, including a link to Aisle’s Diva Cup product. In another article, “The Sex Crylebration,” Krista Burton and Lola Pellegrino link to an article in *Hairpin* about period sex to offer readers perspectives on the normalcy of menstrual blood during sexual encounters. The inclusion of hyperlinks allows contributors to guide readers towards products and perspectives, forms of menstrual knowledge, that will allow them to construct menstruation in more empowered and agentic ways.

When I got my period for the second time, I decided to forgo the pads and put in a tampon. I crouched down on the bathroom floor and read through the instructional packet that came in the box. I could have asked my mother, my older sisters, or my friends for guidance, but I didn’t want to. Talking about it drew attention to the fact of my menstruation, made it more visible, and I was determined to pretend that nothing had changed about my body. In fact, I was determined to pretend that I wasn’t experiencing my period at all and, by extension, that I could still access the performance and presentation of the premenstrual body. This meant that I couldn’t discuss my period with anyone, couldn’t legitimize its existence by asking for advice or commiserating with the other menstruators in my life. I avoided conversations about things like pads, period stains, or cramps. My self-imposed silence around menstruation only increased the discomfort I felt in my newly menstrual body and the shame, disappointment, and frustration I experienced when my period came each month. Worse yet, my silence alienated me from the sense of community which might have helped me to navigate menstruation in healthier, more constructive, or even more empowered ways.

Navigating Negative Menstrual Associations

Many girls also used *Rookie’s* site to process negative experiences and associations with menstruation. The most frequent negative emotion attributed to menstruation was dread. In her article, Olson describes the prospect of her first period saying: “I heard my mom’s talk of getting me a bra as a threat, not a promise...I felt terror at the sight of my first pubic hair. And the scariest thing was the idea of getting my period—it just sounded like a very uncomfortable physical situation that comes with a lot of responsibility” (Olson). She later describes her period as “the *worst thing ever*.” Zaleska echoes Olson’s sentiment in her own article sharing, “I know some people wait impatiently ... to get their periods, but when I was 12, both of these things scared and confused me.” Girls also expressed fear and embarrassment about the ways that menstruation would be perceived by others. Olson writes, “aside from waking up and feeling dread, I can’t recall anything about the Day I Became a Woman ... I do remember wanting to cry, or maybe I did cry, and feeling embarrassed and convinced that everyone at school on Monday would just know what had happened.” Contributors are also frank about the negative effects menstruation has on their day-to-day lives. In “Bad Blood,” Emma Straub recalls, “it was the end of high school by the time I realized that bleeding every month sucked, and it quickly went from ‘sucked’ to ‘actually ruining my life.’”

Like Straub, I felt that my period was “actually ruining my life.” At the beginning of each month, a gnawing anticipation would take root in the pit of my stomach – the same dread I felt at the prospect of my first period actualized through the material and embodied reality of regular menstruation. By the first day of my period, I was a nervous wreck. I often couldn’t tell if the tightness in my abdomen owed itself to menstrual cramps or to anxiety, though I dismissed both with two 200mg tablets of Ibuprofen – less for pain relief and more to help me ignore my period’s persistent intrusions into daily life. For me, as for Olson, many of the anxieties I experienced around menstruation actually revolved around others’ perceptions of me. I associated menstruation with weakness, limitation, and constraint, and I believed that other people would ascribe these characteristics to me if my menstruation were made visible. A period stain would not have been a mere humiliation, but a betrayal, a laying bare of the girl I was after menstruation – weak, limited, constrained, no longer able to move with the freedom and power and pride of premenstrual girlhood. In many ways, the relationship I had to menstruation was warped by these negative associations, both the ones that I had formed towards my own period and the ones that dominant social narratives around menstruation perpetuate.

Forming Positive Orientations To Menstruation

Despite the prevalence of discussions surrounding feelings of dread, girls also use the magazine’s digital ecology to develop more positive attitudes towards menstruation. One of the ways they do so is by normalizing menstrual experiences. In a “Dear Diary” entry from October 6, 2016, contributor Alyson describes her first time using a tampon as “completely and utterly un-traumatic” (S. et al.). Straub also discusses the comfort that the embodied experience of regular menstruation can provide, sharing that “the clockwork regularity of my period is comforting to me—it’s satisfying to know that my body’s doing its thing just fine. Having your period is also a great way to know that you’re not pregnant, which can be very reassuring.” Girls also leverage the shared experience of menstruation in order to connect to other girls. Olson describes her experience menstruating at a girls’ summer camp: “When Julie and Melissa learned that the reason I was skipping group swim and waterskiing was that I had my period (You know what’s worse than a giant Kotex? A giant WATERLOGGED Kotex), they were aghast. They marched me into the bathroom, sent me into a stall with one of Julie’s Tampax, and stood outside the door. TIME TO LEARN.”

In addition to normalizing menstruation in order to form more positive attitudes towards periods, contributors to Rookie also articulate a sense of empowerment regarding their menstrual experiences. In a comic entitled “Period Drama” (see Figure 1), Eleanor Hardwick depicts a girl with braided pigtails in various states of grief, lamenting the existence of her period, its irregularity, and the discomfort of menstrual cramps.



Figure 1: From Hardwick's "Period Drama"

In the penultimate panel the girl recalls iconic female figures including Jane Austen, Queen Elizabeth, and Marie Antoinette. The last panel (see Figure 2) portrays Joan of Arc centered on an enlarged menstrual pad. She has blood coming from both the sword she grips to her chest and from between her legs. The text on this panel reads, "Super with no tampons, maxi and no pads, powerful women kept dry using rags. Joan of Arc knew the meaning of REAL period drama! That thought softens my tantrums (and most of my trauma)."

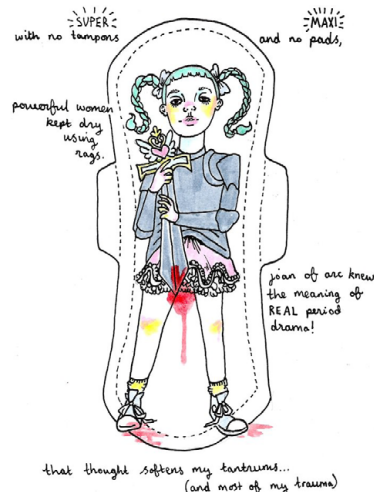


Figure 2: From Hardwick's "Period Drama" depicting Joan of Arc centered on a sanitary pad and holding a sword.

