



23rd Biennial Conference of the
Society for Menstrual Cycle Research

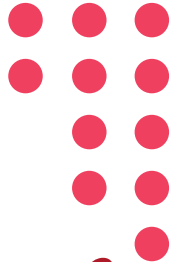
Traversing the Ridge:

Connecting Menstrual Research and Advocacy



Colorado Springs, CO

June 6 - 8, 2019



**COLORADO
COLLEGE**

Full Conference Schedule & Abstracts:

Thursday 6th June

2:00 pm

Bemis Lounge

Registrations Opens

3:00 pm – 4:30 pm

Tutt Science Bldg (TSB)

Concurrent Workshop (CW) Sessions #1

CW 1.1: How to Teach Cervical Mucus in Menstrual Health Education TSB Rm. 218

Lisa Leger, Justisse College International, Canada

Sexual health education teaches about menstruation, contraception, and STI's, but usually lacks a coherent strategy for teaching about cervical mucus and other symptoms that the cycling body experiences. This session is intended as training on how to teach about the meaning and usefulness of cervical mucus observations so your clients get a more full picture about what occurs in the female body and how to interpret their observations. Justisse Holistic Reproductive Health Practitioners will explain how to talk about vaginal fluids to reassure clients that it is something normal, healthy, and actually useful to be aware of. This session will review how to handle questions about what clients see in their underwear or on the toilet tissue and the pros and cons of internal checks. You will learn how to field such questions and use them as teachable moments to elaborate on how Fertility Awareness Methods work, the benefits of being aware of cycles, and how such observations can be used as a health record and diagnostic tool. Learn how to explain the ways in which cervical mucus differs from vaginal cell slough, yeast infection, Bacterial Vaginosis, or arousal fluid. You will take away specific phrases, teaching tools, and techniques that will foster improved body literacy in your clients, normalize their experiences, and guide them to a healthy attitude toward their reproductive cycles regardless of their objectives or needs.

CW 1.2: Menstrual Cycle Research and Activism through Decolonial, Anti-colonial Feminist Worldviews TSB Rm. 214

Taqdir (Taq) Kaur Bhandal, Social Justice Institute, University of British Columbia & Vancouver Women's Health Collective, Canada

This workshop will pose the question: How do menstrual cycle researchers and activists resist and reproduce the coloniality of sex, gender, and sexuality? As a social justice researcher, public educator, and woman of colour based in Vancouver, Canada this is a question that I have been reflecting on myself for the last several months, and I would love to bring it to an engaged group - the menstruation research conference - to work through together. This workshop will unsettle and unlearn colonial, hetero-patriarchal, classist frameworks for researching and advocating for menstrual health, and engage with the intersections of menstrual health and decolonial, anti-colonial feminisms.

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CW 1.3: Trans & Genderqueer Menstruation TSB Rm. 126
Frankie, University of Wisconsin – Madison, United States

Menstruation has been historically categorized as feminine – a function of the female body that affects women. Trans and genderqueer people face this biological function as a social signal of gender/sex identity. This workshop includes the presentation of three research components: (1) research about trans and genderqueer identity pertaining to menstruation, (2) research and implications of trans and genderqueer bathroom navigation and (3) qualitative trans and genderqueer evaluations of healthcare experiences. Data were gathered from online ethnographic content analysis of menstruation discourse written by trans and genderqueer folks in addition to interviews with 19 trans, genderqueer and non-binary participants. Recommendations for healthcare providers, counselors and organizations with buildings and public spaces that require trans-friendly changes to policies and restroom designations will be discussed. Participants will be asked to consider their own organizations, workplaces or medical centers and how they can resolve barriers for trans and genderqueer people, particularly menstruators.

5:00 pm – 7:30 pm

Bemis Hall

Welcome

Tomi-Ann Roberts, SMCR President

6:30pm

Bemis Hall

Performance:

Hungry Ovaries

Jess Grippo, United States

“Hungry Ovaries” is a one-woman performance piece that combines dance, comedy, and science, to illustrate the changing hormonal patterns of a woman’s menstrual cycle.

“Hungry Ovaries” is a one-woman performance piece that combines dance, comedy, and science, to illustrate the changing hormonal patterns of a woman’s menstrual cycle. It was created in the spirit of making period talk less taboo and is based on personal experiences of the artist, along with the biochemistry of the menstrual cycle. The artist Jess is a former women’s holistic health coach, and uses that knowledge to inform her work today.

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Poster Session

A Prospective One-Year Observation of Variables Related to Menstrual Cramps in a Cohort of Healthy, Non-smoking Normally Menstruating and Ovulating Premenopausal Women

Sewon Bann, University of British Columbia, Canada; Dr. Azita Goshtasebi; Dr. Jerilynn Prior

Menstrual-cycle related problems affect women of reproductive age in their personal, reproductive, and professional lives, and are sources of socioeconomic loss. Of such, primary dysmenorrhea (cramps) is the most prevalent menstruation-related condition, affecting up to 91% of menstruating women. Despite its high prevalence, it is often overlooked and ineffectively treated by health care professionals and minimized by women themselves. Menstrual symptoms are expected in Society. In keeping with this trend, there is a lack of scientific understanding of prevalence, risk factors, and effective treatments for menstrual cramps. In particular, we need longitudinal population-based studies that can investigate within-woman changes in cramps over time. Our aim was to investigate longitudinal characteristics and prevalence of cramps in healthy, normally menstruating/ ovulating women, and their relationships with parity, ovulatory characteristics, and physical activity. Data were obtained from a primary 1-year observational study conducted from 1985-87 at the University of British Columbia, Canada in 62 women screened to be ages 20-42, with a normal BMI, non-smoking, without endocrine disorders or hormonal contraceptive use, and no recent weight changes, as well as two consecutive normal-length, ovulatory cycles. The women completed daily Menstrual Cycle Diary[©] recording of cramp intensity on a scale of 0-4, flow parameters, physical/emotional changes, and basal temperature measurements evaluated by validated quantitative basal temperature (QBT) analysis. Based on the frequency distribution of Cramp Scores (average intensity x total duration per cycle) participants were characterized to have mild or moderate to severe cramps.

The 62 participants were 33.95 (\pm 5.37) years old, 32.3% were parous, 50.0% had one or more anovulatory cycles, and 61.3% were recreational or marathon-training runners. All but one woman reported at least one episode of cramps during the year. Their mean cycle length was 28.32 days (95% CI 28.09, 28.55). Cramps lasted a mean of 2.51 (\pm 1.60) days (range 0-10) with a mean intensity of 1.61 (\pm 0.46). Cramp Scores ranged 0-24, with a mean of 4.23 (\pm 3.45).

Linear regression analysis was performed of the association of Cramp Score with participant variables: age, parity, ovulation, and physical activity. The Cramp Score yielded coefficients with age of 0.004 (95% CI -0.192, 0.201), with parity of 0.170 (-2.041, 2.381), with ovulation of 0.182 (-0.836, 1.201), with physical activity of 0.119 (-0.938, 1.175),

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respectively with none reaching statistical significance. These data suggest negative associations between Cramp Scores and age, parity, ovulation, and exercise. This is interesting since a positive association between cramp intensity and ovulation has been postulated in previous literature. The negative trend for cramps' associations with age and parity is in agreement with the existing literature. Our next step is to calculate the within-woman and between-woman variance in cramp intensity and frequency over the 1-y period. We hypothesize that the prevalence and intensity of cramps will vary considerably between-woman, but little within-woman. Since 13 women experienced regular cycles with anovulation, we will do a within-woman comparison of cramps experience in ovulatory versus anovulatory cycle(s).

An Analysis of Menstrual Equity Policy in Canada

Halima Al-Hatimy, Ryerson University, Canada

Developing policies on all levels of government that insure equitable access to menstrual hygiene management for all who menstruate would be a critical first step to achieving menstrual equity in Canada. However, there are sociocultural barriers that have stifled meaningful, policy-related discourse around the topic of menstruation. The general reluctance towards discussing this subject in the home, community, school and even healthcare system has made it challenging to identify specific issues that can be resolved with the implementation of well-designed policies and programs. (Olowojesiku, 2016).

Moreover, the lack of government oversight and regulation on the marketing and sales of menstrual products has enabled corporations to capitalize on the prejudicial attitudes towards menstruation. This is evident in the way they refer to them as “feminine hygiene” over “menstrual hygiene” products, their emphasis on concealing menstruation, and the sometimes prohibitive cost of these products (“Disrupting the 15 Billion Dollar Menstruation Industry,” 2016). Furthermore, the Ministry of Health Canada's National Women's Health strategy does not include a component on menstrual equity which is an often neglected area of women's health research, education and leadership.

In 2015, the Government of Canada passed a motion to remove the harmonized sales tax (HST) on all menstrual products (“Tampon tax' will end July1” 2015). However, this does not resolve the issue for low-income or homeless women, girls and trans-persons who cannot afford to pay for these products (“Tampon tax' will end July1” 2015). It is estimated that a person is expected to use over 10,000 menstrual products in their lifetime which would cost nearly \$6,000 (City of Toronto, 2018, p.2). For homeless and low-income persons throughout Canada this cost can be a significant barrier to accessing this basic necessity which may increase the risk of infectious disease, violence and crime and social isolation.

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In 2018, the City of Hamilton made Canadian history when it became the first Canadian municipality to pass a motion to study the feasibility of funding menstrual products for homeless and low-income women, girls and trans-persons. This was a result of a proposal presented by FemCare Community Health Initiative which also recommended that City Council partners with the Public and Catholic School Boards, prisons and community agencies that work closely with this population to consult on how these products can be distributed in an efficient and dignified manner. Presently, Hamilton Public Health is conducting an environmental scan to determine the need for these products. Hamilton City Council is also working on a joint initiative with the Government of Ontario to categorize menstrual products as a medical necessity eligible for subsidy under provincial health insurance.

Currently, the existing menstrual equity policy framework in Canada leaves much to be desired. There is a great deal of work to be done to achieve menstrual equity in Canada on all three levels of government. The federal government could begin by implementing menstrual equity in their National Women's Health Strategy. Provincial governments should reassess menstrual equity as a medical necessity rather than only a social issue. Municipal governments should allocate a portion of their annual homelessness and poverty budget towards funding menstrual products for those in need.

Apart from Pads: Alternative Menstrual Products as Sex Education Tools

Zoe Yuk Lam Chan, Happeriod, Hong Kong

Girls in Hong Kong often feel gross and scared about their periods, nearly 30% interviewees reported that they hadn't received any menstrual education when their first period came. Over 40% interviewees thought that having their period is disgusting or felt scared before their first period. Menstruation is still a taboo and refusing to talk about it has negative consequences for how young Hong Kong women view themselves.

The extremely conservative concept has restrained Asian women in how they view their private part. Although information is much freer these days than the older ages, sex education in Hong Kong is still very outdated. The Education Department has published a sex education guidelines for schools back in 1997. However, they have not been updated since then. While the guidelines on when and what to teach about sex organs are not very outdated, since the whole book of guidelines are not compulsory, the problem is on those who execute it. Even teachers are not ready to teach sex education, especially when it is not compulsory in education programmes in university. Even if feminine products are touched on, it would not be detailed. When schools are expecting parents to teach their children how to use a pad, the parents are expecting the same thing to the school. This shift of responsibility comes from nowhere, but simply the unconscious taboo of sex or sex organs.

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Happier and Free Periods HK aspire to break the taboo on menstruation by encouraging girls to develop a more positive understanding around menstruation. We also engage boys to develop empathy and understanding and most importantly to help promote a period-shame-free culture, where everyone, boys and girls can thrive.

In Happier's five years work and project Free Periods HK, I found that sustainable menstrual products like menstrual cup and cloth pads are the key to open the discussion of menstruators and non-menstruators in Hong Kong, which give a positive impact in sex education. Potential users common questions showing problem of lack of sex education in Hong Kong such as where the hymen is and will the menstrual cup make my vagina muscle be loosen, during interactive menstruation workshop, people are more eager to learn things about sex and body.

This study investigated the effects of a culturally and developmentally tailored nursing intervention on the menstrual health of adolescent girls in Hong Kong. A questionnaire design examined the effects of interactive education sessions on menstrual health. Significant improvement was observed in the workshop regarding menstrual knowledge, confidence in performing menstrual healthcare behavior, and dysmenorrhea related self-care behavior. A tailor-made education program improved menstruators' menstrual knowledge, promoted a more positive attitude, encouraged confidence, and improved pain relief practice.

Assessing Menstrual Poverty in Mississippi from a Socio-Ecological Framework

Christine Little, Mississippi State University, United States; Antonio Gardner; Barry P. Hunt

Crichton, Okal, Kabiru and Zulu (2012) conceptualized "menstrual poverty" to explore the impact of poverty on menstruation within resource-poor settings across the Global South. However, little research examines the link between poverty and menstruation within industrialized countries such as the United States. In study among low income women in St. Louis, Missouri, Kuhlmann, Bergquist, Danjoint, & Wall (2019) found nearly two-thirds of participants had experienced difficulty affording menstrual products within the previous year. According to the 2017 U.S. Census, 39.7 million people lived in poverty, while approximately 13% of women aged 18-65 lived in poverty (U.S. Census Bureau, 2018). Poverty rates are consistently higher in the South, particularly in Mississippi, Louisiana, and Alabama. While the national poverty rate is 12.3%, the rate in Mississippi is 19.8% (CDC, 2017). Food insecurity rates in Mississippi are also higher (17.2%) than they are nationally (11.2%). Mississippians are disproportionately affected by health issues stemming from poverty, food insecurity, rurality and inconsistent availability of resources. Menstrual products are basic necessities needed to prevent infections and maintain health.

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At least nine states have exempted these items from sales taxes while five others have introduced legislation to remove the sales tax on menstrual products (NPR, 2018). However, in Mississippi in 2016, a bill that would have exempted menstrual products along with other medical devices from the 7% state sales tax died in committee (S. 2053, 2016). It is important to understand the prevalence of menstrual poverty within Mississippi. The Social Ecological Model (SEM) examines health issues, and potential solutions, from a broad-spectrum perspective including, intrapersonal, interpersonal, organizational, community and public policy levels. The purpose of this socio-ecological examination is to identify options within Mississippi for girls and women in poverty who struggle to purchase menstrual products and offer solutions for making these items more accessible. To affect the most productive change, it is important to address multiple levels of causation. Policy level initiatives may include providing a tax exemption for menstrual products, mandating accurate and appropriate education on menstruation in school curricula, providing coverage for menstrual products under government assistance programs, and providing free menstrual products in public schools and shelters within the state. Community level initiatives include advocacy for community agencies addressing health issues such as food insecurity to also include accessibility and availability of menstrual health products. At the organizational level, provision of menstrual leave to women as well as menstrual products at no cost within the workplace are examined. Mississippi also has no non-profit organizations in the state that specifically provide menstrual products; thus, we believe creating organizations to help fund and disseminate products is particularly important. Interpersonal and intrapersonal level interventions should focus on destigmatizing menstruation through education and support across ages and genders. Menstrual poverty has been linked to stigmatization; thus, as interpersonal and intrapersonal solutions, we recommend comprehensive plans to reduce menstrual poverty in the state include accurate and appropriate menstrual education for the entire population.

Blood Across Borders

Leila Owens, Princeton University, United States; Jatan Sansthan, India

Drawing on personal interviews of 10 teenagers who have lived in the US, India, or both, as well as my personal experience as an American teenager living with an Indian family and working on menstrual health advocacy at an NGO in India for 9 months, I explore how culture influences the shared experience of menstruating. This topic is considered through a series of short case studies, supplemented by my own observations and analysis. I compare and contrast menstrual education, common practices, stigmas and misconceptions experienced by adolescents in the US and India. A number of topics are covered ranging from the popularity of tampons in the US contrasted to their scarcity in India, the different strategies cultures take for managing disposable pad waste and

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dealing with cramps, all the way to which places are banned during menstruation and school attendance during this time.

Exploring Knowledge of and Intentions to Change Behaviors After the Criminalization of Chhaupadi in Nepal among Community Members and Police: A Presentation of Initial Findings

Sara Baumann, University of Pittsburgh, United States; Pema Lhaki; Jessica G. Burke

As a response to growing women's health and rights concerns associated with chhaupadi - a traditional menstrual practice in Nepal where women and girls are banished to cow sheds and are considered impure during menstruation - the Parliament of Nepal released a new code that criminalizes the tradition with fines and jail time in August 2017. This study is the first to explore community reactions and intentions to change behaviors based on the new criminalization code. In this qualitative study conducted in Kalikot, far-west Nepal where chhaupadi is widespread, interviews and focus group discussions were conducted with 80 respondents to better understand 1) reactions to the new code at the community level, and 2) intentions to change behaviors as a result of the new code. Respondents included police, faith leaders and healers, elders, in and out of school girls, mothers, teachers, and health care providers. Initial findings revealed that the majority of community members, including police, were not accurately informed about the new criminalization code to date. However, reactions to criminalizing chhaupadi were generally positive, where nearly all community members and police expressed that the new code would likely be successful in reducing harmful menstrual practices associated with chhaupadi. Many expressed that faith leaders and the older generation would be hardest in terms of behavior change and should be targeted in awareness-raising efforts. Community members and police offered numerous recommendations that should be considered for scaling up and enforcing the new code and improving menstrual health for women and girls, which included regular awareness programs, rally's, village dramas, and engagement of municipality-level government leadership.

Exploring the Relationship Between Knowledge about Women's Reproductive Health and Beliefs about Reproductive Justice

Mindy J Erchull, University of Mary Washington, United States; Kate Richmond

This is an exploratory study about the ways in which people's knowledge of and attitudes about women's reproductive health, including menstruation, relate to other attitudes, belief, and behaviors. These include endorsement of sexist beliefs and traditional gender roles as well as different political ideologies.

Political scientists have noticed that, in the last few years, there has been a shift in political rhetoric on abortion (Beckman, 2016). More specifically, politicians show

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increased focus on women (and their health) instead of the fetus (and right to personhood). Although this may appear to be pro-women, several studies demonstrate that this focus is a form of protective paternalism and is closely linked to benevolent sexism (Duerksen & Lawson, 2017; Hung, Davies, Sibley, & Osborne, 2016).

Ambivalent sexism stems from an ideology that idealizes women as nurturers and mothers (Glick & Fiske, 1996), and such a belief system is associated with decreased support for funding for abortion (Jozkowski, Crawford, & Hunt, 2018). Ambivalent sexism has also been tied to more traditional endorsements of gender ideology, so we expect a link between more traditional endorsements of gender ideology and more restrictive views of reproductive health (Glick, Wilkerson, & Cuffe, 2015). Abortion funding has often also been tied to funding for reproductive health more generally (Jozkowski et al., 2018), and thus, we expect benevolent sexism and traditional endorsement of gender ideology might also be connected to attitudes toward funding for reproductive health.

However, to our knowledge, no study has ever examined how experience with formal sex education or knowledge of reproductive health might influence attitudes toward reproductive health, so we aim to broaden this area of research by exploring the relationship between these variables and various beliefs broadly under the umbrella of reproductive justice, such as funding for sex education, funding for Planned Parenthood, and insurance coverage for contraception.

Green Crusaders

Rajasi Kulkarni Diwakar, Green the Red, India; Yatin Diwakar

Background: As menstruation is still a taboo in India, menstrual products and their health-effects are not a prime concern. While traditional practices are blamed for poor hygiene and discomfort, international reports alert to health issues related to tampons and disposable sanitary napkins. India's waste management infrastructure is inadequate to deal with disposable sanitary napkin waste which pollutes soil, water, and air, creating a public health nuisance. Due to concerns for environment, health, comfort, and economics, women are moving from disposable products to sustainable practices, like using reusable pads and menstrual cups. While new women are adopting disposables under the continuous bombarding of advertisements, charity, and government programs, this study tries to understand what are the motivations, perceptions, and concerns of these early adopters (or re-converts) of sustainable menstruation practices?

Methodology: Indian women using sustainable menstrual products were surveyed online, contacted through social media platforms for like-minded women. As this self-administered survey was voluntary, participation was considered consent. Survey was closed on reaching 100+ respondents. The questions pertained to awareness about

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sustainable menstrual products, reasons for adoption, perceived advantages, and issues in usage. Collected responses were analysed to identify similarities/ trends in adoption and important concerns.

Findings: Responses of 104 out of 105 women were analysed. The reasons for adopting reusable products were mainly environment, comfort, and health benefits. Most women purchased products online; influenced by social media and friends. Hesitations towards reusables changed to a liberated feeling.

Conclusions: Amongst early adopters, self-initiative and awareness exists, leading to quest for alternative products and online purchases. Paucity of products in offline market hampers increase in adoption by early majority. To reach the majority, it will be important to popularize these products through personal interactions and making available at affordable prices in shops. The study is limited by being an online survey which reached to early adopters filtered by their participation on various social networking platforms. This study didn't include women who tried to adopt sustainable products but switched back to disposable products. Studying such women will help understand some unknown issues which may become important for adoption by majority."

Menopause in Relationship Context

Nomi Redding, Independent Researcher, United States

Women do not go through the menopause transition, or any other menstrual or reproductive stage, in a vacuum. Their experience is integrally woven in a web of relationships: with family, friends, work and educational systems, communities, and society at large. The poster presents findings and raises questions based on the 20-year Menopausal Adaptation Process Study (MAPS), in which data was collected from 1991 to 2012 from a convenience sample of 80 women ages 34 to 55 in a college town in the heartland U.S. Based on the menstrual cycle research of Dr. Alan Treloar and the multigenerational family research of Dr. Murray Bowen, women charted their menstrual cycles in data books provided by the project until the time of their final period, and updated family, health, and life situation information annually on a family diagram, in personal interviews, and through questionnaires. The project validated stages of the menopause transition against the backdrop of the stages of family life at a particular time in history. Also documented were the varieties of decisions project participants made to cope with the changes in their bodies and ongoing lives. The women who stayed many years in the project reported how useful data collection was to them personally and the 1:1 method of interviews confirmed their experience. The results have implications for patient-centered practice; nonmedical solutions to perimenopausal problems; and recognition of the multilayered challenges for midlife women.

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Menstrual Hygiene Management in Public Schools

Charlotte Powley, Brandeis University, United States

Menstrual Hygiene Management (MHM) is described by the World Health Organization as “using a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required, and having access to facilities to dispose of used menstrual management materials” (UNICEF, 2012). The current MHM policy landscape in the United States, specifically pertaining to the needs of students in educational spaces, is a nascent policy area. Since 2017, three states in the U.S. have signed legislation mandating the provision of MHM items to their public school student populations, or some segment of them. These states include: 1) New York State (2018), 2) Illinois (2018), and 3) California (2017). Massachusetts currently has no state policy mandating the provision of sanitary products in schools. This study seeks to 1) fill the gap in MHM research in the United States and 2) impact emerging MHM policies.

This study examines the experiences of high school and middle school students from the Public School system in Massachusetts. The research is driven by the following questions: 1) How do students in High School and Middle School describe the ways they manage menstruation while at school? 2) How do students describe the impact of MHM upon their physical and mental health and their participation in school-related activities? 3) What are students’ perceptions regarding the school's role in mitigating any challenges related to menstruation management?

The research is a mixed methods study, including both quantitative and qualitative data. The qualitative data includes focus groups, key informant interviews, and observational site visits. The study also collects quantitative data from students using the local Youth Risk Behavior Survey.

Menstrual Hygiene Management: Investigating the Acceptability, Safety, and Effectiveness of an MHM Intervention within A Community-Based Sexual and Reproductive Health Program in Zimbabwe: MASE Sub-Study

Mandi Tembo, London School of Hygiene and Tropical Medicine, Zimbabwe

Background: The onset of puberty and menstruation is a fundamental experience for girls and women, and appropriate menstrual health management (MHM) is directly linked with basic human rights. Yet, MHM continues to be a challenge for many girls and women, especially in LMICs.¹ Using the MHM measure adapted from the working definition of adequate MHM developed by a Joint Monitoring Program of the WHO and UNICEF in 2012, a lack of adequate MHM may hinder their daily activities, prevent them from going to school or participating in income generating activities, or lead to stigma, discrimination,

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and adverse psychosocial outcomes.³ Options for MHM products include disposable and re-usable pads, and the menstrual cup. However, there are relatively few data on the acceptability and effectiveness of these products, especially reusable products, in LMICs. Of particular interest is the effects of access to MHM education and product choice on MHM practices and perceptions and the association between reusable products and reproductive tract infections as bacterial vaginosis (BV), candida, and urinary tract infections (UTIs)⁴.

Methods: Nested within a cluster randomized trial, the MASE study will be a 1-year prospective cohort study investigating the acceptability, safety, and effectiveness of an MHM intervention that provides education, analgesia, and MHM products such as disposable pads, reusable pads (AFRIpads), and the menstrual cup (Ruby Cup) among 16 – 24 year old young women across Zimbabwe.

Data collection will be quantitative and qualitative. Quantitative data from participant period tracking diaries and participant electronic records will be used to evaluate MHM intervention uptake, product choice and patterns of use over time and quarterly self-assessment quantitative questionnaires and qualitative FDGs will be used to assess the acceptability (e.g. facilitators, barriers, uptake of the intervention, reasons for continued use or discontinuation of products and appraisal) and effectiveness of the MHM intervention on female participant engagement in a community-based SRH intervention programme, psychosocial wellbeing and MHM knowledge, perceptions, and practices over time. The study will also collect vaginal swab samples, on a quarterly basis, to monitor infection and safety of the different MHM products, with respect to UTIs, BV, candida, *Staphylococcus aureus*, and staphylococcal toxic shock syndrome.

Study Aim: To investigate the acceptability, safety, and effectiveness of an MHM intervention providing MHM education, analgesia, and MHM product choice among young women aged 16-24 years in Zimbabwe.

Objectives:

Effectiveness

- a. To investigate and understand the effects of an MHM intervention on female participant engagement in a community-based SRH intervention
- b. To investigate the effectiveness of the intervention on MHM practice and perceptions, and MHM knowledge among young women over time

Safety

- c. To monitor infection and safety of the different menstrual management materials, with respect to UTIs, BV, candida, *Staphylococcus aureus* and staphylococcal toxic shock syndrome

Acceptability

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d. To investigate the acceptability of the intervention (e.g. facilitators, barriers, uptake of the intervention, reasons for continued use or discontinuation of products)

Menstrual Inequity is Gender Inequality- A Case Study from Pakistan

Urooba Ahmed Fatima, Hampshire College, United States

How many times have we heard about developed countries lending support to empower young girls in developing countries? A great deal of it. There has been influx of foreign aid in developing nations in the form of large sums of money. However, the situation is completely different for schools which have, unfortunately missed their space in the limelight. Such is the story of Khatoon-e-Pakistan Girls Secondary School. Located in the metropolitan city of Karachi, this school is a publically-administered school and is being operated by the Ministry of Education in Pakistan. Khatoon-e-Pakistan has been one of the unfortunate schools where NGOs and government officers have visited but only for tours, official visits and polishing their “donation campaigns”.

Initially the school was located in a building a couple blocks down from its recent location but was given the notice to evacuate the building because it was being renovated to become a “model school.” Hence, Khatoon-e-Pakistan was moved down a few streets into a building which was a boy’s school already. Bahadur Shah Zafar Boys Secondary School had graciously offered three rooms from their school’s premises to Khatoon-e-Pakistan to run their operations. Bahadur Shah Zafar Boys Secondary School has a few more rooms, fully furnished, although not very well, and comparatively well maintained toilets, water fountain. However, as you walk a few steps towards the rooms assigned to Khatoon-e-Pakistan, the picture is very different.

Scraped paint on walls, broken windows, damp ceilings is the description of the classrooms of the girls’ section. There is not enough furniture to accommodate 75 students so they have to sit on cemented floors or bring stools from home. The toilet is unfunctional which means students have no toilet to use during their 8 hours in school! This is where the problem arises. Coming from conservative families, it is quite a struggle for these girls to fight for their right to education. During their menstrual cycle, it is impossible for them to manage their period at school; hence, most of them choose to remain absent during those days and skip school which is a substantial obstacle in their educational careers. This is where the advocacy for menstrual equity comes in because menstrual equity would mean gender equality and improved lives for these female students.

While this is just one school in the city, there must be a large number of schools in similar conditions. But what would be the outcome of renovating this school and improving its furniture? 75 bright futures.

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Menstruation and the Workplace: Experiences and Results from a Swedish Project

Klara Rydström, MENSEN - forum för menstruation, Sweden; Rebecka Hallencreutz

In the fall of 2018, the Swedish organization “MENSEN - forum för menstruation” received governmental funding for a one-year project focusing on menstruation and the workplace. The project emerged as an initiative to improve the situation for menstruators at work, with issues reaching from period jokes to a lack of proper bathrooms facilities. We aim to develop materials and methods to enhance menstrual knowledge among employers/employees and contribute to a physical and psychosocial working environment where all menstruators feel comfortable. However, the decision of the Swedish Gender Equality Agency to finance the project, as well as the project idea itself, arouse criticism from a broad base of Swedish journalists and right-wing trolls; “what relevance does menstruation have within equality politics?” and “menstruation is no longer taboo in Sweden, just have a look at the Global South and you’ll come across the real issue!”. Contrary to such opinions, the magazine “Arbetet”, representing interests of the Swedish labour movement, published a series of articles casting light on existing issues and we received support from organizations and individuals. In December, the project officially started and, in this presentation, we aspire to share our experiences from the initial debate and the project so far.

My Mother's Garden Has About A Million Flowers

Geneva Kachman, Menstrual Monday, United States

A display from the Menstrual Monday holiday with "gender critical" UFOs with catchy sayings like "No Prostate Ever Became a Uterus" and "Bioessentialist? Ha! I'm a Darwinian Constitutionalist." Includes a painting of myself in the process of dying tampons to make tamposes (tampon + rose = tampose), a mixed media portrait of my grandmother with a UFO (Uterine Flying Object), and a acrylic pastiche of Princess Anna Leopoldovna wearing a MOLTwheel.

No Matter the Location, Period Pain Negatively Impacts Education in Young Women: A Systematic Review and Meta-analysis

Mike Armour; Kelly Parry, Narendar Manohar, Kath Holmes, Tania Ferfolja, Christina Curry, Freya Macmillan, Caroline Smith, Western Sydney University, Australia

Introduction: Period pain and associated symptoms are very common in young women under 25. This time corresponds with a significant stage in adolescents and young women’s academic lives at both school and in higher education. Period pain may cause absenteeism from class or result in reduced classroom concentration and performance. Due to cultural and economic differences, any impact may vary by country. This

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systematic review and meta-analysis examines the prevalence of dysmenorrhea in young women and explores any impact it has on their academic performance and other school related activities.

Materials and methods: A search of Medline, PsychINFO, EMBASE and CINAHL was carried out in June 2018.

Results: Thirty-eight studies including 21,573 young women were eligible and included in the meta-analysis. Twenty-three studies were from low, lower-middle or upper-middle-income countries and 15 studies were from high income countries. The prevalence of dysmenorrhea was high 71.1% (N=37, n=20813, 95% CI 66.6 to 75.2) irrespective of the economic status of the country. Rates of dysmenorrhea were similar between students at school (N=24, 72.5%, 95%CI 67.5 to 77.0) and university (N=7, 74.9%, 95% CI 62.9 to 84.0). Academic impact was significant, with 20.1% reporting absence from school or university due to dysmenorrhea (N=19, n=11226, 95% CI 14.9 to 26.7) and 40.9% reporting classroom performance or concentration being negatively affected (N=10, n=5126, 95% CI 28.3 to 54.9).

Conclusions: The prevalence of dysmenorrhea was high, irrespective of country, with dysmenorrhea having a significant negative impact of academic performance both at school and during higher education.

Period Action in Asia: The User's Revolution of Menstrual Product Industry in Taiwan *Wen-Fei Shih, Artemis Medical Devices, Taiwan; Yuan-Yi Chen*

In Taiwan, most women use pads and are not familiar with tampons. After 30 years of selling, the usage rate of tampons is still far lower than sanitary napkins: only 0.2%. In 2003, a Taiwanese girl "addicted" to tampons during her exchange student time in the United States. Vanessa Tseng, the key person of menstrual product revolution in Taiwan, is known as "Tampon Princess."

Ms Tseng created the first domestic brand of tampon in Taiwan. The first tampons with applicators was showed in Taiwanese market. It was a long application process from 2008 to 2010. In July 2010, finally the tampon went on the market and became an important milestone in the development of Taiwan's menstrual product. But tampon as a medical devices in Taiwan has always had many restrictions. Until the beginning of 2014, the online shopping of tampons was officially permit. The development of Taiwan's menstrual product has once again entered a new stage.

In August 2015, Ms Tseng launched a crowdfunding project for menstrual cup in Taiwan. From this day, "Tampon Princess" level up to "Period Queen", and once again raised

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menstrual revolution in Taiwan. With the support of fans in the past decade, the project reached the pledged of US\$96,000 goal in three days, and end up with US\$320,000 in two months. After almost two years of application, Taiwan's Food and Drug Administration finally approved the first menstrual cup license on Feb.7th, 2017.

In addition to Ms Tseng, there are two new faces who made menstrual cup became legal in Taiwan: Wen-Fei Shih and Yuna-Yi Chen. Ms Shih wrote nearly 200 pages of research on the Taiwan Tampon Network Community. She was the proposer of the petition "legal online shopping of menstrual cups" on National Development Council's online public policy civic participation platform. Ms Chen was one of the most experienced menstrual cup users in Taiwan, who participated in the early development of "Formoonsas Cup", is also the designer of the product. This design case brought her two international design award: Good Design of Japan and iF of Germany.

On Aug.15th 2018, Ms Shih and Ms Chen released the first period panties: "MOOND." The presale of "MOOND" was sold out the first limited order of 3,500 pieces for US\$100,000 in three days. They also used a non-traditional form to metaphor the condition of women during period. "BLOODY!!!! BLOODY!!!! BLOODY!!!! MOOND!!!! MOOND!!!!" The heavy metal shout for angry of menstrual went viral for 1 millions views in just a few days.

Today, this user-initiated revolution is growing rapidly. The tampons jumped from 2 SKUs of 1 brand to 36 SKUs of 6 brands. Formoonsa Cup has launched the second generation in March this year. The MOOND period panties was officially launched this year and delivered to all drug store in Taiwan. It takes a long journey but all the users are still on the way to pursue a more comfortable and unconscious period. Cheers!

Period Poverty to Period Positivity: A Strategic Approach

Chella Quint, #periodpositive, United Kingdom

Many interventions into period poverty have provided short term solutions. This poster will share preliminary outcomes of a pilot working with a holistic approach that uses detailed diagnostic surveys designed to better pinpoint the cause and reach of the region or organisation's period poverty threat. Solutions may or may not include product provision, but where that is included, strategic deployment of these interventions is tracked and monitored, and money and resources shared proportionally between product provision and education/training, and between disposable and reusable products. Analysis of quantifiable measures such as grades and attendance as well as self-assessed confidence and knowledge will be shared. The poster will conclude with successful and unsuccessful outcomes and recommendations for future practice.

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Public Health Advocacy as an Undergraduate: Lessons Learned

Diya Khullar, Northeastern University, United States

In research of any kind, we tend to emphasize outcomes, quantitative and qualitative alike. A major component that is often overlooked, especially within public health research and advocacy, is the process toward these outcomes itself. This poster will detail the challenges faced in implementing free menstrual products initiatives as an 18-20-year-old undergraduate student, the nonlinear path to expansion of these initiatives, and lessons learned regarding advocacy in public health.

I began in 2016, inspired by news of a free menstrual products initiative at Brown University. A need for accessibility across genders and socioeconomic boundaries was demonstrated to me, motivating me to address this need within my own institution. As I soon learned, the primary undertaking I faced was not, in fact, resistance to my initial proposition— instead, enforcement and evaluation of the project proved to demand much more attention. Quality held utmost importance as I sought brands that people could use comfortably, and ensured that our 86 gender-neutral bathrooms were fitted with dispensers to secure access for all. Still, I observed that maintenance of sufficient stock was lagging, with dispensers around campus being emptied far too often. This is where I learned the value of polite persistence— as women, particularly young women, many of us fear following up on our requests “too much”, but cultivating a balance between assertiveness and affability is vital to advancing our projects and careers. Equally important in the future is impact evaluation, which can be accomplished through a myriad of methods, quantitatively and qualitatively.

While the catalyst to any novel venture is a question or need shared by many, the bystander effect appears to pervade the public health realm more than anticipated. A crucial tool for me was the simple act of asking, whether this was reaching out to the university I read about on the news, meeting with my campus facilities director, or emailing my alma mater high school for a conversation surrounding my proposal. The most positive outcomes were policy changes, sample concept models, and additions to my social network, while the most negative outcome was merely an ignored email. Just as valuable in my campaign was the notion of depth versus breadth; while I wanted free menstrual products in all public restrooms in addition to inclusive sex education across schools, I found that directing my passion toward a single cause in a specific region substantiated much more solid results in regards to long-term, sustainable change.