Hazel Cills creates a similarly empowered take on menstruation in "Power Failures." Referring to the embarrassment of period stains, she states:

So you got blood all over your chair in class, or on your couch when you took a nap, or just literally anywhere because you're a modern woman who goes places. Think of your bloodied happening as a work of impromptu feminist performance art—make sure to document everything in extreme detail, archive your tampons, and contact local galleries. BAM! Instant art star! (Cills)

In both instances, *Rookie's* contributors reinterpret menstrual experiences to construct empowering images of the menstruating girl.

I can recall only one positive experience discussing menstruation in my girlhood. I was in my sophomore history class, seated next to my best friend, a girl I had known since middle school. Behind me sat another girl who we each considered a close, but recent, friend. At some point we began listing our worst PMS symptoms. My best friend laughed bemoaning how much she cried during the week leading up to her period, sometimes over videos of animals, sometimes because no matter how much she straightened her hair it just wouldn't lie flat. "I went into my closet and cried for fifteen minutes!" She sounded exasperated, and so did we as we teased her, but really we weren't. Really we felt a strong combination of sympathy and identification and solidarity.

"The worst part is the pain in my back," offered the girl behind me. "Ugh, me too. The worst." I was trying to be nonchalant, casually commiserating about this most common of premenstrual symptoms. In reality, I was relieved, almost elated. I had heard about menstrual cramps from my friends for years, how they'd lie doubled over in their beds trying to soothe the pain in their abdomens. When I started experiencing PMS symptoms, I didn't know that those cramps could make their way into other areas of your body, and I had begun to wonder if there was something wrong each time the dull ache settled into my lower back. I didn't talk to anyone else about this because I couldn't talk about menstruation at all. Each month, I popped an Ibuprofen and catastrophized, worrying myself into a frenzy about this ostensible abnormality. Now, here was this girl telling me I was normal, that she felt this too, that it was, really, no big deal.

I felt, still feel, such gratitude to this girl who was so generous with her honesty, so transparent in sharing her own experiences with menstruation though we had only known each other for a few months. Not only was my experience validated, normalized, but I was exposed to a different way of thinking about menstruation. These girls showed me that I didn't have to hide my period, or discipline my menstrual body into invisibility, or relegate my experiences into silent nonbeing. That day in history class, I tasted, for the first time, the sweetness of menstrual community.

Resisting Menstrual Stigma



Figure 3: Second panel from Cutler's "Bloody Becky."

Responding to Zaleska's article on surviving puberty, user tortu12 comments, "I'm realizing that there is no need to treat all of this like some embarrassing secret." In a Sunday comic titled "Bloody Becky and the Thought-Provoking Period Stain," Margalit Cutler further rejects the shame and embarrassment that some girls feel surrounding menstruation by neutralizing and normalizing period stains. The comic (see Figure 3) depicts a girl standing in front of a couch, turning to examine a period stain on the back of her jeans and surrounded by three other girls. A close-up of the girl with the period stains reveals her inner thoughts with the text "Oh. My. God. I'm so embarrassed." Despite her self-consciousness, the three girls she is with express thoughts ranging from sympathetic ("I hate it when that happens") to the introspective ("Did I get my period this month?") to the banal ("hmm...I want peanut butter and jelly"). Cutler's comic suggests that the shame associated with visible signs of menstruation is unwarranted and reminds viewers that they do not need to feel so insecure about menstruation. In her article, Olson is even more overt in her rejection of menstrual shame arguing that "there's nothing shameful about getting your period."

Contributors also use the publication to reject common social narratives surrounding menstruation. Zaleska writes, "sometimes it can feel like celebrating and/or feeling shame about your body are the only two narratives available. Rejecting the idea that there is one way to grow into what adults sometimes call a 'lovely young woman' (barf) can help." Olson's discussion of the discomfort of menstrual cramps embodies the dualism of menstrual experiences. She shares, "I consider this the worst part about being magical enough to create life." While menstruation is at times painful and uncomfortable, it also signifies the power that some girls and women possess to reproduce and sustain life. Casey's faux investigative report on puberty uses humor to satirize the ways that parents, boys, and financial stakeholders conceptualize menstruation, using humor to critique the obfuscation, confusion, and performative optimism that inform narratives of menstruation. Casey "interviews" multiple sources for the investigation including the mother of the fourth-grade investigator, a neighborhood boy named Tony Flavio, and the fictionalized @heycoolteens, a "professional Twitter account run by the teen-outreach marketing division of Z&P Personal Grooming Products, Inc." Casey parodies parents' tight-lipped reluctance to discuss periods openly, boys' lack of menstrual education, and corporations' manufactured relatability to girl consumers, deconstructing the narratives that surround menstruation, narratives which often do not align with girls' lived and embodied experiences of menstruation or that perpetuate menstrual shame and exploitation.

Contributors also use the magazine's platform to share issues of menstrual injustice. Olson notes in her article that "if men got their periods, the first day of each cycle would be a paid vacation day." User soph-blogger16 also advocates for more serious discussion of menstrual issues, arguing "puberty HAS to be talked about...We MUST talk about puberty."

I continued to resent the embodied experience of menstruation for several years after my first period, never quite finding the voice to share my experiences the way I had with the girls in my history class again. The silence and resentment fed into each other like Ouroboros, the snake devouring itself. I never complained about my pe-

riod – I never “moaned” about cramps, never missed class or excused myself from social events, never used PMS symptoms as an exemption from PE or household chores. But I often wanted to. I longed, secretly, maybe even subconsciously, to listen to my unwieldy body, to accept menstruation’s existence, even to admit its disruptions into my day-to-day life. I recognize now that I was afraid of menstruation, afraid of my body, afraid of myself. It seemed that the only way to assuage my fear was through denial and, when denial was not enough, a fierce and total rebellion against my menstrual body and the limitations projected onto it. I recall a self-righteous ritual in which I would wear white pants on the first day of my period each month to prove to myself that nothing was different, that menstruation would not change my self-presentation or the ways that I moved through the world.

At the time, I saw this defiance as a form of antagonism towards menstruation, but in retrospect I interpret it differently. I recognize that it was at once a manifestation of the shame I felt towards my menstrual body and also an act of resistance to normative menstrual performances and socially constructed limitations on the menstrual body. I am at once dismayed by the ways that I silenced, shamed, and contorted myself to deny my experiences but also impressed by my stubborn refusal to accept the social expectations of menstruating girls. I think that if I had given voice to my complex and often contradictory feelings around menstruation, I might have found a healthier, less self-harmful outlet for expressing my frustration about the reality of occupying a menstrual body. If I had engaged in menstrual discourses more with my peers, perhaps my defiance would not have turned inward in such destructive ways. I might have come to see menstruation as normal, maybe even powerful as many of Rookie’s contributors found when they began talking more openly.

Celebrating Digital Community

Both contributors and readers of Rookie’s content expressed the importance of media that reflects girls’ experiences with menstruation and creates a digital space for girls to interact with one other. One common sentiment shared was a sense of identification with other girls’ menstrual experiences. User ohhellohi comments, “it’s actually just refreshing to hear someone who has had the same experiences as me.” Other users express a similar relief and even connection with the girls publishing and commenting on Rookie’s website. User emlyb writes, “I don’t have much more to add, apart from this is EXACTLY how i feel. seriously. thank you. i just want to hug you right now <3.” The heart emoticon in particular shows up across many comments, especially on articles that discuss menstrual experiences. Responding to a thread in which commenters share their anxieties over missed and late periods, user Kathryn writes “you guys i thought i was the only one <3.” It’s clear that the girls who publish and read Rookie’s content appreciate the connections, identification, and shared experiences that the magazine’s online ecology affords them.

These affordances also shape the content that is produced on the site. Readers demonstrate an obvious demand for and appreciation of period-related content. User Lila comments, “I was wondering when Rookie was going to do another post on sex/menstruation/stuff like that and here it is!” “This is why I love this site so much!” shares user BritishFish on Zaleska’s article “How to Survive Puberty.” Interestingly, both contributors and commenters respond to the demand for discussion of menstrual issues. Zaleska shares the exigency

for her article, writing “I think [accepting puberty] is daily, continuing work, but that work is made easier by sharing what you are going through.” User Alyssumflower takes up Zaleska’s call in a comment articulating the struggles she faced because of her changing body and the ways that it was sexualized after she started her period. She concludes the comment by expressing the purpose of sharing her story: “I’m saying all of this just in case there is a girl like me out there who needs help.”

“I wish I had read this ten or twelve years ago”

user foreverrocket

It wasn’t until I was in my early twenties that I began to interrogate my relationship with menstruation. I was searching for relief from menstrual cramps that were increasing in severity and longevity. Every month I spent the first day of my cycle slumped over my desk in class or grimacing in pain behind the register of the coffee shop where I worked. As a young woman who struggled to discuss menstruation with others throughout her teenage girlhood, I wasn’t sure where to turn now that I was in need of practical advice and commiseration. Unsure who to consult, I conducted a Google search for products designed to alleviate period cramps. I came across a “Mini Mall” column on Rookie’s website about “self-listening devices” (Wilson et al.). One of the products recommended and hyperlinked was Holy Sponge’s Our Lady of Mercy Antispasmodic Cramp Balm which Jamia Wilson promised would “ease your pain and make you smell like a lush garden.” I can’t remember if I purchased the balm or not, but I do remember that this article sent me down a rabbit-hole of reading. One of the tags attached to the article was “period,” and I quickly navigated to related content, hoping to find more advice about cramps but also, secretly, ravenous for any period-related content. Over the next several weeks, I found myself consumed by the menstrual discourses circulating through Rookie, perusing the products included in the “Daily Links” column, reading “Dear Diary” entries about PMS and menstrual sex, laughing at the “Sunday Comics” that featured period stains or bloodied pads, and finding my experiences mirrored back to me in articles like the ones analyzed above. I even left a comment responding to Olson’s article, though I could no longer identify which cryptic username might have been mine after the years between my first read and this project.

That comment was the first time that I had willingly, enthusiastically, and PUBLICLY engaged in discourse related to menstruation. I felt emboldened by the community of girls who were openly discussing their periods and menstrual issues, refusing to be silenced by cultural stigma or their own internalized shame. It was also the first time that I began to critically interrogate my own relationship to menstruation. After reading some of Rookie’s period content, I realized how normal my feelings and associations surrounding menstruation were, but I also recognized that much of my relationship to menstruation was informed by menstrual shame, stigma, and cultural narratives that did not align with how I experienced my own body and my bodily performances. Over the next couple of years, before Rookie released its final issue, I engaged regularly with the magazines’ menstrual discourses. In joining the girls’ digital community and participating in the period talk which proliferated there, I began to liberate myself from the constraints of traditional menstrual narratives and come to an acceptance of and even appreciation for menstruation. It was an early but integral step in redefining my teenage girlhood

experiences with menstruation, building a healthier and more positive conception of the menstrual body, and resisting the varied forms of menstrual shame, stigma, and injustice that had so long contorted the relationship I had with my period.

Menstrual Pasts/Menstrual Futures

As the memories of menstruation that I re/uncovered reveal, the influence of menstrual stigma and shame is pervasive, persistent, and insidious. For many girls, menstruation is a source of deep social stigma, reinforced by cultural narratives that mark menstruation as a taboo topic.⁹ Additionally, menstruation is often constructed as nonnormative,¹⁰ disordered¹¹, or contaminative.¹² From an early age, girls are exposed to and internalize these attitudes leading to feelings of dread and anxiety surrounding menarche. These fears are quickly realized as postmenstrual girls begin to be treated differently by others whether they are adultified and sexualized¹³ or urged to conform to behaviors and presentations that restrict the freedoms afforded to their premenstrual selves.¹⁴ Girls' internalization of social stigmas surrounding menstruation contribute to the "culture of concealment" or the ways that "menstrual taboos and stigma shape women's experience of menstruation and manipulate women into menstrual shame and secrecy" (Wood 319). In collecting and analyzing my memories of menstruation, I can see the ways that the culture of concealment perpetuated negative associations with menstruation and warped my relationship to and experience of menstruation. The consequence of this process for me, as for many girls, was disconnection from my body and from a community of girls who could have encouraged me to see menstruation in more constructive and subversive ways. The cycle of silence, denial, shame, and alienation reinforced the dominant narrative of menstruation that I had internalized as a girl.