Recently, New York state mandated a policy ordering all public schools grades 6-12 to provide free menstrual products in their bathrooms. Where I have successfully converted my childhood high school and its four accompanying schools to free providers of menstrual products, I reached a point of stagnancy at my hometown high school. While

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piloting the same policy on a microscopic level strengthened my awareness of the overarching process, I look to local government to bring this into practice at the state level. As I move forward, I strive to conduct focused, efficient action and impact evaluation.

Sowing Menstrual Blood as an Act of Political Empowerment

Laura Contreras Aristizábal, Medicina de Mujer, Columbia

Menstrual Blood besides having proteins has an energetic load of woman's emotional information and in most cases of her and her female descent. Sowing menstrual blood has ceased to be a taboo and is becoming an act of woman empowerment: 1) Relieve the disgust of menstrual blood, 2) Menstrual blood is no longer considered a waste and is preferred to collect it and offer it to the land as a fertilizer, 3) Promotes lovely and sustainable acts with Mother Earth, 4) Recognize this blood as a blood of life, not just for its protein content but also for its energetic power of this endometrial tissue, designed for feeding an embryo. 5) Encourages the consciousness about menstrual health, because the act of collect it allows observing carefully and identify any anomaly, 6) The ritual act of offering the blood allows to transmute the emotion experienced during the last menstrual cycle and also to sow resolutions and intentions, 7) Allows the woman to activate her intuition, to make the connection with the uterus stronger and learn to heal on a physical and emotional level.

The information described above is based on testimonies of women who have been sowing their menstrual blood for more than a year and find notable changes in the relation with her selves, perceiving an increase in self-esteem, security and confidence that are reflected on their daily tasks.

The poster proposal pretends to demonstrate how sowing menstruation is an act of political empowerment, based on info graphics that shows how menstrual blood has a high symbolic content, which allows the woman with her own menstruation do psychomagic acts that empower her recognizing her full potential as a woman.

Teaching Menstrual Health and Encouraging Activism in an Interdisciplinary Women's Health Course: Lessons from 20 Years of Women's Health at a Liberal Arts College

Suzanne Cox, Beloit College, United States; Laura Parmentier

For the past 20 years, we have taught an innovative, interdisciplinary course on women's health. The course was initially conceptualized as a science-based course that emphasized guided inquiry and hands-on activities so as to fully engage the predominantly woman-identified student members enrolled in the course. A focus on activism and community-based learning helped to expand our pedagogical approach. Integrating our mutual

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interests in women's studies and feminism along with our training in natural and social sciences, we developed a women's health course that aims to equip students—particularly women—with the confidence and skills to pose questions in both laboratory and research settings. Central to this course has been an explicit focus on different epistemological viewpoints and how we can participate as a class and community to advance knowledge. Combining lectures, class discussions, “quantitative” lab work, “qualitative” field research, workshops, and community activism, we explore multiple “ways of knowing” women's health and approaches to healing.

Our collaborative pedagogy emphasizes a true team teaching approach, with responsibilities shared by the two of us. We are both present for all classes and labs and we both review and provide feedback on student written work and presentations. While one of us takes on lab preparation and technical explanation of procedures, the other oversees more qualitative interview field research and student community-based activist projects. Our interdisciplinary approach (from the disciplines of biochemistry, chemistry, psychology, and women's studies) helps students better understand the multiple ways in which women's health is constructed and deconstructed. Our specific disciplinary expertises complement each other both in discussions in the classroom and in out-of-classroom discussions with students about their learning process, field research, and activist projects.

A main feature of the course and one of the highlighted laboratory activities is an “Experimental Design” lab activity during which students test and design menstrual products using a variety of raw materials (cotton, rayon, sphagnum moss, sponge, sodium polyacrylate, etc.). This activity combines ideas about engineering and product design while assigned readings and themes for discussion encourage students to examine preconceptions and stigmas about menstruation and menstrual blood, education about anatomy and menstrual care, health and environmental concerns about menstrual products, and menstrual activism.

The proposed poster will a) provide a historical context of the development of the course over the past 20 years (in light of changes in women's and gender studies, college student body demographics, and the growing body of knowledge and work in menstrual cycle research), b) share an innovative “Menstrual Product Design” lab, and c) engage SMCR conference participants in discussion about course design and activities.

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The Shadow Side of our Reproductive Rights (and the impact on our health and fertility)

Jamie Renee Lashbrook, Arvigo Techniques of Maya Abdominal Therapy, United States

We are not free if the Earth is suffering
Reproductive Rights structured after wounded patriarchal design.
It's not about us
"Having it all", privilege and patriarchy
Fertility, soul codes and trauma
Fertility and the Earth

Solutions:

Restorative Reproductive Rights and a call to action.
The necessity of ritual.
Reforming education and mandating full disclosure of our current reproductive technologies in Modernized health.
Women's wisdom as a recognized educational pathway.
Parenting structures.

I introduce these underlying shadows and their solutions to begin a larger movement and healing journey of awareness.

War on Period Pain - Women Health Wearables and Smart Textile Solutions as Period Pain Relief Methods

Anna Zsófia Kormos, Moholy-Nagy University of Art and Design, Hungary

Today Women Health Wearables are an emerging trend, but it's still a challenge for designers and users to find the best way to integrate the smoothest way to the body. My fashion designer background inspired me to research possible aesthetical and practical wearable solutions, while my sensitivity for social and female issues turned me in the direction of giving additional values to clothing. Period pain has different effects on the body, from the unbearable pains, cramps throughout to psychological pain and to shrinking self-confidence. Clothing is culturally and historically known as safe space and second layer on the body. In the future it should be a more important factor to maintain a safe environment and give new possibilities to humanity. The purpose of my research was to find internal and external solutions to the female body as, for example, to heal PMS, to block period pain without medicines and to give a positive physical appearance. In my interdisciplinary doctoral research I work together with medical experts and technology advisers. Somaesthetics places a value on the physical cultivation of the body, I find it relevant to understand a new way of mindful wearable technology devices. Learning from

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technological references, advanced built-in technologies to natural fibers and smart textiles, my future goal is to develop the first prototype.

What are the Best Practices for an NGO Working on Menstrual Health issues in Rajasthan India to Work with Partner Institutions such as Governments or Global Corporations?

Leila Owens, Princeton University, United States; Jatan Sansthan, India

This poster explores the impact, and means, of effective implementation of MHM trainings for men as well as workshops where men learn to sew reusable pads. The need for such trainings as well as their utility when compared to similar trainings aimed at women will also be analyzed through the lens of UGER's work in Northern India.

UGER is a project created in 2011 by Jatan Sansthan, a grassroots NGO based in Udaipur, India. UGER seeks to abolish the stigma surrounding menstruation and foster healthy menstruation habits in women and adolescent girls throughout India. Since its inception, UGER has been running sessions for women and frequently has had events for the community as a whole. In the past three years alone, there have been more than 100 workshops run. In addition, for the past five years, UGER has implemented various MHM trainings aimed specifically at men.

Analysed reflections from male MHM training participants, the women in their lives, and UGER staff form the argument that the inclusion of men in menstrual advocacy is necessary for true societal change.

"What gets measured gets done" – MHM as Part of the Global WASH in Schools (WinS) Monitoring Framework

Jan-Christoph Schlenk, Katja Brama, Bella Monse, Arne Panesar, GIZ, Germany

Drawing on personal interviews of 10 teenagers who have lived in the US, India, or both, as well as my personal experience as an American teenager living with an Indian family and working on menstrual health advocacy at an NGO in India for 9 months, I explore how culture influences the shared experience of menstruating. This topic is considered through a series of short case studies, supplemented by my own observations and analysis. I compare and contrast menstrual education, common practices, stigmas and misconceptions experienced by adolescents in the US and India. A number of topics are covered ranging from the popularity of tampons in the US contrasted to their scarcity in India, the different strategies cultures take for managing disposable pad waste and dealing with cramps, all the way to which places are banned during menstruation and school attendance during this time.

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Young Women's Attitudes Towards Genitals: Appearance, Function, Touch and Shame

Cynthia Sopko, Samantha Kovach, and Maureen McHugh, Indiana University of Pennsylvania, United States.

Women are socialized to regard physical appearance as a fundamental component of their sexuality, as well as their more general self-worth. Women are pressured to conform to ideal and unattainable standards. When women feel they fall short of societal expectations, they may experience shame, feelings of inadequacy and depression. Both pornography and mainstream (sexually explicit) media romanticize and idealize a finite set of genital features (Schick, Rima & Calabrese, 2010). Pornographic images present limited variations in regards to size, shape, and color of women's vulvas across the general population (Lloyd, Crouch, Mino, Liao, & Creighton, 2005). Such limited media representations enhance the likelihood that women will develop negative feelings about their genital appearance (Braun, 2005). The normalization of pubic hair removal is also communicated by mainstream pornography, which typically depicts hairless genitals as the "industry standard" for beauty (Cokal, 2007). Hairless vulvas appear as pervasively "normal" in pornography, particularly in the past decade (Rodrigues, 2012; Schick, Rima, & Calabrese, 2011). When women compare themselves to idealized images, it may result in shame attached to their genitals, and negatively impact the way in which they see themselves sexually.

Fahs (2014) has found that women's feelings about their vulvas and vaginas often revealed intense underlying anxiety about normality, adherence to social rules, and avoidance of being "gross," "disgusting," or abject. Fahs argued that women have been swayed by advertisements to apply topical creams and sprays to enhance the smell of their genitals, and to shave their genitals (Fahs, 2014). Women have also experienced pressure to purchase genital cosmetic surgeries to make their genitals more aesthetically pleasing to others (Tiefer, 2008; Braun, 2010; Braun & Tiefer, 2009).

Genital shame or dissatisfaction may have implications for women's overall sexual experience as well. If a woman is unsatisfied by her genitals, she may feel inadequate when reviewing her own sexual performance. Previous research indicated that women who experience more body shame experience lower levels of sexual activity and higher levels of sexual risk, missing out on the intimacy and connection of a sexual relationship (Deborah Schooler, L. Monique Ward, Ann Merriwether & Allison S. Caruthers, 2005). Greater dissatisfaction with genital appearance was also associated with higher genital image self-consciousness during physical intimacy, which, in turn, was associated with lower sexual esteem, sexual satisfaction, and motivation to avoid risky sexual behavior. (Schick, Calabrese, Etc)

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Women's attitudes toward their genitals' appearance and function are examined in this research, along with genital shame. 100 young college women completed a series of measures of genital attitudes, the Objectified Body Consciousness Scale, and a Sexual Satisfaction Questionnaire. The research indicated several dimensions of women's attitudes towards their genitals. Negative genital attitudes and shame were not strongly related to other body attitudes or body shame. Negative genital attitudes and shame were negatively correlated with respondents' sexual satisfaction.

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8:00 am Bemis Lounge **Check-In & Breakfast Buffet**

8:15 am – 8:45 am Bemis Hall **Book Slam**

Hear about the latest published menstrual related research, poetry and literature at the SMCR *Book Slam*. What is a Book Slam? It's short sharp book talks from authors and editors about their latest books.

9:00 pm – 9:45 pm Bemis Hall **Keynote Presentation**
Chris Bobel

What We Talk About When We Talk About Menstruation

In this talk, Bobel reflects on the burgeoning global health movement, taking stock of its priorities, assumptions and blind spots. In what ways—in spite of tremendous progress in centering attention on menstruation-- is the language of menstruation still bounded by the vocabulary of sexism and the grammars of capitalism and neocolonialism? Drawing on her 'invested critique' of increasing efforts to promote 'menstrual hygiene management' (MHM) in the Global South, Bobel explores how these interventions often rely upon weak evidence and spectacularized representations to promote a consumerist agenda that privileges Western norms of embodiment. Menstruation is now "managed" through personal, not systematic, change, and the core problem of menstrual stigma is accommodated more than it is resisted.

9:45 am – 10:30am Bemis Hall **Panel**

The Politics of Data: Parsing the Promises and Perils of Evidence-driven Menstrual Cycle Studies

Data serves as evidence. Data informs what we know about the parameters of the average menstrual cycle. Data informs policy and program decisions. Data can point us to neglected issues and populations and help us determine which priorities to set. But capturing and analyzing data is a complicated and often fraught process especially now as the menstrual cycle is rapidly gaining importance in development, public health and policy circles.

The evidence base for what policies and programming we need is not fully established. Many statistics such as the average age of menarche have not been updated for decades. In some countries, it has never been established at all. Health conditions such as endometriosis are understudied due to a lack of data. Data on marginalized population groups is scarce. Many organizations turn to figures that have no basis in any studies such the alleged '1 in 10 girls in Africa miss school due to menstruation.' The line between fact and fiction seems to be growing fuzzier by the day, and misinformation refuses to die.

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Moderator: Inga Winkler, Director, Menstrual Health and Gender Justice Working Group at the Center for the Study of Social Difference; Lecturer in the Institute for the Study of Human Rights; Director of Undergraduate Studies for the Human Rights Program, Columbia University.

Panel Members:

Noemie Elhadad, Associate Professor of Biomedical Informatics, Columbia University.

Lauren Houghton, Assistant Professor of Epidemiology, Mailman School of Public Health, Columbia University

Caitlin Gruer, Senior Project Coordinator, Mailman School of Public Health, Columbia University

Vanessa Paranjothy, Co-founder of Freedom Cups (Singapore), Obama Foundation Scholar, Columbia University

10:30 am – 11:00 am

Break

11:00 am – 12:30 am

Tutt Science Bldg (TSB)

Concurrent Sessions (CS) #1

CS 1.1 Transgender Menstruation TSB Rm. 218

Different menstruators

Rajasi Kulkarni Diwakar, Green the Red, India; Yatin Diwakar

Background: There are women different than mainstream women who face discrimination, may not have access to facilities, and may also lack awareness about simple things. Menstruation is one subject where intervention may be necessary. This exploratory study aims to understand how their menstruation is different and issues faced during menstruation. The study will assist in finding what support such women need and what interventions could be planned.

Methods: The study included semi-structured interviews of three groups- female sex workers, women with disabilities, and queer people across three Indian cities. Convenient sampling was done as these groups are not readily accessible. Amongst women with disabilities, visually impaired, physically disabled, and mentally disabled women were interviewed. During interaction, details on menarche, knowledge about menstruation, reaction to it, how does it affect their daily routine and how they deal with it, and what support they need was discussed.

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Findings: Most queer people found menstruation unpleasant as they don't identify themselves as woman. Unlike queer people, FSW accept menstruation but spend a lot on painkillers and alcohol to keep working; painful periods affects their work too. Caretakers have to keep reminding mentally disabled women to change and dispose pads. So they prefer operating severely retarded women. Very few people knew about menstruation before it started.

Interpretation: The insights obtained from this study and similar expanded studies in future will help in better counselling of these different women and at the same time provide directives for policy recommendation and programmatic interventions. Queer people can be counselled to accept their body, disabled women could be trained to care for themselves during menstruation while FSW need to be provided with alternate income to allow them to rest during periods. The study was limited to three cities, sample size is small and in-depth interviews weren't possible, limiting generalisability of the findings. More different women and their caretakers should be contacted for further insights. As these women take time to open up, many difficulties they face might not be captured. Similar study with women in jail was also planned but couldn't be executed due to delays in obtaining permission.

Trans-forming Understandings of Menstruation: The Experiences of Trans and Non-Binary Individuals

Decker Dunlop, Arizona State University, United States; Claire Halling

There is a dearth of literature addressing trans attitudes regarding menstruation; the absence of literature addressing trans people's experiences with menstruation limits activist interventions, educational approaches and our understanding of trans people's needs regarding menstruation. We contributed to addressing this absence by conducting qualitative interviews with 20 trans individuals assigned female at birth, trans individuals assigned male at birth, and non-binary individuals in order to assess trans attitudes towards menstruation generally, as well as personal experiences with menstruation. We included interviewees of all genders in order to fully investigate the spectrum of trans experiences with menstruation. Participants were recruited through purposive sampling; fliers were distributed to queer and trans community centers and providers in order to incorporate perspectives reflective of the metro Phoenix trans community. Our paper centers trans people's own words and areas of concern highlighted by interviewees, such as the need for intervention in cultural attitudes and the organization of public spaces. Implications for trans and non-binary menstrual health, bathroom policies and practices, and activist interventions are highlighted at the end of this talk.

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Reproductive Health Needs and Preferred Provider Language in a National Sample of Transmasculine Individuals

Rachel A Fikslin, City University of New York, United States; Augustus Klein, Sarit A. Golub

Background: Transgender men and transmasculine individuals (i.e., individuals who were assigned female at birth and identify along the transmasculine spectrum), have been largely left out of research on sexual and reproductive health. Transgender men experience health disparities in their sexual and reproductive health care needs such as being at increased risk for HIV and having low rates of pap smears and gynecological exams. This is due to both general barriers to care such as financial constraints and experiences of discrimination, but also due to experiences of gender dysphoria and a lack of inclusive gynecological care (Grant et al, 2010). It is important to increase our knowledge of the primary sexual and reproductive health concerns of transmasculine individuals and our understanding of preferred provider language in order to improve health care engagement and experiences among this population.

Method: A national sample of 2119 transmasculine individuals completed a 45-minute online survey about their sexual and reproductive health needs and experiences, health care access, and preferred language. The online survey was advertised on social media platforms (i.e., Facebook, Twitter, Tumblr), via e-mail to transgender community leaders, and through snowball sampling. One third of the sample (32%) identified as non-binary. Age ranged from 18 to 69 (M=27.88; SD=8.92). Forty-three percent had an income of less than \$25,000. Most people in the sample were white (70%), 8% were Black, 10% were Latinx/Hispanic, 4% were Asian or Pacific Islander, and 8% were multiracial.

Results: The present analysis focused on survey questions about health care access and reproductive health. Eighty percent of the sample indicated that they had a regular place to go for health care. Of these, 37% said they went to an LGBTQ health center. When asked about their top three biggest concerns when thinking about their body, 27% indicated menstruation, 24% indicated pelvic pain/cramping, 10% indicated viability of reproductive organs, and 5% indicated spotting. Fifty-nine percent indicated that a provider asked about menstruation or spotting within the last year and 48% percent indicated that a provider had never asked about their reproductive goals. The top preferred words for menstruation were "period," "menstruation," and "cycle." The top preferred phrase for gynecological exams was "pelvic exam." Most participants preferred gender neutral terminology for their chest, and anatomical language for their uterus and ovaries. Language preferences for the vagina and clitoris varied based on binary versus non-binary gender identity and type of gender-affirming treatments/surgeries.

Implications: Providers should ask for patient preferred language for their body parts/processes and avoid assumptions surrounding reproductive health needs.