Within these ideological and material menstrual conditions, period talk emerges as a powerful vehicle for disrupting harmful cultural constructions of menstruation, resisting menstrual shame and stigma, and co-constructing menstruation in more affirming ways. By engaging in period talk online, girls within *Rookie*'s digital ecology (including, eventually, me!) were able to proliferate menstrual knowledge, process both negative and positive experiences with menstruation, resist the imperatives of concealment and shame, and engage in restorative and validating forms of community and connection. As my analysis of *Rookie* magazine clarifies, period talk is a legitimate and powerful avenue for advancing more just menstrual futures and for promoting girls' rhetorical and social agency in the discourses surrounding menstruation. I encourage scholars situated at the intersection of girls' media and menstruation studies to continue to explore and examine the ways that period talk emerges and operates across a range of discursive spaces, digital or otherwise.

Finally, I hope that my article demonstrates the value of employing multiple methodologies, such as

9 See Gottlieb.

10 See Iris Marion Young.

11 See Chrisler.

12 See Janet Lee.

13 See Sawo.

14 See Janet Lee and Jennifer Sasser-Coen.



critical discourse analysis and feminist memory-work, to engage with girls' experiences of menstruation. By analyzing both contemporary digital discourse and personal recollections, researchers can begin to dialogue across multiple generations of girls, understanding the evolving ways in which menstruation is constructed and understood. The process of working back to former experiences may also encourage researchers to re-see their own memories of menstruation—memories that may have been shaped by silence, shame, or cultural stigmas—and to critically interrogate how these experiences might be mediated or (re)interpreted over time. For me, this process was enlightening, transformative, and deeply healing. I call on future researchers to engage in this process of memory-work, not only to interrogate the ways that menstruation has been historically stigmatized but also to begin rewriting their own relationship to menstruation.

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From Gen X to Gen Alpha: Girls' Perspectives on Periods in Popular Media

Sarah Symonds LeBlanc and Kate White

Abstract: This article explores how representations of menstruation in popular media have evolved across generations, with a focus on how these portrayals shape and reflect girls' experiences of menarche from Generation X to Generation Alpha. Grounding the writing in autoethnography and drawing on interdisciplinary perspectives from English and communication studies, the authors analyze period-centered narratives in books and screen adaptations such as *Are You There, God? It's Me, Margaret*, *Sweet Valley High* and *The Babysitter's Club* books, and *Anne with an E*. Employing textual analysis and girlhood studies as methodological frameworks, the authors identify three recurring themes: menarche as competition, as a shared intergenerational practice, and as hidden from boys and men. The article also examines how political backlash, cultural taboos, and media resistance continue to shape how menstruation is discussed—or silenced—in public discourse. With personal reflections as mother-scholars, the authors highlight the challenges and urgencies of educating the next generation of girls about menstruation in an increasingly misogynistic sociopolitical environment. Ultimately, the article advocates for more inclusive and normalized representations of menstruation across media platforms and for a broader cultural shift that includes boys and men in conversations about reproductive health.

Keywords: [girlhood studies](#), [generational feminism](#), [pop culture](#) and [puberty](#), [media](#) and [menstruation stigma](#), [interdisciplinary scholarship](#)

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Intradisciplinary Introduction

When we met to explore possible themes for this special edition of *Peitho* focused on girlhood and menstruation, we kept returning to the ways the current political climate is deeply misogynistic and the impact it is having on young people. In Great Britain, one reporter interviewed schoolteachers who stated that 11-year-old students recognized and revered Andrew Tate, who is a self-proclaimed rapist and human trafficker (Folker). Some used Tate's photo as background wallpaper for their phones. *New Yorker* writer Jia Tolentino argues, "Trump won despite and because of the fact that he'd bragged about sexually assaulting women; the fact that his wife was hot, silent, and seemingly miserable." *Roe v. Wade* was overturned in 2022; however, the attacks on reproductive freedom and health continue. The situation is serious, perhaps even dire. Recently, Trump's officials effectively killed research on safer menstruation products (Wiggins).

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Our shock and rage led to conversations about what we, as MotherScholars¹ (“Being Dr. Mom”), could do to educate our daughters about all aspects of reproduction. We both have daughters in elementary school on the verge of menarche, or the first period marking the beginning of one’s menstrual cycle.

In addition to our daughters being the same age, we were both born in the mid-70s in the conservative Midwest and relate to coming-of-age in the ‘90s. Our feminist research interests overlap, although we are from different disciplines, English and Communication. Over the last ten years, we have developed a valuable friendship both at work and outside of it. As we talked, we began to discuss ways we might introduce puberty and menstruation to our daughters, better than our mothers² did with us. We always planned to make sure our daughters had the resources they needed to navigate this transition successfully; however, given the state of the nation, we felt a pressure and sense of urgency that we never expected to feel.

“I watched *Are You There, God? It’s Me Margaret* without the girls,” Sarah admitted. “And I didn’t read the book until after I watched the film. I grew up scared of bringing the book into the house and my mom getting mad. It would have been helpful if I could have read the book and talked to my mom about it. That’s what I want for my girls. I want them to be able to read, or watch, these books and shows, and be able to talk to me about them.” Kate expressed her disappointment over the event of watching the same film with her daughter. “Honestly, I’m not sure what I envisioned, but it was not a pivotal bonding moment [. . .] She seemed to pay attention to the movie, but she didn’t want to linger around after it was over for conversation.”

Finding the Books

We tried to find the best way to reach our daughters. After all, the topic of menstruation isn’t necessarily one they have been excited to discuss. Kate took her daughter to Barnes and Noble, set on buying books about puberty. *Maybe this would be the way.* While her daughter looked at the books, she seemed more interested in the potential for new graphic novels and promised queso dip from the Mexican restaurant after the outing. Nevertheless, the stack of books got Kate thinking. Surely, two academics could find the answers they sought through reading.

Sarah began buying and evaluating period and puberty books for her research and community engagement. Her daughters would enter her room, examine the pile, and eventually start pulling books, asking questions about the pictures on the pages. Because Sarah was forthcoming with answers, their comfort level in discussing menstruation and the possibility of menstruation increased.

As we began reading what our daughters were reading, we realized that some of the books were also from our childhoods. We observed the resurgence of several young adult series, including two of our favorites,

1 MotherScholars focus on the maternal subject in the private and public spheres integrating their maternal identity into the scholarly world through their research agendas and/or their pedagogies (Lapayese, 2012).

2 We are aware that society places an unfair burden on mothers or other women to provide reproductive health information for daughters and families.

The Babysitter's Club and Sweet Valley High, along with an updated version of *Are You There, God?* and *Anne with an E*, a modern-day version of *Anne of Green Gables*. Today, some of these texts are being introduced to our daughters in different formats, including graphic novels, fan fiction, movies, and television shows. We began wondering how pop culture was dealing with menstruation now.

In the following sections, we explore how changing representations of girls experiencing menstruation in written or graphic novels invite us to think about girls' menstruation experiences from a new or different perspective. We focus on three popular texts: Sweet Valley High's *Jessica's Secret*, *Get Real* and Judy Blume's *Are You There, God?* We examine these texts alongside newer versions, when appropriate, and modern-day popular graphic and young adult novels. Next, we examine television series or movies that feature menstruation, such as *The Babysitter's Club* (Netflix), *Anne with an E* (Netflix), and *Are You There, God?* (Lions Gate).

For this discussion, we have chosen to focus on books and screen representations over other types of social media. Pop culture has always shaped the way humans understand the world. Children are not raised in a vacuum, and they quickly internalize negative messages, especially regarding menstruation (Rosewarne 57). We chose to highlight girl-centered cross-media adaptations (i.e. novel to film, film to TV, etc.). Such texts have been circulating in popular culture for almost 35 years now.

Textual analysis provides a qualitative methodology that applies to both English and communication, and we aimed to illustrate a methodology that embraces an interdisciplinary approach. Textual analysis serves as a foundation of qualitative research and provides insights into human communication and behavior. This approach involves dissecting written or spoken language to reveal patterns, themes, and underlying meanings. Researchers from various disciplines utilize textual analysis to interpret everything from historical documents to social media posts, resulting in a deeper understanding of cultural contexts and societal trends (McKee). We read/watched/listened to the texts multiple times, took notes, coded emerging themes, and met to discuss our interpretations and analyses. We employ Girlhood Studies as a lens to guide our research questions and inform the textual analysis. We examine how menstruation is discussed within popular texts from our youth. In re-reading the books, we paid particular attention to the menstruation scenes and referred to menstruation research to explain the meaning and representation of a young girl's menstruation. As a result, three themes emerged: menarche as a competition, menarche as a shared practice between girls and women, and menarche as hidden from boys and men.

Girlhood

Currently, girlhood is trending: girl boss, girl math, just a girl, girl dinner, girl glaze, happy girl era, girl code, pretty girl summer, pretty girl walk, and girly pops. There is the vanilla girl, messy girl, clean girl, and the girl's girl, too. There are TikTok songs, hashtags, videos, comments, and even products branding themselves as being for and about "girlhood." The concept of girlhood carries currency in our cultural landscape. Girlhood is more than a brand, but does not have a singular definition. What is girlhood then?

In 2008, scholars Claudia Mitchell, Jacqueline Reid-Walsh, and Jackie Kirk created a new journal, *Girlhood Studies: An Interdisciplinary Journal*, which is widely viewed as the advent of the field. Scholar Mary Celeste Kearney offers this three-pronged definition for girlhood studies: “1) the subjective experiences of those who identify as ‘girls’; 2) as the period in life one identifies as ‘girl’; and 3) as the discursive construct used by social institutions and individuals to categorize those deemed young and female/feminine, which is commonly performed and reconstructed by those who identify as ‘girl.’” Other scholars have defined girlhood as the stage after infancy and before adulthood. The interest in girlhood studies comes with an imperative to include a previously marginalized population; female adolescents are doubly marginalized because of their age and their gender. Girlhood studies scholars, such as Mary Celeste Kearney acknowledge there has been generational progress made as “girls today have more agency than those of previous generations;” however, as “minors, they are barred from many of the activities and social institutions that might expand their power and improve their lives” (21). Because of the complicated status, there is a dearth of research that involves girls’ participation and their perspectives.

In addition, discussions of girlhood involve female adolescence and the onset of female puberty as typical markers. Menstruation is often viewed as a critical part of identity formation (Cohen). There is a tendency to universalize the category of girlhood as the developmental stage of all young women. We have attempted to navigate this by revealing some of ourselves throughout the essay. We examine the pop culture artifacts from our lived perspectives and through our terministic screens³: we are middle-aged white women with children who live in the Midwest and who teach college; we didn’t experience girlhood subjectivity the same. However, as we’ve noted earlier, menstruation is one of the most common experiences of women⁴, surpassing class, race, sexual preference, politics, religion, and personal choice, so we’ve focused our discussion of girlhood on pop culture and periods.

Menarche as a competition

Despite menarche, the onset of one’s first period, not occurring for the main character until the end of the book, *Are You There, God?* exemplifies some of the actions and thoughts girls experience during the menarche years. This novel moves away from previous menstrual narratives, arguing that women should remain mothers, caregivers, and homemakers (Egan). Rather than characterizing menstruation as a disability, an illness, or even a threat to emotional stability (Egan), Blume, author of *Are You There, God?* paints menarche as a competition, an event young adolescents can prepare for, and an event to share with mom.

Readers become aware of the competition between Margaret and her friends Janie, Gretchen, and Nancy in Chapter 15. Margaret shares the following exchange with her mother when she arrives home:

3 In his book *Language as Symbolic Action*, Kenneth Burke develops the concept, “Even if any given terminology is a reflection of reality, by its very nature as a terminology it must be a selection of reality; and to this extent it must function also as a deflection of reality” (45). Sarah and I view the world through our own terministic screens or filters.