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Enhancing our understanding of the reproductive health needs and language preferences of transmasculine individuals has the potential to improve health provider practice, which can in turn improve health care experiences and outcomes.

Degendering Menstruation: Insights from a Swedish Context

Klara Rydström, MENSEN - forum för menstruation, Sweden

Menstruation as phenomena is commonly linked to womanhood and menstruating is generally perceived as an experience of women. The presentation "Degendering Menstruation: Insights from a Swedish Context" challenges this through its focus on trans people's experiences with menstruation. Drawing on material from qualitative interviews, I will provide an overview of menstrual experiences among Swedish trans people. Emphasis will be on the necessity, for us as menstrual scholars and activists, to acknowledge the multiplicity of menstrual experiences there are – not only between menstruators with different gender identities, but likewise within the group of trans people. In the second part of the presentation, I will demonstrate that intra-actions of gender norms and menstrual norms materialize the idea of cis menstruators as the normative menstruator. As a result, trans menstruators appear as the Other. More specifically, public bathrooms, the design of menstrual products, menstrual-related healthcare and menstrual activism are areas that will be problematized as contributing to such processes of Othering in Sweden. The aim of the presentation is to share insights and knowledges that might be applicable to similar projects in geographical contexts other than the Swedish and, as such, contribute to further degendering of menstruation as phenomena.

CS 1.2 Arts-Based Menstrual Practices TSB Rm. 214

Performing Periods: Challenging Menstrual Normativity through Art Practice

Bee Hughes, Liverpool John Moores University, United Kingdom

The paper discusses our interdisciplinary research, combining art practice with socio-cultural analysis to develop artworks as spaces of resistance to the social stigma still often associated with menstruating. Menstrual art is often read as celebratory. However, this can perpetuate essentialist readings and maintain rigid gender stereotypes. Artworks have greater power if understood as revelatory, opening spaces of resistance to expected norms and behaviours. Artists present their blood, bodies, and experiences on their own terms, rather than those given to us by society.

Bee's artmaking practice is an exploration of the continued rippling effect of encountering menstruation as stuck between the medical sphere and the languages of advertising built upon maintaining the secrecy of the event of menstruation. The presentation outlines her

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practice-led methods, centring upon the project *Cycles* (2016-17). This utilised expanded printmaking to document how Bee deployed her body in performative gestures illustrating a menstrual cycle that doesn't conform to normative notions of menstruation. We also present collaborative soundworks that appropriate and re-present online medical advice about menstruation. This is contextualised with examples of art that engages with menstruation, including work from Bee and Kay's recent *Periodical* (2018) exhibition, and adverts from UK magazines from LJMUs Femorabilia Archive Collection.

Singing the Menstrual Blues

David Linton, Marymount Manhattan College, United States

An examination of music history yields few mentions of menstruation. Whether it be classical opera, folk music or the popular standards of Broadway, menstruation was not in the repertoire. Neither Frank Sinatra nor Peggy Lee sang of the period (unless one thinks that the latter's "Fever" had something to do with hot flashes). However, just as the barriers have come down in the realm of film, television, literature, and casual conversation, modern audiences bandy around the initials PMS and even sing about it. This presentation identifies significant trends in the appearance of menstrual melodies with particular attention to differences in perception based on the gender identity of the performer of the song. The music is discussed within a historical context and amply illustrated with samples from recorded versions.

Page to Stage: Translating, and Re-translating the Show, "You Menstrual Me"

Emily Graves, Louisiana State University, United States

In April, 2017 I directed a six-person performance that ciphered menstruation through the genre of circus performance. I proposed the show to Louisiana State University's HopKins Black Box Theatre administrative board nearly one year before. I had been gestating this show for years.

In its conception, the show, titled, "You Menstrual Me," translates menstruation across genres of representation in order to de-familiarize received ideas about menstruation. To take one example, the larger-than-life style of the circus performance tradition transposes the life-sized, everyday menstrual performances to which we are habituated. The circus' gigantic scale challenges value claims typically imposed on the topic.

The unlikely pairing is not a one-way street: the topic of menstruation transforms the genre of circus in kind. For example, by situating histories of highly skilled circus performances against the everyday occurrence of menstruation, histories of expertise expand wide enough to include menstrual histories as expert as well. Further, by offering audiences the taboo topic of menstruation by means of a popular medium, "You Menstrual Me" transports audiences to their childhood days of sticky fingers, popcorn,

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wide eyes. Transfixing audiences with low key magic is part of the strategy of the show to disarm any antagonistic stance audiences carry with regard to the topic.

I propose offering a “page to stage” version of this show to diagram the process of translation that “You Menstrual Me” underwent from idea to written medium, written medium to performed medium, live performance to video. I will discuss the concept of the show, and articulate the proverbial ridges between processes of conceiving, writing, and staging, and video editing. I will use the script, excerpts of a video from the show, and still photos. If, as painter Agnes Martin writes, “art is the concrete representation of our most subtle feelings,” then this page to stage presentation will concretize the subtleties on the way to representation.

Myth-Busting, Modernity and Saviorism in Representations of Menstrual Beliefs and Practices in the Popular Media

Inga T. Winkler, Columbia University & Chris Bobel, University of Massachusetts, United States

This paper examines popular discourses that address cultural and religious beliefs and practices related to menstruation around the world through a textual analysis of 84 ‘myth busting’ articles published in a wide variety of popular online media. While the articles aim to correct misinformation, our analysis reveals that many reflect the neocolonial trinity of victim, savage and savior that cast the Global North as progressive and the Global South as ‘regressive’. Many lapse into sensationalized or patronizing accounts of menstrual beliefs and practices that disregard and even ridicule cultural and religious traditions, especially those currently embraced in countries in the Global South. Assumptions of Western superiority, including the untroubled privileging of modernity, is contrasted with ‘backward’ tradition. This discursive formulation metaphorically casts menstruators as passive ‘victims’ of their ‘savage’ culture in need of ‘saviors’ who will alleviate their suffering through an assertion of authority over women and girls’ lives rather than acknowledging women and girls’ agency and seeking to understand the complex and diverse meanings of menstrual practices.

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CS 1.3 Menstruation & Education TSB Rm. 221

What Do College Students Know about Menstruation and Ovulation?

Betty Dorr, Fort Lewis University, United States

An anonymous survey on menstruation was given to a small sample of men and women at college in the Southwest United States every year from 1995 to 2016. The survey asked basic demographic questions, it asked if participants were using hormone based contraceptives, it asked about perceptions and symptoms of ovulation and it also asked participants to define ovulation and menstruation. The research project was continuously approved by the appropriate IRB. Students were selected from undergraduate psychology and math classes. The survey results were used in each class to initiate a review of the human reproductive cycle or statistical summary. There were 488 students who completed the survey between 1995 and 2016. This resulted in a large data set and a pattern of responses that was fairly stable across years. Of the respondents 328 (67.28%) self-identified as female and 160 (37.28%) self-identified as male. Unfortunately the responses to the survey suggest that young adults in college do not understand ovulation and menstruation very well. The data indicates that few college age men and women understand symptoms that may be associated with ovulation. Many respondents reported symptoms of menstruation (bleeding, cramps, etc.) when they were asked to identify symptoms of ovulation. Efforts to define menstruation and ovulation in mutually exclusive terms were also problematic for both men and women. The most common response was to say that ovulation and menstruation are different things and then omit further discrimination between the two. Many women who self-reported using hormonally based forms of contraceptives reported that they continue to ovulate while using the contraceptive. The fact that this trend did not differ much across more than 20 years indicates that college age women may have been consistent in not understanding the purpose of the contraceptive product they were using. Many women indicated that they could regularly approximate their time of ovulation within days. This pattern was stable across groups of women who did (and did not) use hormone based contraceptives. The similarity between women who reportedly did (and did not) use hormone based contraceptives suggests misunderstanding of the relationship between these contraceptives and ovulation by many women. The confusion of menstruation and ovulation among survey respondents may be due to a lack of emphasis or detail in sex education programs or a lack of sex education itself. Confusion about menstruation and ovulation may be exacerbated by ongoing social stigma. It might be useful to explore what aspects of contraception are reviewed in sexuality education programs. Consumers and students may be educated on the efficacy of contraceptive products rather than how the products influence their bodies. If time allows the survey will be reviewed as a pedagogical tool for various psychology and math classes.

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Attitudes Towards Menstruation and Self-objectification Among a Group of Emerging and Early Adult Women at a South African University

Bronwen Pietersen, Independent Researcher, South Africa

Menstruation is a natural phenomenon that most women experience. Despite being a sign of sexual maturation, in many contexts menstruation is socially constructed and stigmatised as a taboo. Although some cultures celebrate menstruation as a rite of passage, many cultures tend to hold negative attitudes towards and stigmatise menstruation. Consequently, menstrual stigma often compels women to conceal their menstrual status and women tend to internalise the outsider's perspective about their bodies. This self-objectification, characterised by body surveillance and body shame, could have adverse physiological and psychological consequences for young women.

The aim of this study was to explore age differences of female students' attitudes towards menstruation and their evaluation of self and their bodies, at a South African university. This study was guided by the biopsychosocial model, feminist and objectification theory to understand the complexity of women's attitudes towards menstruation and the contextual factors influencing these attitudes. I used convenience sampling to recruit the 1517 female participants, aged 18 to 36 years. I employed a cross-sectional, on-line survey, using The Beliefs about and Attitudes Toward Menstruation questionnaire, the Body Surveillance and Body Shame subscales of the Objectified Body Consciousness Scale and the Rosenberg Self-Esteem Scale, to collect the data.

Analysis of the data revealed that compared to early adult women (24 to 36 years), emerging adult women (18 to 23 years) were more likely to believe that menstruation should be kept a secret and had proscriptions and prescriptions regarding menstruation. Emerging adult women were also more likely than early adult women to engage in body surveillance and body shame. There were no significant age differences found for self-esteem between these groups.

The findings suggest that age tends to be a protective factor against menstrual secrecy, taboos about menstruation, and self-objectification. Multi-sectoral, psycho-education interventions should be implemented to address the taboos, secrecy and shame surrounding menstruation and women's bodies.

Digital High School Health Films: New Approaches to Undergraduate Teaching

Saniya Lee Ghanoui, University of Illinois, United States

SourceLab is a digital humanities initiative at the University of Illinois at Urbana-Champaign that publishes editions on different primary sources. Several years ago I proposed that SourceLab do an edition on The Story of Menstruation. In this paper I examine how SourceLab researched and published on the 1946 film The Story of

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Menstruation, what students learned throughout the process, and how this SourceLab edition has been used in the classroom. I bring about questions, ideally for further discussion, on the necessity for more online editions of menstrual historical material that can aid teachers and researchers. Through an undergraduate course, SourceLab trains students in both the historical and contemporary practice of documentary editing, and I highlight the need for menstrual digital material as a way of teaching history, gender and sexuality studies, and digital humanities.

A PERIODic review of Menstrual Health Education

Mike Armour, Kelly Parry, Christina Curry, Kath Holmes, Caroline Smith, Tania Ferfolja, Freya Macmillan, Western Sydney University, Australia

Primary dysmenorrhea or period pain can have a detrimental effect on a young person's quality of life, impacting on school attendance, school performance, including concentration in class; as well as participation in sport, social activities and sleep. Although period pain is common, especially amongst adolescents with around 90% of Australian adolescents experiencing menstrual pain, it is by no means normal.

A recent women's health survey asked 5,000 Australian women aged 14 to 25 how they learned about periods and treated the pain and symptoms that came with them. Almost three quarters of women thought pain during their period was perfectly normal. The survey revealed that young women are taking pain medication incorrectly for period pain they feel is 'normal' and were unfamiliar with other self-care options. Most young women were educating themselves about period pain and other symptoms through internet searches using Google, although the majority of respondents did remember learning about menstruating in health education classes in school.

This presentation will consider the results of this survey and explore how we can improve menstrual health literacy and the teaching of menstrual health education within schools. Specific consideration will be given to four self-care options, offering relief from period pain. An online 'Menstruation Matters' resource will be explored, which provides young women with accurate, up to date and research informed information about menstruation, dysmenorrhea and what is and isn't 'normal' for periods, including when to consult a doctor about problematic symptoms.

CS 1.4 Menstrual Shame: Does Talking about it make it Worse? TSB Rm. 223

Discussant: Ingrid Johnston

Menstruation is a source of social stigma for women (Johnston Robledo & Chrisler, 2011); this stigma is related to our cultural practices of secrecy; keeping menstruation a secret supports views of menstruation as dirty (Martin, 1996). In a series of studies, we examine

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the connection between negative attitudes and shame associated with menstruation, and women's conversations about menstruation.

We developed a measure of menstrual moaning, i.e. negative woman-to-woman talk about the menstrual cycle, to examine menstrual conversations as an attempt of young women to resist shame. Our research on menstrual moaning utilized the paradigm developed for the study of fat talk. Like fat talk, menstrual moaning is theorized as an attempt by women to develop shame resilience through connections to other women. However, like fat talk, the resulting negative conversations also could perpetuate a negative attitude toward women's bodily experience of menstruation. Based on young women's reports of menstrual-related conversations we developed 9 instances of menstrual conversations and asked respondents to rate them as typical of their conversations. We examined women's participation in menstrual moaning in relation to attitudes towards menstruation. We subsequently developed a measure of menstrual shame, and in a second study we examined the relation of menstrual shame to negative statements about menstruation, and also to more positive dyadic interactions around menstruation.

In the symposium we examine the practice of menstrual moaning and we also explore the potential of more positive interactions regarding menstruation. We review the effects of participating in a workshop designed to reduce negativity and menstrual shame.

A study of menstrual moaning

Maureen McHugh, Indiana University of Pennsylvania, United States

In a study employing a measure of menstrual moaning, women's participation in menstrual moaning was examined in relation to their scores on the Beliefs About and Attitudes toward Menstruation Scale (Marvan, Ramirez-Esparza, Cortes-Iniestra, & Chrisler, 2006) and their reported levels of body shame and body surveillance using the Objectified Body Consciousness Scale (Hyde & McKinney). The expected correlation between negative attitudes about menstruation, and engaging in menstrual moaning was found. However, there was no connection between respondents' participation in negative talk about menstruation and body shame as measured by the OBCS.

The Theory and Measurement of Menstrual Shame

Melissa Muelman

The presenter describes the development of a Menstrual Shame scale. Initially reviewing Brene Brown's understanding of women's shame, she argues that requiring girls and women to maintain secrecy and silence regarding menstruation contributes to menstrual shame. Talking about the symptoms, and discomfort associated with the menstrual cycle

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may represent women's use of connection and community to resist the culturally imposed secrecy and silence. However, such menstrual moaning, like fat talk, may have deleterious effects. Menstrual moaning may reify the androcentric and medicalized construction of menstruation as problematic, pathological, and painful. The importance of a measure of menstrual shame is emphasized.

Positive Dyadic Interactions Regarding Menstruation and Menstrual Shame

Cynthia Sopko

In a second study we examined the relation between negative menstrual talk, Menstrual Moaning, and Menstrual Shame and examined the relation between more positive conversations regarding menstruation and menstrual shame. A measure of positive dyadic interactions regarding menstruation was developed for this study. We predicted that negative menstrual statements would correlate with menstrual shame, but positive dyadic interactions would not. The research confirmed our hypotheses. The research suggests that sharing menstrual experiences with others does not create menstrual shame when the interaction is positive.

Facilitating Shame Resilience in Young Women

Kathleen Di Mattia

The final presenter describes her workshop designed to increase young women's shame resilience to menstrual shame because menstrual shame has important implications for girls' development, sexuality, and overall well-being. The workshop utilized elements of the body positivity movement and the curriculum aimed to increase shame resilience developed by Brown. Brown's approach includes four primary techniques (acknowledged vulnerability, critical awareness, mutually empathic relationships, and speaking shame) to provide college age women with more tools to combat the negative effects of shame. Brown's approach was modified to address menstruation. The workshop id described, and evidence for the effectiveness of exercises to reduce menstrual negativity and shame is reviewed.

12:30 pm – 2:30 pm

Bemis Hall

PLENARY & BUFFET LUNCH

Honoring Margaret Atwood

Honoring Margaret Atwood, author of *The Handmaid's Tale*, for Making Menstruation Matter.

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Mentoring Menstrual Researchers

Joan Chrisler and colleagues

Joan's former students and protégés describe the importance of her mentoring to their careers as faculty, scholars, and mentors themselves. They reflect on the role Joan played in introducing them to SMCR, the development of their own leadership, and the impact that mentoring can have on a small organization.

2:30 pm – 4:00 pm

Tutt Science Bldg (TSB)

Concurrent Sessions (CS) #2

CS 2.1 Menstrual Disorders TSB Rm. 214

The Wandering Womb: Lasting Implications of Hysteria on Endometriosis

Heather Guidone, Center for Endometriosis Care, United States

Embedded in the centuries-old assertion that the uterus was a nomadic entity wandering about one's body causing hysteria and distress, persistent menstrual misconceptions remain prevalent today. Though medical diagnoses rooted in hysteria have been largely since abandoned, its impact on women's health perseveres, informing and influencing attitudes and treatments - particularly with regard to endometriosis.

Endometriosis is a systemic, inflammatory condition defined by the presence of endometrial-like tissue located in the extra-uterine environment. A debilitating, costly condition linked to significant pain, infertility, dyspareunia and significantly reduced quality of life, the disease is often dismissed simply as 'painful periods,' despite its profound impact on sufferers far and apart from menses. Hysteria and endometriosis continue to be linked through the corporeal uterus as well as by the spirit of hysteria's 'wandering womb' in current disease portrayals. To that end, the condition remains intrinsically tied to psychological profiling, with continued efforts to connect endometriosis to psychosocial disturbances and psychiatric distress - leaving stakeholders frequently under-diagnosed, medicalized, inadequately treated and marginalized.

I will identify and review some of the challenges entrenched in hysteria's legacy, and explore how barriers to best practice can be reduced in part through adoption of early menstrual health education campaigns.

Menstrual Problem Research: Is There a Problem?

Pamela Warner, University of Edinburgh, United Kingdom; A Douglas, RA Parker, L Whitaker, CJ Weir, HOD Critchley

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Background: Menstruation is inevitable for most females, for around 4 decades of lifespan. Experience of menstruation differs between women and, within-woman, across time. Menstruation can have adverse impact on quality-of-life and/or health, if there is any of: severe period pain, excessive volume of menstrual bleeding (HMB), cycle-related symptoms (physical/ emotional).

Findings from research inform understanding of these conditions. Trials of interventions for menstrual problems require reliable and informative assessment of symptoms, before and after treatment, preferably assessment that is relevant and acceptable to participants. Are such assessments available to menstrual researchers?