4 Contemporary scholars and organizations like the ACLU have noted that trans men and nonbinary individuals also menstruate, and importantly, not all women menstruate.

“Gretchen Potter got her period.”

“Did she really?” my mother asked.

“Yes,” I said.

“I guess you’ll begin soon.” (114-115)

A few days later when Nancy’s family is away for the long President’s Day weekend, Margaret receives a postcard from Nancy with three words “I GOT IT!!!” (116). Margaret’s reaction was to rip the cards into tiny pieces, throw them away, and go to bed thinking something was wrong with her. Readers of the novel will soon discover that Nancy’s proclamation was a lie. In Chapter 17, Margaret learns of Nancy’s deceit when she begins crying in a steak restaurant restroom asking Margaret to get her mother. After giving Margaret some coins to get a product from the dispenser, Margaret asks Nancy’s mom “Does she always act like that?” “It’s her first time,” Mrs. Wheeler explained (123). Nancy’s deception demonstrates how puberty, in this case, menarche, is characterized as a competition. Because she wasn’t the first of her friend group, Nancy decided just to say she got it. After all, she was the first to wear a bra, she claimed to have bigger breasts than Margaret so why not also be first, or in this case second, in experiencing menarche?

Menarche as a competition is also evident in *Jessica’s Secret* by Francine Pascal. Jessica is jealous when her twin Elizabeth experiences menarche. Rather than be truthful that Jessica hadn’t started, she acts as if she too has gotten her period but in a much more sullen way than her sister. A second example is when Elizabeth explains to Jessica what Elizabeth’s friend Amy said after Elizabeth shared that she got her period. Elizabeth confides, “[Amy] said she was kind of jealous. She understands that everybody’s different and lots of girls don’t start until they’re older, but still, she felt left out (Pascal 15).

What is interesting to note within the novels is how open the girls are about menarche, even when lying about getting it. Menstruation scholarship (Jackson et al.; LeBlanc “Breaking the Cycle”; Roscoe and LeBlanc) found that many young menstruators experience shame and stigma and often keep menarche hidden, but our analysis suggests that in young adult literature, this doesn’t seem to be the case.

Menarche as being shared with friends and with mom but not in school

Before Margaret, or any of her friends, experience menarche, readers note how despite the girls having the rule that “the first one to get her period had to tell the others all about it. Especially how it feels,” (Blume 33) they find that menstruation is not talked about openly at school, as menstruation “is a certain very private subject just for girls” (Blume 49). Menarche and menstruation are constructed as shameful, embarrassing, and something to be hidden, especially within schools (Conner-Burrows et al.). Most schools in the United States are not required to provide menstrual products (Bhoda et al.) nor teach menstrual education (LeBlanc “School Nurses”).

First, we noted the secretive way characters in Blume's and Pascal's novels learn about menstruation. In chapter 15 of *Are You There, God?* the school separates the sixth-grade boys from the sixth-grade girls. Margaret recalls, "The film told us about the ovaries and explained why girls menstroo-ate. But it didn't tell how it feels, except to say that it is not painful, which we knew anyway" (Blume 96). Pascal's book 1 of the Sweet Valley Twins Junior High series, *Get Real*, shows a lack of conversation about menstruation. One would think physical education class would be ideal, but instead, it became a class where one could be embarrassed, as Jessica learned during gym class. The following exchange is a scene from gym class in Pascal's text:

Miss Scarlet lined the class up on the bench again.

"Now, girls," she said, "I don't allow anyone who is having her period to go swimming. It's extremely unsanitary. Are any of you menstruating?"

I gasped. Did Miss Scarlett actually mean that if you have your period, you have to announce it in front of the whole class? I was mortified enough just by her question – but I couldn't even imagine having to answer it. (Pascal 65)

Jessica's experience highlights two common problems. First, the scene demonstrates how menstruation is framed as an embarrassing, shameful event for young girls. Conner-Burrows et al. determined with their focus group respondents that many teenage girls find menstruation to be constructed as embarrassing, shameful, and often something not to be discussed in public. Hence, it is not surprising that none of the girls in Jessica's physical education class raise their hands to admit having their period. The shame and stigma surrounding menstruation goes beyond just the act of menstruating but also fear of others finding out that one is menstruating. After Miss Scarlett's request, Jessica thinks the boys in her class "were just dying for some poor girl to raise her hand so they could make her life miserable for the rest of her life" (Pascal 66). Today's youth readers see such a prediction play out in Williams and Schneeman's (2020), *Go with the Flow*, a graphic novel centering on four girls and their menstruation journey. Sasha experiences her menarche in school and her new friends help her out in the restroom. However, Sasha lives with the aftermath of the incident throughout the school year with "Bloody Mary" graffiti and tampons hung on her locker door. The nickname Bloody Mary stays with her.

Next, the scene brings to light how society views menstruation as dirty. By Miss Scarlet labeling menstruation as unsanitary, she plays into society's discourse of stigmatizing beliefs. van Lonkhuijen et al. (2023) determined that the attitude regarding dirty is associated with the act of menstruating as well as menstrual products. This scene is rooted in a real-world concern for many swimmers, according to scholars Zipp and Hyde who have actually studied menstruation and swimming specifically in 2024. Swimmers are paranoid, scared, and self-conscious already over the fear of leaking poolside (Zipp and Hyde); hence, the feelings could escalate if one's teacher or coach believes menstruation is dirty. The fear of leaking could also impact training. One coach told Zipp and Hyde that the swimmer's "focus might not be actually on what they were supposed to be trying to achieve because they may be too concerned about leaking or showing" (250).

Despite the lack of menstruation communication within schools, Margaret experiences open conversation with her mom when realizing she started menarche.

I really hollered, “Mom – hey mom – come quickly!”

When my mother go the bathroom she said “What is it? What’s the matter?”

“I got it,” I told her.

“Got what?”

I started to laugh and cry at the same time. “My period. I’ve got my period!” My nose started running and I searched for a tissue (Blume 170).

Mom verifies that Margaret did start her period and left the room to get the products she would pack in Margaret’s camp gear. Then she asks Margaret if she needs help. Critically looking at the exchange supports menstrual communication research. The conversation initially focuses more on menstrual product instructions (Costos et al.) than on what is happening and what this means to Margaret’s body. Next, this scene juxtaposes LeBlanc’s (“Breaking the Cycle”) findings, where the lack of silence around menarche impacts how one experiences it. Margaret’s menarche is positive; she calls her mother to the room. A similarity, though, between LeBlanc’s participants’ experiences and Margaret’s is how the mother is more focused on the use of the product and not on what is happening to the girl’s body.

Elizabeth and Jessica Wakefield’s experience in telling their mom resulted in Mrs. Wakefield exclaiming, “That’s wonderful!” as she jumped up from her seated position and embraced her daughters. “Oh, I can’t believe it! You’re growing up so fast!” she explained (Pascal 7). Mrs. Wakefield then asked her daughters to sit with her and encouraged them to ask questions. The mother-daughter menstrual communication evident in Blume’s and Pascal’s novels deviates from menstruation scholarship. Costos et al., contend that society does not promote constructive menstruation communication between mothers and daughters. Mothers find the menstrual topic uncomfortable, resulting in many mother-daughter dyads not talking about menstruation (McKeever).

Menstruation as secret from men and boys

Youths interviewed in Tomlinson’s work indicate that young boys lack information about menstruation (Tomlinson 188). Why aren’t boys involved in the discussions? If they are excluded from discussions, they have no way of understanding how menstruation impacts everyday life. The pop culture texts we examined revealed this stark reality: girls don’t talk to boys or men about menstruation. Menstrual privacy is often presented in movies and books in the “don’t tell Dad secret-keeping manner” (Rosewarne 9).

The theme of secrecy is paramount in both Blume and Pascal’s texts. In *Are You There, God?* Nancy immediately invites Margaret to an initiation of sorts. Nancy tells her: “I want you to join my secret club”

(Blume 15). Their new club also conducts a “secret vote” and the girls are given “secret names” (Blume 38). Margaret also keeps the cotton balls stuffed in her blouse a secret, too (Blume 94). This secrecy seems heightened when it comes to keeping things from males as scholars have noted that men and boys are both sidelined on screen and in books regarding “girls’ issues.”

One of the books in Francine Pascal’s Sweet Valley High YA series tackles menstruation as a primary theme. In the most obvious way, Jessica’s story announces a “secret” in the title—the secret represents her lie, but it also represents menstruation itself. Media scholars have observed, “While menstruation might only be physically experienced by women, men who share their lives—as fathers and husbands and brothers and colleagues—exist on the periphery” (Rosewarne 25). There is no parallel experience for men. In *Jessica’s Secret*, the sisters actively work to keep their brother, Steven, from finding out that Elizabeth got her period. The sisters are careful not to discuss menstruation in front of him. Jessica asks her mother how old she was when she started her period when “Steven came barreling through the kitchen door” (Pascal 10). Steven enquires about the special meal being prepared:

“‘What’s the occasion?’ Steven demanded, giving Jessica a doubtful look. Jessica exchanged smiles with Elizabeth. ‘Nothing *you’d* understand,’ Jessica told him. The twins dissolved into giggles, and Steven gave Mrs. Wakefield a helpless shrug. ‘Girls!’ he groaned.” (Pascal 11)

The twins are also afraid of boys finding out. Jessica and Elizabeth go to the drugstore to buy pads for the first time. As they approach the two checkout lines, Jessica chooses one and Elizabeth responds, “‘But the right one is so much shorter...*Oh*.’ Elizabeth’s gaze landed on the boy. ‘Good choice, Jess,’ she agreed. Somehow she did not want to have to be waited on by a boy” (Pascal 18). As the sisters are waiting in line, they notice two boys, Bruce and Todd, from school. Panic and fear ensue as Jessica attempts to hide behind a magazine and both girls turn red from embarrassment at the thought of boys witnessing their purchase. While we have discussed the shame and stigma surrounding menstruation, this scene shows the importance of keeping it from boys and men. The result is men are often left to occupy “caricatures such as menstrual dolts, as menstrually emasculated, and as menstrually creepy” (Rosewarne 7). She explains the underlying reason: “While there exists a general cultural imperative to keep menstruation hidden, there is an even more specific demand to keep it hidden *from men*” (Rosewarne 8). We observed this with boys as well.

Menstruation on Screens

Some of the books our daughters have been reading have also been turned into television series or movies. While we know the books have menstruation in them, we also know it is rare for menstruation to be seen as a plot device in British or American films (Kasenko). This made us wonder, then, whether updated made-for-television remakes of classic books we read as young adults embraced menstruation. This section examines how the books we read as young adults, such as *The Babysitter Club* series and *Anne of Green Gables*, showed menarche differently than the newer screen versions.

Modern-day American television addressing menstruation is unsurprising as it fits within today's culture. However, many American and English young adult novels, published before 2020, lack representation of menstruation (Walton). This didn't stop television shows based on English and American books from addressing menstruation; as Sarah points out, *The Babysitter Club* series is not the only series of books that changed from the original books to screen (LeBlanc "Women's Health and Popular Culture").

One such example is *Kristy's Big Day* by Ann M. Martin, which was first published in 1987 but aired on Netflix in 2020. The television adaptation of this young adult novel is described as featuring a character getting their first period. Blogger Pip Harry writes, "Kristy's mom is getting re-married, she's the bridesmaid and her first period arrives on the big day." What is significant is that menarche does not occur in the book but was a plot device in the episode with the same title (*Kristy's Big Day*). The absence of menstruation from the original plot, but then making it a pivotal moment in the television show, left Sarah bewildered.

"Why would they do that?" Sarah wondered. "Perhaps it is a sign of the times."