Method: We have recently completed a 4 year randomised double-blind DexFEM clinical trial [funded by UK MRC (DCS MR/J003611/1)] of a new use of an existing drug, as possible treatment for HMB. Following recommended practice we included laboratory assay estimation of volume of menstrual blood loss (MBL), from collected and submitted used menstrual pads/ tampons (for 2 screening, and last 2 treatment-phase, periods). This MBL assessment is burdensome and off-putting to women, makes participant recruitment difficult, and markedly inflates research costs, even without payment to participants. The primary trial findings (to be mentioned briefly) showed a modest treatment benefit for the highest drug dose (of six) trialled. We also collected a range of subjective assessments, of menstrual loss (absolute, and change from before), and of other aspects of periods. The questions this paper will address are: Was HMB the only or even main problem for participants? Should clinical research into menstrual problems include broader assessment of menstrual problem? Could, should, a future HMB trial eschew laboratory MBL assessment?

Results: Among 107 women (aged 21 to 54 years) seeking clinical care for HMB, and recruited, mean 'measured' screening MBL ranged widely, from 50mL (the threshold for entry) to 677 mL. The majority of women showed marked individual variation in MBL eg discordance between screening MBLs >25% of individual's screening mean. Recruitment Questionnaire responses (5-point scale) revealed that only 55% of participants reported 'losing too much blood' as 'severe' or 'marked problem', whereas 65% did so re 'difficulty preventing accidents', and 74% re periods 'heavier than used to be'. In addition, 61% reported (this degree of) problem re periods 'interrupting daily life', 53% period pain, 52% and 50% cycle-related symptoms (mood, physical). [The presentation will also provide a holistic description of participants' menstrual experience, using principal component scores for responses about problem aspects of periods.] Questionnaire responses to 'losing too much blood' correlated strongly with Screening MBLs ($p < 0.005$). Menstrual diary subjective ratings, of change in blood loss (from before), related to variation in Screening MBLs and to changes in MBL in treatment phase.

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Implications: Most women have no idea what MBL values indicate HMB. Variability in MBL, across women, and period-to-period within-individual, make this very challenging research-analytic terrain. Study participants sought help for their period problems, ostensibly HMB, but according to their subjective questionnaire responses, not always specifically/ solely HMB. Clinical menstrual research would benefit from more holistic assessment of period problems, and a wider range of interventions.

The Meaning of Menstruation and Amenorrhoea in the Context of Cancer: Normality and Health, or inadequacy and Infertility

Jane Ussher & Janette Perz, Western Sydney University, Australia

Background: One of the consequences of treatment for cancer is cessation of menstruation, which can be associated with infertility, or concerns about fertility. There have been calls for further research on the psychosocial, emotional and identity concomitants of cessation of menstruation and infertility post-cancer, the aim of the study reported in this paper.

Method: A mixed method design was used to examine the gendered construction and experience of infertility following cancer. A survey was completed by 693 women, across cancer types and age groups, and in-depth one-to-one interviews conducted with a purposively selected subsample of 61 survey respondents. Thematic decomposition was used to examine the open ended survey responses and interviews.

Results: In the thematic decomposition, menstruation was constructed as a signifier of normality and of fertility. Conversely, cessation of menstruation was positioned as sign of an abject and inadequate body, which led women to feel different from their peers. Feelings of loss of control, stigma, shame and self-objectification were apparent in the accounts of many women regarding the physical changes in their bodies following cancer, with their bodies positioned in terms of a loss of femininity and outside of the male gaze. Fear of infertility was identified as providing a 'Threat of Biographical Disruption' which impacted on life course and identity. Subthemes identified were: 'Parenthood as central to adulthood'; 'Infertility as a threat to gender identity'; 'Unknown fertility status and delayed parenthood'; 'Feelings of loss and grief'; 'Absence of understanding and support'; 'Benefit finding and renegotiation of identity'. In the closed survey items, the majority of women agreed that they had always 'wanted to be a parent' and that 'parenthood was a more important life goal than a satisfying career'. However, some participants agreed they 'could visualise a happy life without a child' and there is 'freedom without children'.

Implications: Cessation of menstruation and the fear of infertility following cancer, or knowledge of compromised fertility, can have negative effects on identity and psychological wellbeing for women, serving to create biographical disruption. Conversely,

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return of menstruation following treatment can signify health and wellbeing, as well as a return to normality. It is important to acknowledgement of the meaning of menstruation in the context of providing information and support for those dealing with fears of infertility following cancer. Support from family, partners and health care professionals can facilitate renegotiation of identity and coping.

CS 2.2 Menstrual Management 1 TSB Rm. 221

Menstrual Cups in South Asia: Cultural Norms and Revisionary Frameworks

Sutopa Dasgupta, EverCup, United States

Millions of women across South Asia still face significant barriers to a comfortable and dignified experience with MHM. Data shows that girls are largely on par with boys up to adolescence, but with the onset of puberty—with the challenges of managing menstruation without supporting infrastructures, education or products—outcomes for girls begin to diverge and girls face increasing restrictions to their mobility and agency. In addition to gender disparities associated with the menstruation experience, there are extensive discriminatory social norms—stigmatization, lack of privacy and safety, religious taboos, and ostracism. Cultural taboos—often reinforced trans-generationally within families—add to difficulties, preventing women from gaining control over their menstrual experience. In the context of these complex social issues, this paper offers a preliminary review and analyses of cultural associations around the use of menstrual cups. How cups are received, initial feedback and cultural integration into, or resistance of, social conventions that normalize or stigmatize the use of menstrual cup were assessed in an anthropological review of a number of small sample sets across the sub-continent. Findings tentatively suggest that there is more positive receptivity than would have initially been expected, and provide compelling impetus for further study on a larger scale.

Staying in the Game – Menstrual Health Education with Adolescent Girls in Sport for Development in Zambia

Sarah Zipp, University of Stirling, United Kingdom

Menstruation will impact nearly every adolescent girl, yet strong cultural taboos regarding this issue often leave young girls uninformed and unprepared to navigate menstrual health and hygiene. These challenges exist in the wealthiest of countries, yet in the developing countries of the Global South, menstruators often face further challenges. Lack of sanitation, privacy and reliable hygiene products prevent many girls from engaging in school, sport and other social activities. Keeping girls engaged in their schools and communities is critical to their development.

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Sport for development (SfD) is a relatively new movement within traditional international development strategies. Non-governmental organisations (NGO) and governments use sport as a mechanism or platform to contribute toward the larger Sustainable Development Goals (SDG). SfD can support access to education, health resources, support networks and more. However, including girls fully into the SfD movement can be problematic due to social norms, religious beliefs and other restrictions, such as menstruation. Although research on gender in SfD has increased in recent years, studies focused on menstruation are scarce.

This exploratory study aims to better understand how adolescent girls experience menstruation and menstrual health education in the SfD context. Participants in the Goal after school programme run by the National Organisation for Women in Sport, Physical Activity and Recreation (NOWSPAR) in Lusaka, Zambia, took part in this study. The Goal programme runs throughout the school year, and includes modules on communication/leadership, health, financial literacy and human rights. The Goal curricula was designed by the Women Win Foundation and has been run in hundreds of schools across the Global South, reaching nearly 500,000 participants over the past decade. The Goal approach includes a focus on sport, physical activity and movement as a way to engage with adolescent girls on these topics. For this study, the existing Goal lesson on menstrual health was expanded to four lessons, largely based on the educational material available from www.firstperiod.org.

Participants included adolescent girls (n= 100; between ages 10-16) from NOWSPAR programmes and GOAL programme facilitators (in progress). For the adolescent participants, the study included a baseline survey, a menstrual health programme with four classroom lessons and two physical activity sessions, interactive journals to accompany each of the lessons and an endline survey. The programme facilitators are being interviewed currently (to be complete by end March).

Preliminary findings demonstrate that the participants engaged well with the material, with 79 out of 100 girls completing their 24-page diary. Participants reported that they gained knowledge from the lessons, felt more comfortable discussing menstruation, felt less worried about menstruating, felt that menstruation should be discussed more often and earlier in schools, enjoyed the activity sessions and plan to use stretching and exercise activities at home. Participants continue to struggle with misinformation and “menstrual myths,” however. Further analysis is currently on-going, but these findings seem to confirm a larger contention that the field of sport for development largely fails to adequately address the lived reality of adolescent girls. Recommendations for further study and practice will be developed.

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The Monthly Costs of Bleeding - An Exploratory Study on the Connection of Menstrual Health Management, Taboos, and Financial Practices Amongst Schoolgirls in the Kilimanjaro Region in Northern Tanzania

Katja Brama, Aarhus University & GIZ, Germany

My paper is based on research that I conducted alongside Femme International in Moshi, Tanzania from September until December 2017. I collected qualitative data in the form of in-depth interviews with stakeholders and focus group discussions in secondary schools for my M.Sc. thesis in Human Security at Aarhus University. The final product of my thesis received a 12 on the Danish scale last summer, which is the equivalent of an A.

My interest in this field originated in the desire to understand the practice commonly described as “sex for pads” that I came across when I started to explore the connection between menstrual health and human security. Since I initially assumed this practice was a consequence of financial struggles, I started my research with a focus on the connection between MHM and financial insecurity. During my three months with Femme, however, I realised that engaging in transactional sex or relationships is not exclusively a result of financial needs, but also connected to cultural practices, power and social structures within the respective societies. Just like most (reproductive) health behaviours, MHM is embedded in larger structures.

To understand the girls’ experiences, their voices and perspectives are central. I have gathered qualitative data to analyse various strategies that schoolgirls use to obtain MHM products or money to buy products. The main strategies I have encountered are support from family, teachers or school staff, friends and community members, work and engaging in transactional sexual relationships. Whilst these strategies all show a degree of agency, I am exploring the inhibitions through social structures and show the damaging consequences some of the girls’ methods can have. Additionally, their decision-making power is impacted by their identity, position in society and education system, other people’s expectations, and a variety of menstrual taboos.

My thesis illustrates the complexity and interconnectedness between MHM, reproductive and sexual health, financial insecurity, and underlying societal structures and cultural perceptions and practices. I am showing that attempts to improve MHM practices exclusively in relation to financial struggles or inaccessibility of menstrual products will fall short when underlying structures are ignored. Further, I argue that the pervasiveness of patriarchal structures entangled in Tanzanian society, the financial and economic disadvantages and the taboo of menstruation are forms of structural violence against women. They result in MHM practices that put women and girls at higher risk in terms of assault, direct violence and health problems.

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Understanding Menstrual Hygiene Management Among Adolescents in Indian Urban Slums

Tanya Dhingra, Temple University, United States; Dr. Heather Murphy

Menstruation is perhaps the most important change during a young girl's adolescent years. In resource-poor countries like India, menstrual hygiene is heavily compromised and steeped in silence, myths, taboos, and stigma due to its common associations with impurity. Many girls are uneducated about menstruation and how to manage it. They lack access to social support resources, both at home and at school, that could provide them with access to adequate menstrual hygiene management. Insufficient sanitary facilities, safe spaces, clean water, and pads are additional environmental barriers. The most stressful psychosocial factor, however, is the inability to address and discuss these matters openly. The main aim of this formative research study was to understand the range of social challenges faced by adolescent girls during menstruation – as well as the determinants of those challenges so that appropriate interventions can be conceived to improve girl's future menstrual hygiene practices. This research project included a qualitative study through focus groups, visual observations of community and household toilet facilities, and in-depth interviews. A total of 30 adolescent girls between the ages of 12-16 years old and their mothers (30) were chosen to participate in the study .

CS 2.3 Toxic Tampons TSB Rm. 223

Tampons & Medical Privacy: A Legacy of Toxic Shock Syndrome

Sharra Vostral, Purdue University, United States

In 1980, the media alerted women to a new and frightening illness associated with menstrual periods and tampon use: toxic shock syndrome (TSS). The illness raised grave concerns because it struck healthy individuals, and 75% of women used tampons. In addition, the early symptoms deceptively resembled the flu, which quickly deteriorated into septic shock and death. The Centers for Disease Control (CDC) conducted epidemiological studies and worked in conjunction with state and local public health agencies to track outbreaks and identify co-factors of the illness. While the studies determined that all super-absorbent tampons carried risk, the Rely tampon manufactured by Procter & Gamble demonstrated the highest rate of all. The company bore the brunt of the bad publicity and voluntarily withdrew Rely tampons from stores, sparing itself from an official Food & Drug Administration (FDA) recall due to the tampon's deadly association with TSS.

While Procter & Gamble publicly received accolades for taking responsibility for its product and alerting women to the dangers of Rely, behind-the-scenes it fought for access to data. This paper examines the aftermath of the recall, and the ways in which Procter &

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Gamble pressured, challenged, and sued the CDC for the right to identify informants and access their medical records. It utilizes archival documents and oral histories to trace arguments amongst FDA, CDC, and corporate lawyers concerning the nature of a patient's right to privacy, and why this matters to contemporary medical standards and treatment.

Procter & Gamble exerted strong commercial interests in seeking to retrieve the data that the CDC collected presumably to discover errors upon which the policy decision was based. The company proceeded to subpoena records, which the CDC contested, and resulted in *Farnsworth v. Procter & Gamble* (1985) which ultimately provided protection to the CDC and patients. At stake was the very system of trust which patients and informants voluntarily gave, and the CDC depended upon, for quality data.

As the AIDS crisis loomed on the horizon, the policy efforts to affirm and legally guarantee patients' rights to privacy have served as an important pillar of ethics in a system constantly challenged by commercial and outside interests that do not necessarily hold individuals' rights as a core value. This historical research exemplifies the dynamic relationship between medicine, society, and law, and the importance of looking at women's health, including menstrual hygiene management, as significant areas to improve medical outcomes for us all.

Project Hyacinth: Unilever's Menstrual Product Arms Race 1965-1980

Camilla Mørk Røstvik, University of St Andrews, United Kingdom

In 1980, the Anglo-Dutch corporation Unilever suddenly ended 'Project Hyacinth', a £15 million menstrual product experiment that had been debated internally for over twenty years. Beginning in the mid-1960s, the corporation dreamt of entering the increasingly profitable menstrual product market by developing a new type of disposable pad and tampon. Utilising archive material from the Unilever Special Collections in Port Sunlight, Liverpool (UK), this paper presents Project Hyacinth in the context of menstrual history and gendered narratives for the first time. Rather than focusing on the financial disaster, this paper shows how Unilever's decision was directly linked to Procter & Gamble's Rely tampon throughout the 1970s, the product now known as the source of the deadly Toxic Shock Syndrome. Tied to this, I also show how Unilever continuously overlooked women in their efforts to profit from menstruation, and how little interest and knowledge they exhibited about the menstrual cycle in general. Presenting this story in the context of the history of menstrual products and taboos, I argue that it is important to understand 'Project Hyacinth' as a story about women, health and menstruation first and foremost, rather than just one of financial embarrassment.

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Are those Tampons Toxic? A Review of Recent Chemical Testing of Tampons and Pads: What Does it Tell us and Where do we Need to Go from Here.

Alexandra Scranton, Women's Voices for the Earth, United States

In recent years, there has been a significant increase in chemical testing of pads and tampons, and increased concern and interest in the impact these chemicals may be having on our health. Previously, publicly available testing was limited to a handful of papers measuring dioxin levels in tampons. But in the last 5 years, due to the lack of ingredient disclosure from manufacturers, there has been increased interest in finding out what chemicals are contained in these products. Efforts began with small studies conducted by non-profit organizations around the world (such as Women's Voices for the Earth here in the US). These inquiries have been followed up with studies commissioned by media outlets and larger government studies, from France, S. Korea, Sweden. Papers in peer-reviewed scientific journals are also just beginning to emerge. Chemicals detected include reproductive toxins, carcinogens and irritants such as pesticides, volatile organic compounds, phthalates, and more. This presentation will describe and summarize these recent efforts to better understand the unique chemical exposures from the use of these products. Analysis of this new data also highlights the lack of available research on how chemicals (particularly those that can cause harm) are absorbed by sensitive vulvar and vaginal tissue. There is considerable concern about the potential impact these chemicals can have on reproductive health and fertility due to their unique route of exposure. Lastly, this paper will discuss what recommendations can be derived from the data, and the role that advocacy can play in ensuring safer products in the future.

Reduce, Reuse, Menstrual Cycle: Studying Menstrual Hygiene Product Usage and Knowledge of their Environmental Impact on Allegheny College Campus

Danielle Higbee, Allegheny College & Independent Researcher, United States; Richard Bowden

There are three main components in tampons and pads including cotton, polyester, and rayon. Two of the main processes to create paper products which includes tampons and pads are pulping and chlorine bleaching (Costello, et. al, 1989). These processes release harmful by-products into the environment like dioxin (DeVito, 2002).

There are alternative methods to regular disposable tampons and pads. One example is the menstrual cup made of silicone (Diva International, Inc., 2017). Another alternative to the disposable menstrual products is a reusable pad made of cotton. Unlike conventional menstrual hygiene products, both menstrual cups and reusable pads can be used for years (Lunapads.com, 2018). These alternatives are not only less chemical intensive on the body but have a lesser impact on the environment.

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This study aims to determine menstrual hygiene product use on campus and the knowledge of consumers on the environmental impact of these products through a survey. Additionally, reusable pads and menstrual cups were tested by participants and discussed in focus groups by product their overall experience using the product. Seventy-one percent of product testers had a positive experience. The biggest inhibitor to the usage of alternatives is lack of knowledge. People have considered the environmental impact, but the taboo around menstruation prevents conversation.

4:00 pm – 4:30 pm

Break

4:30 pm – 5:30 pm

Tutt Science Bldg

Concurrent Workshop (CW) Sessions #2

CW 2.1: Crimson Peaks: Period Stories Untold TSB Rm. 218

Jewel Addy, Red Dot Campaign, United States; Eva Woolridge and Sage Youngblood

Explore story-sharing around your period and hear from others as de-stigmatize this healthy bodily function. "Crimson Peaks: Period Stories Untold" is a storytelling workshop focused on learning period privileges and documenting our unique, but community period experiences. This workshop is hosted by Red Dot Campaign.

Red Dot Campaign, Inc is a non-profit (501c3) organization with a service initiative to collect menstrual resources for people in need, raise awareness around the lack of menstrual health products and humanize the period. Red Dot accomplishes this through artistic collaborations.

Since 2015, Red Dot has collected 30,000+ menstrual resources for more than 15 underfunded schools, halfway homes, LGBTQ+ homeless shelters, and natural disaster relief initiatives. Red Dots educates in the DC and NYC communities through events, digital and printed content, and public presentations.

CW 2.2: Roundtable discussion: Product Distribution for Underserved Populations

TSB Rm. 305

Lysne Tait, Helping Women Period, United States

Roundtable discussion for those working in or interested in product distribution for underserved populations. Challenges in distribution, type of product, and fundraising would be discussed, as well as the best vehicle for getting product to those who need it. We will discuss activism, menstrual equity, and ways to educate the vulnerable populations about best practices for use and disposal of products.

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I run a small nonprofit in Michigan – we provide menstrual products for homeless and low-income people in four counties in mid-Michigan. We have grown 214% since our inception in 2015. We work with 125 charity partners (schools, food banks, shelters, etc.) and distributed over 500,000 menstrual items in 2018. We field calls and emails from people the world over on a weekly basis asking how we do what we do, how they can help, and where to source product. I will discuss the best way to do this, how we've done this transparently, and with an eye towards duplication.

CW 2.3: The Future is Femtech? Keeping Track of the Issues of a Booming Industry TSB Rm. 126

Amanda Laird, Heavy Flow, Canada; Amanda Cormier, Clue; Holly Grigg-Spall, author of "Sweetening the Pill" and brand consultant; Leslie Heyer, Cycle Technologies; Nicole Jardim, Women's Hormonal Health + Period Expert.

"Twenty-nineteen has already been dubbed the "year of femtech", the term coined to describe technologies geared towards managing and improving women's health. Technologies such as period tracking apps, breast milk and tampon deliveries and smart fertility monitors are rapidly growing in popularity, attracting millions of users while raising record amounts of venture capital. It's estimated that the femtech market will balloon to \$50 billion by just 2025.

While the focus on female health and wellness is certainly long overdue, many have raised concerns about femtech doing more to exploit than help those that employ these technologies. Recent mainstream media headlines have highlighted issues such as privacy while others have suggested it's not the users that are benefiting most from apps and products in the femtech space.

This session brings together leaders in the femtech and female health space to discuss the top concerns of the industry today: privacy, research and education, surveillance culture/self-optimization, corporate interest and reproductive labour.

CW 2.4: Menstruation: Why does it have to be so difficult? TSB Rm. 324

Betty Dorr & Nancy Cardona, Fort Lewis College, United States

Menstrual experiences differ widely across cultures and individuals. In this round table, participants will explore the issues through an examination of news coverage, activity on social media platforms, and their personal experiences. Topics include, but are not limited to: menstruation management products (disposable and reusable); access to and experience with menstruation management products; cultural attitudes toward

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menstruation and menstrual management products; menstruation poverty; and political/economic approaches to menstruation.

The recent movement to destigmatize menstruation has helped to foster discussions around these issues, but so much more needs to be accomplished. The menstrual cup movement and various public awareness efforts have produced tangible support for people who menstruate; however this is not enough. Talking with one another about our experiences and supporting each other is an important step towards advocacy.

CW 2.5: Redesigning Your Period Experience Through Storytelling and Community Building TSB Rm. 214

Tara Pokras, Period Portraits, George Washington University, United States

This workshop will help participants understand the journey of the period and how it has been shaped by the stories and messages told throughout people's lives. Tara Pokras, Founder of Period Portraits, uses digital and in-person storytelling and to dismantle shame and stigma around menstruation. Period Portraits is an incredibly powerful storytelling project which focuses on challenging and breaking down the stigma around menstruation through vulnerable interviews and empowering photographed portraits. Tara has interviewed and recorded over 75 stories, from 3 continents, with people ages 16 to 68, and has used photography and social media to amplify her work. She will lead you through a variety of exercises grounded in human centered design and ethnography to map period experiences, tap into a deeper part of yourself and develop tools to bring back to your community. Through these shared stories we can dismantle the stigma surrounding menstruation.

Period Portraits, uses personal stories, conducted by in-depth interviews, round table discussions, and other engaging activities to get people to share out their experiences of shame and stigma around menstruation. Grounded in methodologies of social behavior change, human-centered design, and ethnography, participants tap into a deeper part of themselves while connecting to the greater community. Period Portraits believes in giving people the space to unleash the power of their bodies and dismantle the shame of menstruation through sharing stories and community building.

In this workshop you will learn about innovative and new approaches to menstrual health in the domestic and global health sphere; understand the use of an interdisciplinary approach to tackle social norm change and stigma; be exposed to the use of art, technology, and community building to start taboo conversations; and understand how the use of human-centered design, storytelling, and community building can work to change behaviors.

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7:00 pm – 9:00 pm

Local Restaurants

Various Dinner Options

Reservations have been made at local restaurants for anyone wanting to gather for dinner (at your own expense and in groups of your own choosing). A sign-up sheet will be posted during registration.

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8:00 am Bemis Lounge **Check-In & Breakfast Buffet**

8:15 am – 8:45 am Bemis Hall **Speed Mentoring**

Modelled after speed dating, an opportunity for early-career researchers, junior faculty and activists to meet with senior and experienced faculty and menstrual advocates in a speed mentoring forum.

9:00 pm – 9:45 pm Bemis Hall **Keynote Presentation**
Carol Travis

Rethinking Estrogen—Yes, Again

Estrogen therapy for women during menopause and beyond has long been a vexed issue, medically and politically. Over the decades, it has careened from being the good and helpful Dr. Jekyll—a hormone that could ease women’s menopausal symptoms, keep them “feminine forever,” and even prolong their lives—to the villainous Mr. Hyde, a hormone that can cause dire illnesses and shorten women’s lives. When, in 2002, the Women’s Health Initiative announced that they had found an increased risk of breast cancer, dementia, and death “from all causes” among women taking HRT (estrogen plus progesterone), many women’s health activists felt vindicated and relieved. And yet the story isn’t over. In this talk, I will show how the WHI violated key conventions of scientific procedure and statistical accuracy to wage a campaign of fear, promoting unsubstantiated claims of estrogen’s harms but minimizing their own repeatedly substantiated findings of estrogen’s many benefits. And I will draw on the massive international evidence from laboratory and clinical studies showing not only that estrogen sharply reduces the risks of heart disease, osteoporotic hip fracture, and cognitive decline in women’s later years, but also that it is time to reconsider the assumption that estrogen causes breast cancer. That belief is logical, widely held . . . but wrong.

9:45 am – 10:30am Bemis Hall **Panel**

Diverse Perspectives on the Menopausal Transition

A woman muses about buying lovely new panties; another sets out on the trip of a lifetime; a blogger offers information, support, and community to perimenopausal women; researchers uncover myths and misconceptions about migrant and refugee women’s experiences of menopause; a sociologist and intersex advocate challenges her medically constructed menopause; young women’s stories inform an inquiry into the health and social repercussions of primary ovarian insufficiency; all in a collection of research papers and personal narratives that moves far beyond the idea of menopause as a biological marker. Contributors to *Transitioning: Reflections on Menopause and Reproductive Aging*, a forthcoming volume from Demeter Press, explore the experience of

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perimenopause and menopause. While biomedical and feminist researchers agree that menopause is a time of transition and border crossing, they offer differing perspectives about whether menopause signals deficiency and burden, or growth and freedom, or both. The pieces in this collection vary significantly in both perspective and experience of this process. Research, analysis, narrative, poetry, and art intermingle to create a multi-textured montage that challenges stereotypes, probes relationships, and defies categorization. Co-editors Heather Dillaway and Laura Wershler, together with contributors Jane Ussher and Janette Perz, will preview the collection and discuss how current variations in perspectives allow us to better understand how women think about and experience the menopausal transition in contemporary times.

Moderator: Janette Perz, Director, Translational Health Research Institute, Western Sydney University, Australia.

Panel Members:

Heather Dillaway: *Transitioning: Reflections on Menopause and Reproductive Aging (Part One)*.

Introduction to four main themes in a diverse, multi-genre collection of perspectives on the menopausal transition. She previews contributions related to “classical” approaches to the transition and how “relationships” influence experiences of menopause.

Jane Ussher: *The Myths and Misconceptions: Migrant and Refugee Women’s Constructions and Experiences of Menopause*.

A report from a qualitative study of migrant and refugee women who had settled in Australia or Canada in the last ten years, having migrated from Afghanistan, Iraq, Somalia, South Sudan, Sudan, Sri Lanka (Tamil), India (Punjab) and varying South American countries. Findings emphasize how understandings of menopause and the menopausal body is influenced by cultural norms and discourses

Laura Wershler: *Transitioning: Reflections on Menopause and Reproductive Aging (Part Two)*.

Reviews the themes of “out-of-step” experiences of menopause and how the transition can “unleash” unique and deeply personal ways of thinking about and approaching the experience.

10:30 am – 11:00 am

Break

11:00 am – 12:30 am

Tutt Science Bldg (TSB)

Concurrent Sessions (CS) #3

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CS 3.1 Menstrual Embodiment & Sexuality TSB Rm. 214

Menstrual Hygiene Management: The experience of the nomadic Maasai population of Kajiado

Jedidah Lemaron, The Malkia Initiative

Menstruation constitutes a very important part of women's lives yet it remains a taboo topic among many African communities including the Maasai. The Maasai, nomadic in nature are located in the arid and semi arid region south of Kenya, and are known to be highly patriarchal. Kajiado experiences shortage of water which can affect menstruation. On the other hand the county latrine coverage is wanting at only 26%(County sanitation profile, 2014). Women and girls do not have access to menstrual products resulting them in using pieces of used cloth, cow dung or sit in the sand the whole day. Menstrual hygiene management(MHM) is the ability of women to stay clean, in good health as well as the way they use and dispose menstrual products (Reed and Shaw 2008).

This study was conducted in five wards of Kajiado county: Matapato South, Magadi, Kuku , Imaroro and Purko. The main objective of the study was to examine and analyse behaviour and practices related to menstrual hygiene management and their impact to the lives of Nomadic Maasai women and girls. Data was collected from the Water sanitation and Hygiene (WASH) department of Kajiado County, Local leaders and the general public using quantitative research methods. The sample used was randomly drawn from 312 participants (102 male, 200 female) between ages 12-49 .

The major results were: Menstruation is a taboo topic that is majorly influenced by the culture, beliefs and myths that affects its management. Most women in the study had little to no understanding on menstruation, particularly why they menstruate and the age of menarche. While the girls said that it was uncomfortable for the teacher to pass comprehensive information on MHM in class/school. Lack of proper infrastructure and menstrual absorbents affected the women and girls participation in economic, learning and social activities as they avoided public spaces with 54% of girls missing school. While where sanitation facilities are available they did not cater for the menstruation needs of women and girls. Lack of sanitation infrastructure impacts how used/waste sanitary protection are disposed, In most cases they hid them in anthills or under stones, while a significant number threw in rivers/dams or bushes contaminating the same water that is used for animals and domestic use. 84% of the women sampled who took less than 4 glass of water reported to having discomfort, painful cramps or bloatedness but did not relate it to lack of drinking water.

We acknowledge that MHM has gained momentum globally and even locally but more attention needs to be given to vulnerable groups. We therefore recommend the County Department of Health and other stakeholders to intensify interventions for good MHM including strengthening of community led total sanitations programs. Conduct

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awareness trainings and activities for women and girls in the villages and in schools. Involve men in MHM activities and interventions as they are the key decision makers. Lobby the county government of Kajiado to set budgetary allocations to address poor menstrual hygiene in the county. Improvement of school and public sanitation facilities and infrastructure to be MHM friendly including the provision of water. Dig more boreholes or provide water points to supply the community with safe drinking water and for cleaning their bodies among other domestic use.

Women's Experiences of the Premenstrual Body: Negotiating Body Dissatisfaction, Self-Objectification and Reproductive Shame

Samantha Ryan, Jane Ussher, Janette Perz, Western Sydney University, Australia

This paper presents the findings of an investigation into women's experiences of their premenstrual bodies, acknowledging physical, psychological and socio-cultural factors, using a material-discursive theoretical position within a critical realist framework.

Women's body dissatisfaction has been found to increase in the premenstrual phase of the cycle, and to be associated with premenstrual distress. However, the mechanisms of this relationship, and exploration of women's construction and experience of their premenstrual bodies, remains little understood. This paper presents the findings of research which examined the association of body dissatisfaction and premenstrual distress using a mixed-methods design. One-hundred and sixteen women completed an online survey examining Premenstrual Distress, Body Dissatisfaction, Reproductive Shame and Self-objectification. Eight participants completed a semi-structured interview, to examine construction and experiences of premenstrual embodiment. Significant positive correlations were found between Premenstrual Distress, Body Dissatisfaction and Reproductive Shame. Regression analysis demonstrated that Body Dissatisfaction was a unique predictor of Premenstrual Distress. Self-objectification was significantly negatively correlated with Body Dissatisfaction. Thematic analysis of interviews and open-ended survey responses identified internalisation and resistance of unrealistic cultural constructions of feminine beauty, concealment of the body and reduced engagement in body-management behaviours.

These findings have led to a second ongoing study, examining women's premenstrual body dissatisfaction using interviews and a body-mapping session. This involves participants illustrating their experiences and feelings towards their premenstrual bodies on a life-size outline of their bodies. Follow-up interviews explore participant's body maps and experiences with their premenstrual bodies. Preliminary findings from this study will be presented, and the implications for theory and method in menstrual cycle research on embodiment discussed.

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Menarche as a Site of Sexuality and Gender Norms

Ayanna Shambe, Arizona State University, United States

Around the world, sexuality takes up various forms and meanings often in relation to power, social norms, and social scripts. This paper examines menarche as a site of sexuality development. As such, this paper examines the following questions: 1) What sex and gender norms show up in descriptions of menarche? 2) How do these sex and gender norms construct and perpetuate mundane narratives of sexuality? A content analysis of ten puberty books was conducted with a focus on menarche descriptions as sites of sexual and gender scripts. Findings reveal that puberty books' descriptions of menarche perpetuate narratives of pain as normal, menstruation as abject, and that trans and non-binary menssurators are invisible.

The Sexualization of Menstruation: On Rape, Tampons and Prostitutes

Lacey Bobier, University of Michigan, United States

CS 3.2 Menstrual Management 2 TSB Rm. 218

A Period of Change: How NGOs in India Are Navigating Practice and Theory

Margaret McLaren & Kenzie Helmick, Rollins College, United States

Menstrual health is undeniably a significant, but inadequately addressed, aspect of wellbeing in the lives of menstruators in both the Global North and Global South. Yet in the last two decades since menstruation has entered the mainstream conversation, the focus of international attention and outreach has only been directed towards the Global South, primarily in areas of Africa and South Asia. The rise in menstrual health interventions in these regions has been intertwined with the development sector, an adoption that was led by the WASH industry.

Feminist critiques against the development sector's newly-angled imposition into the Global South mirror many of those made against related gender and development projects, challenging instrumentalist arguments that justify the empowerment of women in economic and political terms and highlighting the unintended burden subsequently placed upon girls. Other appraisals stem from factors unique to the issue of menstruation, claiming that the industry's outreach projects focus solely on the containment of menstruation, framing the process as a pathology and limiting potential solutions to access to products and sanitation, rather than addressing underlying, structural influences, such as cultural taboo.

Critical menstrual studies challenge the development sector's depiction and treatment of menstruation, along with the Western, hegemonic discourse from which they arose,

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by questioning the ways in which menstruation has been portrayed and how these representations have been used to legitimize the shaming, discipline, and management of menstruators' bodies. From this discussion, the field hopes to end the pathologization of menstruation and to revalue the natural process as a vital sign of both reproductive and general health.

Many local NGOs openly embrace and adopt the values promoted by critical menstrual scholars. However, their ability to transfer these ideals to effective practice is limited by the finite resources inherent to NGOs, the dominance of the WASH sector as a source of legitimizing developmental knowledge and strategy, and the social and cultural conditions of the communities in which they work. As a result, NGOs must develop their own practices and strategies, either working with or outside the influence of WASH and critical menstrual studies. In this paper, we examine how NGOs navigate the space between competing discourses and practice, detailing the ways in which they have been able to influence and shape mainstream approaches and considering the potential shortcomings of some of these current praxes.

In doing so, we first give an overview of critical menstrual studies, illustrating its importance in connection to larger issues of health, autonomy, and gender. Following this section, we examine the unique situation of menstruators in India and the conditions with which various organizations must contend. Then, we analyze WASH's response to these conditions through the framework of menstrual hygiene management and further expand on feminist critiques against their interventions. Finally, we evaluate the approaches taken by NGOs working at the grassroots level and the ways in which they have accommodated and resisted dominant discourses, concluding with avenues through which potential growth in outreach capacities could be made.

Acceptance and Effectiveness of Reusable Menstrual Cup Among Rural Poor and Underserved Women in Western India

Shobha Shah, SEWA (Society for Education Welfare and Action), India Dr. Gaytri Desai, Tonhu Hoang, Sutopa (Myever cup, USA), Dr. Maitri Vayeda, Dr. Vishal, Gaytri Patel

Introduction: Menstruation is a normal physiological process that every woman undergoes throughout her reproductive period. They commonly use various types of reusable cloths or commercially available sanitary pads during menstruation. However it restricts their mobility and be productive because of inconvenience to change, wash or carry sanitary items. Sanitary pads being non biodegradable, its disposal is harmful for environment. Hence menstrual cup being a reusable vaginal device appears promising alternative solutions for managing menstruation.

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Objectives: This pilot study was conducted to assess feasibility, acceptance and effectiveness of menstrual cup among rural, poor and underserved women in Western India.

Methodology: Study was piloted among women of 20 to 50 years age group served by a voluntary service organization called SEWA Rural. None of these women had ever heard about, seen or used such cups. A mixed method study, both quantitative and qualitative data were collected. "Myever cup", made in USA was introduced to women with token charge of 1.5 dollars along with detailed information on how to use such cups. With extensive dialogue, use of audio visual material and demonstration on models, efforts were made to overcome women's apprehensions. 55 women who agreed to tryout such cups were followed up for next three consecutive menstrual cycles. At every visit, each participant was interviewed with open ended questionnaire on one to one basis and her experience was documented with verbal consent.

Results: 88 % women liked the menstrual cup because of its ease and convenience in its usage and having greater mobility compared to other options like cloth or sanitary pad. Most of them now want to continue with these cups and are also ready to recommend others. Very few women including unmarried girls suffered some pain, had difficulty while inserting first time and while removal.

One cup was eaten away by rat, and another fell down in toilet.

Women shared their experiences through following quotes..

"I was able to sleep in peace without worrying about soiling mattress. I did not have to get up in the middle of the night to change pad". "I did not feel like I am menstruating.

"During the monsoon season, I need not have to worry about a pad or cloth becoming soaked in rain and causing infection."