Kristy's Big Day begins by mentioning feminine hygiene products on the camp supply list. Kristy, not understanding what the term means, asks if the boy list includes "masculine hygiene products" before Claudia explains, "I think they mean pads and tampons" (Shukert). The lack of education Kristy has about menstrual products foreshadows a bigger scene near the end of the episode, but also supports research that found that most first-time menstruators seek advice on what products to use ("Women's Health and Popular Culture"). Near the end of the wedding reception, Kristy experiences menarche, telling her friends, "I guess it is my big day, too" (Shukert). Unlike Margaret and her friends in Blume's text, Kristy's friends are supportive of Kristy's milestone. Marianne explains how to put on the pad. Claudia points out that Kristy can now commiserate with them. And Stacy reminds her that she can bring her stash of feminine products to camp. The *Babysitter Club* members break the silence and the shamefulness of menarche (Roscoe and LeBlanc) and instead celebrate and assist Kristy.

As Kate sat and watched the episode of "Kristy's Big Day," memories of reading the *Babysitter Club* series as a young girl sharing a room with her younger sister came flooding back. Her memories inspired her to buy the original series for her Gen Alpha daughters, hoping that the books might help her discuss adolescence and puberty with them.

Lucy Maud Montgomery's *Anne of Green Gables* experienced her first menarche at night. Then she discussed it with her school friends the next day, at least as shown in the Netflix series *Anne with an E*. Sarah didn't read the series until she was 14 and could not recall the menarche scene. She recalled Anne Shirley as a feisty, creative, and devoted friend, but she could not remember her getting her period in the books. *Anne with an E* creator Moira Walley Beckett explained that "the period episode was essential for the coming-of-age story she wanted to tell. Suddenly changing from a young girl to a young woman is a pivotal life moment" (Yuko). The episode (Episode 5, Season 1) inadvertently addressed the menstruation absence in the book

by having one of Anne Shirley's classmates say "No one is supposed to know. A woman's cycle is shameful" (Beckett and Montgomery).

The girls' conversation in the coat room during recess reiterates periods as negative, scary, and gross, and producing irrational women. We provide the dialogue taking place during lunchtime among four friends: Diana, Anne, Josie, and Tillie.

RUBY: I'm not a woman! Why don't I have it?!

ANNE: Trust me, if I could give you mine, I would. This is so inconvenient!

DIANA: Hush, Anne!

JOSIE: Keep your voice down.

TILLIE: No one's supposed to know. A woman's cycle is a shameful thing.

ANNE: Why?

The first six lines of the conversation demonstrate how menstruation is a shameful thing. Today, many young menstruators disclose their status to avoid shame during school hours (LeBlanc "School Nurses"). The shame associated with menstruating can produce anxiety and low self-esteem (Stubbs) or even negative self-talk (LeBlanc "Breaking the Cycle").

DIANA: It's unmentionable, that's why.

ANNE: That's not a reason.

JOSIE: Why don't you ever understand anything?

ANNE: Marilla said it's God's plan, so doesn't that make it good? I mean, we can make a whole person. Where's the shame in that?

JOSIE: Am I the only one who thinks she's out of her mind?

DIANA: It's a secret, Anne. That's just the way it is.

The second set of the dialogue highlights two of the myths associated with menstruation: it is unmentionable, and it is a secret. Society perpetuates the notion that menstruation should not be talked about (Delaney et al.). Delaney and the authors explained that during agrarian times, farmers would have their wives stay home during their flow. They were not allowed to interact with others. Many cultures practice similar acts today, such as many Muslim women not entering places of worship during their cycle (Reed).

ANNE: Do boys have to contend with anything like this?

DIANA: Boys have their own problems.

RUBY: Why are they doing that?

JOSIE: There's a question for the ages.

TILLIE: When I get mine, I stay home from school, because I don't want to have an accident.

ANNE: Accident?

RUBY: There was a girl a few years ago who bled right through the back of her dress.

TILLIE: Oh, I would die of mortification.

RUBY: The teacher called her up to the blackboard and everybody saw.

TILLIE: I would just die

Finally, the dialogue concludes with references to how menstruation impacts girls' education. In the United States, girls may leave school early, arrive late, or skip school altogether (Kuhlmann et al.). Viewers also hear the story of a girl who bled through her dress and then had to go to the blackboard, sharing her accident with everyone. As we pointed out above, incidents like this stay with the young girl for a while, resulting in bullying from classmates or dropping out of school.

Across Generations

As we noted in the introduction, women's rights are being actively restricted across the United States. Historically, the advancement of women's rights in the United States has been accompanied by different levels of backlash from reactionary and conservative forces who see these changes as a threat to traditional, Christian, Caucasian, and heterosexual values. Our girls represent the next generation, Generation Alpha, that will face the impact of the current backlash. The repercussions could reinforce taboos around menstruation, making it harder to discuss or to normalize. Progress is eradicated when efforts to promote menstrual health education are met with resistance by opponents who frame the argument as inappropriate or "woke" content. The recent online feedback about Disney's *"Moon Girl and Devil Dinosaur"* episode about menstruation bears out the argument regarding the current backlash (Willets). While some comments praise the show for the educational aim of providing information to young girls, many others suggest the content is "hellish" and is a "woke" message orchestrated by liberals.

We realize that so much has changed, and yet, so much has stayed the same. In the 1990s, Judy Blume's book served as a primary source of information about puberty and menstruation for young girls. While the advent of social media like TikTok, and the ever-changing Wikipedia, allows girls to have so much more information about menarche, it's interesting to note that feelings of shame are still present. We might think



that girls in the United States, because of our country's wealth and access to information, would be free from shame, and of course, that just isn't true.

In Gloria Steinem's watershed essay, "If Men Could Menstruate," she answers her own question about ways we might think differently about menstruation if it were not marked as a female-only event: "The answer is clear—menstruation would become an enviable, boast-worthy, masculine event" (Steinem). While Steinem was making a joke, we believe that perhaps the root of the joke is the answer. Until books like the ones we looked at, and television shows, are marketed for boys and men as well, menstruation continues to be a woman's issue. We want reproductive rights for women, and we want public conversations, literature, and media that support these rights as well. While it's not new to suggest that women shouldn't have to live in shame, we stand by this sentiment. In the meantime, we'll be with our daughters as they navigate their transitions—hoping to instill a sense of confidence and the value of female friendship in them as they become women.

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