"I have heavy menstrual flow on first 2 days, so had to carry extra pieces while coming to office; also cumbersome to carry the dirty pieces to be washed at home. Using cup is a better solution for balancing heavy periods and attending workplace"

"The cost of buying sanitary pads every month is too high compared to menstrual cups which can be used for years"

"Had itching while using sanitary pads, and had issues of staining, washing, and drying with Cloth material but I am highly satisfied with menstrual cup now"

"I will surely tell my daughters to use cups"

Conclusion: Menstrual cup appears an easy, hygienic and affordable solution. It is women and environment friendly even for women belonging to rural, poor and under served community.

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Menstruation Issues in Kenya: A Socio-cultural or a Poverty Issue? Lessons from Rural Parts of Machakos and Elgeyo Marakwet Counties

Angella Katee Ndaka, Kenyatta University, Kenya; Dr. Mary Onsarigo; Ms. Heather Eddah Kipchumba

Background: Although the government and non-state actors have invested heavily to address menstrual poverty in Kenya, the challenges emanating from menstruation are still high. In many communities, menstruation is rarely discussed while in others menstruation is a taboo and cannot be discussed in families and communities.

Purpose: This study sought to examine the determinants of menstrual management challenges among girls aged 12-19 in Machakos and Elgeyo Marakwet counties.

Methods: A purposive qualitative survey was carried out in 8 schools to 360 girls in Elgeyo Marakwet and Machakos County. The results of the study were analyzed thematically and use of participant voices. Informed consent was sought and anonymity and confidentiality adhered to.

Findings: The study findings indicate that: although 86% of the girls interviewed had received their menstrual periods, over 50% of the girls had not received prior education on menstrual hygiene, sexuality and reproductive health education. Over 50% rarely or completely do not discuss menstruation, sexuality and related issues with their parents/guardian or teachers. Thus menstrual challenges go beyond the economic incapacitation as is commonly implied. Our findings show that they are closely tied to different cultural meanings attached to, and socialization of sexuality, and inadequate information before menarche. In some communities, menstruation is a taboo and cannot be discussed in families and communities. This largely determine how menstruation and its related issues are managed by individual girls.

Conclusion: Interventions are needed urgently to increase spaces for girls to discuss menstruation, as well as access information and materials relevant from responsible adults including parents, teachers and relevant authorities. Comprehensive school based and community based menstrual education and management as well as sexuality education should be applied early and on a regular basis.

Menstrual Health Management in Mwala and Marakwet sub counties in Kenya

Mary Onsarigo, Caroline Kisato, Juliana Juma, Evelyn Wasike, Kenya Angella K Ndaka, Panpads, Women in Leadership Network

1 of 10 girls skip school during menstruation period or drop out of school entirely. This translates to about 60 days of missed school in a year. This not only increases the

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chances of early child marriage and teenage pregnancies, but also affects the overall academic performance of girls compared to boys. Many girls of age 10-15 years rely on improvised solutions such as rags, leaves, toilet paper and pieces of foam mattresses. This methods are ineffective, uncomfortable and unhygienic and can lead to health complication and discomfort. Other effects are low self-esteem and lack of self- drive which affects their effective participation in education and other social activities. It is on this basis that the Women in Leadership Network team decided to reach out to some of the vulnerable girls in two communities in Mwala sub-county, Machakos County and Marakwet West Sub County in Elgeyo Marakwet County. Characteristic of the two communities is low retention from classes 6-8 and low transition of girls from primary to high school. This is due to early child marriages, high poverty levels and lack of mentors which force girls out of school resulting to child labor as they try to provide for their families. To address this challenge, the Panpad project will seek to provide the girls from this community with a whole year supply of re-usable sanitary pads. The women in leadership will also use this as an opportunity to start a mentorship program for the girls, selected teachers and their parents/guardians.

CS 3.3 Menstrual Resistance TSB Rm. 221

Leaky Activism: Women's Embodied Experiences of Resistance

Charlotte Amrouche, National University of Ireland (Galway), Ireland

My PhD research examines case of gendered and embodied activism using Margrit Shildrick's concept of leaky bodies, defined as the "uncontrollable natural processes and passions [which disqualify women] from mature personhood" (Shildrick, 1994, p. 20). In my exploration of bodies which leak across boundaries and borders I have focused on bodies which bleed, specifically on the mobilisation of women and menstruator's blood as a tool of resistance, unpacking how these leaky bodies hold the potential for radical disruption.

In this paper I will touch on the use of menstrual blood in three spaces: smeared on the walls of Armagh Women's Prison (Northern Ireland) in 1980, soaked into rags and tampons decorating the fences of Greenham Common (UK) in the 1980's and in the stories of the women on the In Her Shoes project during the 2018 abortion referendum campaign in Ireland. Through these three case studies I will explore how blood is mobilised, examine the ideas of resistance which emerge and situate them within the global menstrual revolution.

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In Defense of the Pussyhat, or Feminists, Don't Fear the Isomer

Geneva Kachman, Menstrual Monday, United States

Designed for the 2017 Women's March, the pink Pussyhat was a witty, crocheted or knitted response to Trump's notorious "grab 'em by the pussy" comment. "The sea of pink hats" envisioned by Krista Suh and Jayna Zweiman did indeed come to pass, thanks to the clever design of Little Knittery owner Kat Coyle. The following year, though, the Pussyhat was criticized for vulgarity, racism, and transphobia. Some Women's March organizers even encouraged marchers to forgo the hat. In this paper, I mount a defense of the Pussyhat, and women's right, if not obligation, to act as designers and definers in the political arena.

The Pussyhat was never intended as a representation of female genitalia, and the hat's design itself argues against this. We live in a post-Vagina Monologues, post-reality show "vuh-jay-jay" world, and decades of vagina art and photography are available online. Anatomically-correct elements like ruffles and folds could have been incorporated, but were not. Rather, cat ears are the only real design element. Charges of vulgarity are thus misplaced, and may be the result of internalized sexism. Women are not seen as belonging to the categories of designers or definers, while men like Donald Trump are. From this perspective, the appropriate response for women is not visual wit or humor, but to "act like ladies" and model the "good behavior" we would like from men.

The hat's pinkness was also assailed, because "only white women have pink vaginas." However, the hat's not exactly pink: It's magenta, a mix of red and blue. This same magenta is ubiquitous in packaging and advertising directed at women and girls. Not only does Planned Parenthood use it, but it's also found in the packaging for Barbie and Bratz dolls, both of which come in a variety of skin tones. Understood symbolically, magenta blends "feminine" red with "masculine" blue, and so is expressive of a "femininity" that easily incorporates traits typically associated with "masculinity" – and vice versa. This is quite a conceptual distance from white women's vaginas/vulvas.

However, Krista Suh's definitions of pink as "a little bit frivolous, girly, weak, soft, effeminate [...] a code for women" and "...representing caring, compassion, and love – all qualities that have been derided as weak but are actually STRONG," are problematic in terms of race. I explore Suh's statements in the context of demographic differences between direct care and physician workforces in the United States.

The charge of transphobia is of a different order than those above. Applying the features of cis-trans molecules to biological sex and gender, I create a "gender molecule." This reveals that "transition" is more like Roman Catholic transubstantiation than the relative position of atoms within a molecule. I discuss other ways that

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transgender theory parallels religious belief systems, and the potential perils of introducing a quasi-religious term like “gender identity” into federal law via the Equality Act. I argue that any feminist organizing, including menstrual advocacy, must carefully consider their position regarding transgender theory and its impact on women and girls.

"Everybody Bleeds . . . Sometimes": Graphic Menstruation Narratives

Jeannie Ludlow, Eastern Illinois University, United States

As an area of study within the Health and Medical Humanities, graphic medicine is predicated on the idea that sequential graphic texts (e.g., anime, cartoons, comics, graphic novels, etc.) can effect challenges to status quo thinking. As Hillary Chute explains, graphic narratives tend toward defamiliarization rather than mimesis, eschewing representation for patent artificiality, concealing and revealing meaning in gaps and gutters and in what Chute calls the “constant, active, uneasy back-and-forth” between words and images (2015, 198-9). In other words, the power of sequential graphic narratives resides in their uncertainties.

This interdisciplinary paper analyzes four graphic menstruation narratives for their counter-hegemonic (as well as their status quo) potentialities. In particular, I am interested in the potential power of these diverse graphic texts to provide counter-narratives to the medicalization and social stigmatization of menstruation, within their specific historical and artistic contexts. The four graphic texts analyzed include: DC comics’ 1985 Swamp Thing #40 “The Curse” by Alan Moore; underground comix artist Julie Doucet’s 1989 “Heavy Flow”; Image comics’ 2017 series Paper Girls by Brian K. Vaughan and Chiang; and “Everybody Bleeds,” episode two of Nick Kroll and Andrew Goldberg’s animated Netflix series Big Mouth (2017). All four texts call into question, in very different ways, the anti-stigmatizing potential of normalization.

Source:

Chute, Hillary. Chute, Hillary. “The Space of Graphic Narrative: Mapping Bodies, Feminism, and Form.” In *Narrative Theory Unbound: Queer and Feminist Interventions*, edited by Robyn Warhol and Susan S. Lanser. Columbus: The Ohio State University Press, 2015. 194-209.

From Private to Public: Shifting from the Politics of Bloodless Respectability to Radical Menstrual Embodiment

Chris Bobel, University of Massachusetts & Breanne Fahs, Arizona State University, United States

While menstrual activism has a robust history rooted in feminist ideals of bodily autonomy and anti-consumerism (Bobel 2010), its current iterations prioritize an anemic

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view of menstruation as overly concerned with the politics of respectability grounded in neoliberalism. As it stands now, menstrual activism has taken up menstrual products as The Answer to “solving” menstrual stigma throughout the world while invisibilizing other aspects of menstruation (e.g., the importance of bodily rebellion, the perils of trans menstruation). In short, today’s menstrual activism has ultimately and ironically moved menstruation out of public view. In this essay, we critically examine three framings used to conceptualize the urgency of menstrual activism: public health, the Water Sanitation and Hygiene (WASH) sector of global development, and the menstrual equity/period poverty movement. Finding fault with each, we argue for a new vision of menstrual activism that prioritizes what we term “radical menstrual embodiment,” a more transgressively feminist approach to understanding stigma and the root causes of menstrual negativity alongside an invigorated connection between menstruation and fertility, sexuality, and gender. By moving away from the hazardous politics of respectability and its product-focused agenda, radical menstrual embodiment can differently engage with the public sphere as menstruation moves from sanitized, clean, and ‘proper’ to messy, authentic and multifaceted.

CS 3.4 Menstrual Taboos TSB Rm. 223

Bloody Periods! Visualising Menstruation to challenge taboos and social norms: insights from Nepal

Sara Parker, Liverpool John Moores University, United Kingdom

This paper will explore the use of visual imagery in menstrual activism in Nepal and seeks to address the way that visual methods are used to empower women to represent their own lives and challenges stigmas and exclusionary cultural practices. In comparison to the visual images on social media from other South Asian countries, media in Nepal is dominated by Chhapaudi. This does not represent the range of work by NGOs and activists aiming to raise awareness. By analysing the online availability of, and reaction to this material insights can be gained into how NGOS and activists can use visual media to promote engagement and social change.

Using Collaborative Filmmaking to Explore Diverse Menstrual Practices and Motivations Among Adolescent Girls in Far-West Nepal

Sara Baumann, University of Pittsburgh, United States

Though chhapaudi is central to the menstrual health narrative in Nepal, there is a dearth of evidence regarding menstrual practices beyond chhapaudi. Nepal is an exceptionally diverse country of 125 caste/ethnic groups, and a nuanced understanding of how menstrual practices and beliefs differ among varied religious and caste/ethnic backgrounds is required. Using Collaborative Filmmaking, seven girls from diverse

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backgrounds created films about their menstrual experiences, which highlighted a range of practices along a continuum. It is recommended that future interventions and policies consider the range of menstrual practices and motivations to ensure context-specificity, and move beyond a narrow focus on chhaupadi, particularly in the ethnically and religiously diverse Nepal.

Menstrual Taboos Beyond the Household: A Qualitative Study Conducted in Kathmandu Nepal

Srijana Karki and Tamara Mix, Oklahoma State University, United States

Menstrual taboos are practiced in a variety of ways throughout Nepal. Menstruating women are often prohibited from entering the kitchen, cooking, going into temples, and in extreme cases may spend four to seven days of bleeding in a separate hut, isolated from family and community. Past studies primarily focus on experiences of women in rural households where menstrual taboos manifest in the most severe forms. Menstrual shame and stigma in urban areas are largely overlooked. In urban areas, practicing stringent customs is not possible due to greater population density, modern values, and changing societal expectations. Likewise women in urban areas also have more access to spaces beyond the household.

We ask, what are women's experiences with menstrual taboos within the household in Kathmandu, Nepal's capital city and urban center? Are menstrual taboos relevant in spaces beyond the household? We adopt Joan Acker's idea of gendered institutions to examine pertinence of menstrual taboos both within and outside the household. Acker defines gendered institutions as the presence of gender in the "processes, practices, images and ideologies, and distribution of power in the various aspects of social life" (1992:567). We examine how taboos associated with menstruation manifest in social institutions like family, school, and workplace in an urban area of Nepal.

Using in-depth interviews with 35 women above the age of 18, we analyze the ways menstrual taboos manifest in spaces beyond the household, such as the workplace and in educational institutions. Our sample was purposefully selected depending on women's interest to participate in the study. Data collection occurred between May and July of 2018 and semi-structured face-to-face interviews ranged from 30 minutes to 2 hours in duration. The sample for this study is a part of a larger project that includes interviews with 70 women discussing a wide variety of menstrual issues in Nepal.

Preliminary analysis suggests that the relevance of menstrual taboos differs in the workplace versus educational institutions. In the workplace, adherence to menstrual rules depends on the kinds of work performed by women. Menstrual practices influence women's work as domestic helpers, providing some relief from the chores they perform

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in their workplace. In other work-spaces beyond the household it is not mandatory for women to mention if they are menstruating. Many women choose to share information with their colleagues as they have been socialized to do so. Findings differed somewhat when women considered menstrual practices and taboos in educational settings. It is not mandatory for women to mention their menstrual cycle in educational institutions, yet, a number of women mentioned that most of their classmates know about the beginning of their cycle. Women are not allowed outside the household for 7 to 10 days during their first menstruation. A number of women mentioned that they choose to share information about their periods with their classmates as they are worried that they might defile religious objects. Our study highlights the dynamic nature of menstrual taboos, illustrating the ways that practices are continuously changing in different institutional settings.

Hidden Yet shared: An Investigation into Experiences of the Menstrual Taboo Across Higher- and Lower-income Contexts

Elizabeth Golden, University of Leeds & Independent Research, United Kingdom

Menstruation is a natural bodily function shrouded in taboos, embarrassment and misinformation. In the past, the term 'Menstrual Hygiene Management' (MHM) has been used widely within academic literature to express menstrual-related needs of women and girls in Lower- and Middle-Income Countries (LMICs). The term referred mostly to products and facilities required to manage menstruation in a safe, private and hygienic way.

Movements towards replacing 'Hygiene' with 'Health' when referring to menstrual concerns has come with the understanding of the broader issues linking menstruation with health and well-being. It is now recognised that factors such as a lack of guidance and education, combined with persistent taboos, result in discomfort, embarrassment, shame and stigma for women across LMICs.

More recently, anecdotal evidence within grey literature suggests that women and girls* in Higher Income Countries (HICs) may experience parallel challenges to those in LMICs, but the focus has tended to be on a lack of access to appropriate/affordable products to manage menstruation, referred to in the UK as 'Period Poverty'.

Both literature citing 'Period Poverty' and 'inadequate Menstrual Hygiene/Health Management' encompass similar issues, yet the term 'Period Poverty' is used almost exclusively with regards to HICs, whilst 'MHM' is almost exclusively adopted when referring to LMICs. Not only does this highlight a gap in empirical research into menstrual health within HICs, but also seems to reflect a wider issue within developmental research that the world is divided into 'us' and 'them', 'HICs' and

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‘LMICs’, ‘Global North’ and ‘Global South’.

This research therefore investigated menstrual-related challenges across both HIC and LMIC contexts, using the UK and Uganda as case studies. Semi-structured interviews were conducted with key informants to gather adolescent girl’s menstrual narratives, with a specific focus on taboos.

Findings established through thematic review, revealed several key similarities across the countries. They suggest that despite the variability of allocation of resource and adequacy of facilities among HIC and LMIC contexts, girls’ feelings and reactions to menstruation may be very similar, likely due to common taboos. These aspects may not be culturally specific, nor exclusively an issue concerning LMICs, they may be universal experiences.

This research demonstrates the need to think holistically about the nature of menstrual health concerns if we are to achieve Sustainable Development Goals (SDGs) 5: Achieve gender equality and empower all women and girls; and 6: Ensure availability and sustainability of water and sanitation for all. There is a need to move beyond ‘Period Poverty’ and the differentiation between lower- and higher-income countries. By demonstrating to people living in HICs that issues surrounding menstrual health exist within ‘Western society’ in ways that are similar to LMICs, we can challenge the tendency to think about ‘us’ and ‘them’ in ways that break down barriers and build learning across societies.

12:30 pm – 2:30 pm

Bemis Hall

PLENARY & BUFFET LUNCH

Film: The Invisible War on Blood by Ishwari Rajak.

People around the world follow different traditions, beliefs and taboos about menstruation. This documentary presents the parallel between people who menstruate in the United States and women/girls who are in menstruation huts, Chau (a tradition called *Chaupdai*) in Nepal.

SMCR Update and Reports

In Memoriam: Honoring Menstrual Researchers

Maureen McHugh

2:30 pm – 3:30 pm

Tutt Science Bldg (TSB)

Concurrent Sessions (CS) #4

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CS 4.1 Menstrual Inequities: Work and Housing TSB Rm. 214

Perceptions of Menstruators Who Take Menstrual Leave: A Vignette Study

Jessica Barnack-Tavlaris, The College of New Jersey, United States; Rachel Levitt, Michelle Reno, Kristina Hansen

Historically, Western cultures have stigmatized menstruation (Peranovic & Bentley, 2016). It is a natural process, necessary for reproduction, yet it has been traditionally associated with uncleanness and impurity (Johnston-Robledo & Chrisler, 2013; Roberts et al., 2002). Any sign of menstruation, such as openly carrying a pad or tampon, may result in being viewed as less competent, reliable, and likeable (Roberts et al., 2002). Menstrual leave is a type of leave/sick time where menstruators are given the option from their workplace to take paid or unpaid leave if they are menstruating and unable to attend work. Because menstrual leave has not yet been implemented or studied in the United States, it is important to examine attitudes towards and beliefs about menstruators who may take this type of leave. Menstrual leave may be helpful to menstruators who experience severe cramps and other menstrual-related illnesses/symptoms. However, menstruators who take this type of leave may be viewed as less competent, reliable, or likeable because of the attention brought to their menstruation. The stigma surrounding menstruation may influence co-worker and employer views of menstruators taking leave. The purpose of this study is to examine people's judgments of menstruators who utilize menstrual leave policies compared to menstruators who take time off for other reasons. Based on previous literature, we hypothesized that menstruators who utilize menstrual leave will be rated more negatively (less likeable and competent) than menstruators who take time off for other reasons. These findings could potentially inform menstruators and policy makers of menstrual leave's possible implications.

We collected data from 607 men (52.4%) and women (47.3%), recruited through a national online database, Amazon's Mechanical Turk (MTurk). Participants' ages ranged from 18-65 ($M = 32.92$). Most (~93%) were employed at least part-time. Participants were paid \$1.00 for completing the study. Participants were told that the study was being conducted to understand attitudes towards workplace absenteeism. Participants answered demographic questions, and then read a short vignette/scenario about "Anne" who took off work for one of 5 reasons (child was sick, back injury, used menstrual leave for cramps, used a sick day for cramps, or took a sick day with no explanation). After answering a manipulation check, participants evaluated Anne on various characteristics including competence and likeability using adapted versions of the Interpersonal Attraction Scale and the Cognitive Evaluation Scale (Montoya & Horton, 2004). We conducted multivariate analysis of variance to examine the effect of Anne's reason for missing work on participants' evaluation of her competence and likeability. We conducted analyses separately for participant gender. When examining male participants, Anne's

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reason for missing work had a significant effect on men's evaluation of her competence. Male participants rated Anne as significantly less competent when she took off for cramps or took menstrual leave, compared to taking off for her child's sickness. Female participants rated Anne as more competent when she took a sick day for cramps compared to taking an unexplained sick day. Conclusions and policy implications will be discussed.

Menstrual Leave; Good Intention, Bad Solution

Sally King, Menstrual Matters & King's College London, United Kingdom

Over the past few years, there has been increasing media and public attention on the topic of 'menstrual leave'- an employment policy that allows women to take paid or unpaid leave from work if severely affected by menstrual cycle-related symptoms. The motivation behind the promotion of this policy is typically benign, and 'menstrual leave' is often positioned as being a progressive development for women's health and rights in the workplace. However, upon closer inspection, the rationale behind this gender-specific policy makes several exaggerated assumptions about the nature, and prevalence, of menstrual cycle-related symptoms in the working population. Furthermore, research suggests that menstrual leave policies could actually be damaging to the health and social position of women in the workforce. This paper argues that gender-based employment policies, such as menstrual leave, can easily (albeit accidentally) reinforce unhelpful and inaccurate societal myths that position 'all women' as weaker, less reliable, or more expensive employees than men.

Menstruation, Reproductive Health, and Housing: Reports from Women Living in a Transitional Homeless Shelter

Ashi Arora Heather E. Dillaway, Wayne State University, United States

This presentation (and the study on which it is based) focuses in on the menstrual and other reproductive health experiences of women who lack access to stable housing. To place this study in context, the vast majority of homeless people report having at least one unmet health need, including medical, surgical, mental health, vision, dental or unmet prescription needs. It is already documented that homeless women also have higher rates of poor health status, mental illness, poor birth outcomes, and maternal mortality. Further, homeless women lack access to preventative and reproductive health care including prenatal care, mammograms, and pap tests. Thus, the purpose of this qualitative study is to highlight the everyday menstrual and reproductive and health experiences of one group of impoverished women in one midwestern city, in order to help shelters better understand their residents' needs and develop interventions that might sustainably serve homeless women. The results shared in this presentation come from focus groups conducted in 2018-2019. Focus group participants are homeless women residing in a

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transitional housing shelter in one midwestern city. Participants were asked questions about their access to family planning resources, prenatal and maternal care, postpartum care, and menstrual hygiene and management routines. Women were also asked about other reproductive health needs. Women's perceptions of their access to hygiene products, water, and sanitary spaces, as well as strategies for menstrual management, were evaluated in detail. Demographic and reproductive history information was collected via questionnaire at the end of each focus group, to bolster our understanding of the residents' reproductive histories. Early results of this study indicate adequate access to hygiene products. However, participants reported other barriers to menstrual management and family planning, including misconceptions about reproductive health and healthcare, shelter policies, and lack of access to health services. Focus group conversations also revealed that residents often turn to each other for informational and emotional support, and that some health concerns (such as miscarriage and mental health issues) need greater attention.

CS 4.2 Cultural Context of Menstruation TSB Rm. 218

Migrant and Refugee Women's Construction and Experiences of Menstrual Bleeding Across the Lifespan.

Alexandra Hawkey, Jane Ussher and Janette Perz, Western Sydney University, Australia

Understanding migrant and refugee women's embodied experiences of menstruation and menstrual change is of particular importance. Migration has the potential to introduce women to new and competing discourses surrounding aspects of their sexual and reproductive health, while at the same time, changing the social, cultural and political context in which this embodiment is lived. However, little is known about how migrant and refugee women negotiate or embody menstruation and menstrual change. This study examined the construction and experience of menstruation and menstrual change among migrant and refugee women who had settled in Australia or Canada in the last 10 years. Eighty-four individual interviews and 16 focus groups comprising 85 participants were conducted (total n =169), with women aged 18 years and over from Afghanistan, India (Punjab), Iraq, Somalia, South Sudan, Sri-Lanka (Tamil), Sudan and various South American (Latina) backgrounds. Thematic decomposition identified three discursive themes; menstruation as a signifier of womanhood; menstruation as shameful and silenced and menstruation as purification. These constructions had significant implications for women's positioning and experience of menstruation/menstrual change and embodiment across the lifespan. These findings have a number of practical implications for service providers and sexual and reproductive health educators.

Men and Menstruation: Is Focusing Menstrual Education on Women the Most Effective Way to Bring about Change in India?

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Leila Owens, Princeton University, United States & Jatan Sansthan, India

This paper explores the impact, and means, of effective implementation of MHM trainings for men as well as workshops where men learn to sew reusable pads. The need for such trainings as well as their utility when compared to similar trainings aimed at women will also be analyzed through the lens of UGER's work in Northern India.

UGER is a project created in 2011 by Jatan Sansthan, a grassroots NGO based in Udaipur, India. UGER seeks to abolish the stigma surrounding menstruation and foster healthy menstruation habits in women and adolescent girls throughout India. Since its inception, UGER has been running sessions for women and frequently has had events for the community as a whole. In the past three years alone, there have been more than 100 workshops run. In addition, for the past five years, UGER has implemented various MHM trainings aimed specifically at men.

Analysed reflections from male MHM training participants, the women in their lives, and UGER staff form the argument that the inclusion of men in menstrual advocacy is necessary for true societal change.

The Role of (De)Stigmatization in Institutional Change -A Case Study of Standardization in the Menstrual Hygiene Product Field

Louise Klintner, Lund University, Sweden

Most women menstruate between three to seven days each month for about 40 years, which amounts to around 2400 days in a lifetime. In order to manage menstruation, certain products exist to enable women to carry on with our normal lives, as much as possible. Menstrual hygiene products (MHPs) are used on or inside the body by those women who have access to and can afford them. While most products that are intended for such intimate use are highly regulated, tested and monitored, there is a lack of regulation or standards that ensure the safety of the contents and physical properties of MHPs. There seems to be a lack of institutional frameworks to handle this type of issue and it goes for even the most developed and equal countries, globally. For this reason, an institutional approach was used for the purpose of increasing the understanding of how stigma affects institutional forces in a field setting (Scott, 2013).

In order to investigate this troubling empirical phenomenon, the question that surfaced was "why are there no standards or regulations on MHPs?" To address this question, in-depth interviews are held with a number of actors in the field, who could potentially have played a role in the hypothetical regulation or standardization of MHPs. Conveniently enough, Sweden has a relatively protective government, which should theoretically ensure the safety of its consumers, where one of the largest producers, globally, has its

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headquarters, namely Essity, and where the stigma surrounding menstruation and, hence MHPs, is currently changing. Respondents include representatives from Swedish organizations such as consumer organizations, governmental agencies, corporations etc. Furthermore, the primary stages of standardization have been initiated together with the Swedish Standards Institute in which participant observation will be conducted as a further source of data.

Most significantly, the study thus far indicates that there are a number of possible factors affecting this changing field, and an important one seems to be the stigma surrounding menstruation and the products associated with it. This prompted me to consider the wider question “what forces are affecting the ongoing institutional change (destigmatization of menstruation) and how?” Organizations have been shown to act in particular ways depending on the institutional environment or field in which they act. Factors that shape institutional fields include taken for granted values and beliefs, formal and informal regulations, religiosity and political ideologies. One kind of taken for granted notion is stigma, which has consequences for how actors behave in a given field. This has been addressed by marketing researchers, but instead of placing focus on the field as such, they have primarily studied the effects on consumer preferences and attitudes. However, stigma appears to have wider consequences than that. From a strictly logical point of view, it would be reasonable to expect that products that we use inside or on our bodies were guaranteed to be safe. Hence, there appear to be strong forces at work that guide thoughts and actions around MHPs and so structure the entire field in which they are produced and regulated.

Although tentative and preliminary, as the project is not yet entirely completed, findings indicate that the culture of silence surrounding the menstrual stigma has crippling effects on the development of the field including innovation, product development, research, regulation and standardization. This likely affirms the notion that people strive towards disassociation with stigmatized products, but what also seems visible is that the strength of the stigma matters, and is dependent on demographics in combination with influences such as religiosity, socio-political trends and cultural beliefs, which currently seem to be changing.

CS 4.3 Scotland’s Bloody Revolution – Menstruation Policy, Research and Activism

TSB Rm. 221

In August of 2018, the Scottish government pledged to invest £5.2 million to provide free menstrual products in all schools, colleges and universities. The policy is designed to provide easily accessible products to all pupils and students, regardless of financial need. With this vote, this small country became a world leader in menstruation policy. The movement toward the Scottish “End Period Poverty” scheme has been building for years,

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through the work of activists, researchers and policy-makers. The goal of this panel is to share and discuss past, on-going and future research on menstruation in Scotland during this pivotal time.

This panel brings together researchers from varied disciplines to discuss the complexities of rolling out the new Scottish policy and to share their work on menstruation research in Scotland. These panellists are members of the newly formed Menstruation Research Network of researchers and activists in the United Kingdom (UK). They represent a broad range of disciplines; including art history, gender studies, health and medicine, sport studies and development studies.

To begin, we will present further detail on the new Scottish policy and share our own, informal, findings from three Scottish universities. Our goal is to highlight the resources devoted to enacting this scheme (e.g. campus maps with locations marked for menstrual products), university communication and outreach on the policy and (briefly) introduce information on corporate suppliers (to be discussed further in Paper 1).

Following this overview, Dr. Rostvik will discuss our cross-disciplinary research network on menstruation in the UK. She is the lead applicant for the Wellcome Trust grant award that is supporting our Menstruation Research Network, a UK-wide network of academics, activists, industry representatives, health care professionals (National Health Service (NHS)), third-sector organizations, artists and more. This network is the first of its kind in the UK and will host three workshops in the 2019-2020 academic year.

After presenting and discussing as a whole group, panellists will present their specific research projects on menstruation in Scotland. Dr. Rostvik will present her work on corporate sponsorship and marketing of period products, with a focus on how commercial interests impact the implementation of the new policy. Dr. Standing and Dr. Zipp will present findings from their study of the ""On the Ball"" campaign, a grassroots movement to lobby football clubs to provide free menstrual products at their stadia. The campaign began through the work of three fans at Scotland's most successful club, Celtic (Glasgow). Finally, Dr. Warner will provide a clinical perspective on decades of medical research in Scotland, focusing on the patients' experience of menstruation and calling on policy-makers to go beyond product provision to address patient needs.

Corporate Sponsorship, Free Products and Historical Change in Scotland

Dr. Camilla Mørk Røstvik, University of St Andrews.

As the Scottish government policy to provide free menstrual product is rolled out in 2019, the country finds itself in uncharted territory. While Scottish NGOs and start-ups such as Hey Girls campaign to end period poverty, the US and Sweden-based companies Procter &

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Gamble and Essity still dominate free vending machines. This paper examines the historical change for menstruators in Scotland, and asks what the practical and long-term consequences may be. It focuses on the corporate landscape before and after the policy came into effect, and explores the complexities inherent in providing free menstrual products.

Getting” On the Ball” – the campaign for free menstrual products at football clubs in the UK

Dr Kay Standing, Liverpool John Moores University; Dr Sarah Zipp University of Stirling.

In May of 2018, three supporters of the Celtic Football Club in Glasgow (Scotland) started the ‘On the Ball’ campaign, petitioning Celtic to provide free menstrual products in their stadium. Their goal was to create a more inclusive environment in football and raise awareness on period poverty in Scotland. Celtic management agreed, launching the trial in August. Since then, more than 50 football clubs in the UK have followed suit. Based on interviews with football club directors, activists and surveys with fans, this paper examines the motivation for clubs to provide menstrual products and the impact of the campaign.

Clinical health perspectives on menstruation in Scotland

Dr Pamela Warner, University of Edinburgh

Menstruation is freighted with social-cultural beliefs and barriers to discussion. There is uncertainty where, along the continuum of menstrual experience, ‘female lot’ ends, and health problem starts. Menstrual problems encompass three main variants, mostly considered as separate research/clinical entities, albeit frequently co-occurring - heavy menstrual bleeding (HMB), period pain and cycle-related mood/ physical symptoms (PMS). This paper draws on Scottish research going back nearly 2 decades (n>2800), which included multi-faceted subjective assessment of menstrual cycles (encompassing pain, PMS and HMB, including consequences of HMB (e.g. bleeding containment costs), to reflect on Scottish government policy and emphasise that support for containment costs is not all that is needed.

CS 4.4 Menstrual Pedagogies TSB Rm. 223

Young people learn about menstruation from a wide variety of sources including both formal education and the informal exchange of information. Menstrual education is important because how girls and others who menstruate learn about it impacts their attitudes and experience of it, as well as their relationship with their bodies and self. Similarly, menstrual knowledge has implications for their reproductive and sexual health, including sexual risk taking, as well as their general wellbeing. Despite the demonstrated importance of menstrual education, surprisingly little research has focused on best

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practices for teaching or learning about menstruation. This panel will examine menstrual pedagogy as an empowering and transformative tool to educate girls and women about their menstruation and their bodies.

"My Body, My Power": Menstrual Education for Girls in Restorative Care

Leslie Botha

Leslie Botha has developed educational programs on body literacy to empower at-risk girls (ages 13-17). She will present her curriculum "My Body, My Power" which was developed specifically for young girls who have been abused, incarcerated and placed in restorative care. Her menstrual health education curriculum enabled these young women to understand the connections between their mind, moods, and hormone cycles. One way in which girls' increased menstrual knowledge empowered them to be more engaged with their bodies was through a lesson on menstrual charting as an art project! This presentation will share aspects of the curriculum, a portfolio of girls' charts, and the impact menstrual education had on these girls' lives.

Pakistani Girls' Empowerment: The Menstrual Hygiene Management Intervention Program

Urooba Ahmed Fatima, Hampshire College

Urooba Ahmed Fatima will discuss her efforts to empower girls and women in Pakistan through the Menstrual Hygiene Management Intervention Program. This program aims to educate young women in Pakistan about their menstrual health, including strategies to maintain their hygiene through affordable and environmentally-friendly options. The program is divided into three major components: anatomy, options for sustainable menstrual products, and emotional wellness during menstruation, including debunking common myths and misconceptions around menstruation. Currently in Pakistan there are not any educational components that address menstruation in the health curriculum or school-based education. Therefore, implementation of this culturally specific program has significant implications for girls' and women's menstrual education, empowerment, and to shatter menstrual taboos.

Stop, Collaborate and Listen: Excellence in Education and Advocacy Partnerships

Chella Quint, #periodpositive, United Kingdom

Chella Quint of #periodpositive will present work from the 2016-2018 education and awareness collaboration between #periodpositive, WaterAid, and Girlguiding UK. With Girlguiding UK, Chella shared her practice as a workshop leader and spokesperson for the Action for Change project, as a consultant on the period poverty campaign and badge with the Guides' Young Advocates, and spoke at both internal and external WaterAid events.

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Fellow educator Maria Georgiou, education officer for WaterAid, wrote the teaching resources for earning the Girlguiding period poverty badge and supported Chella with her week-long educational performance stunt at the Edinburgh Fringe Festival. This paper analyses their joint work to explore the effectiveness and rationale behind different organisations with varied starting points but shared education outcomes working together. It includes both qualitative and quantitative evaluative data from young participants and project leaders on the reach and response to regional workshops, educational resources, and media events. Recommendations and learning points for future collaborations between educators, activists, and charities will also be addressed.

Period Pedagogies: A Menstrual Product Investigation

Jill Wood, Penn State University, United States

Jill Wood will discuss her use of a teaching tool that enables undergraduate college students to think critically about how menstrual products shape menstrual discourse, menstrual knowledge, and individuals' experiences of their own menstruation. The assignment "A Menstrual Product Investigation" requires students to visit a (physical) store that sells menstrual products to identify the messages, themes, and meanings associated with menstruation through observing the sale of menstrual products. Through direct observation and experiential learning, students investigate what 'choices' are available for various types of products and what themes and messages are inherent in the placement and advertising of these products in the store. Students' response to this assignment is overwhelming positive as they discover that the menstrual product industry sells more than products, they also 'sell' menstrual shame, the need for menstrual concealment, and menstrual (mis)information.

3:30 pm – 4:00 pm

Break

4:00 pm – 5:00 pm

Bemis Hall

Award Announcements

Call to Action: Gallery Walk and Interactive Exercise with Graphic Recorder

Throughout the conference, our graphic recorder Karina Branson of ConverSketch visually documented the key points from keynotes, plenaries, panels and symposia. In this session, we create an active and complex discussion to build connections and keep the conversation alive.

7:00 pm – 10:00 pm

Cornerstone Arts Center

Closing Celebrations

Performance: *Menstrual Accessory* by Vanessa Dion Fletcher

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Vanessa Dion Fletcher is a Potawatomi and Lenape two-spirit artist that looks to her ancestry to inspire a powerful body of work. With *#Menstrual Accessory* Dion Fletcher turns an often private female bodily function into a fashionable, public happening.

Red Moon Howl – Poetry Slam Open Mic

Calling all poets, performers and menstrual enthusiasts to “howl” in Colorado Springs’ first (and SMCR’s 4th) Menstrual Poetry Slam.