

DISCOURSES OF MENSTRUATION:
Girls, Menarche and Psychology

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ABSTRACT

This thesis is an investigation into the discourses and practices of menarche in psychology, in British culture and among young adolescents. Part I discusses the findings and limitations of current psychological theory about and research on adolescent girls' knowledge and experiences of menstruation through a review of psychological literature and a research project with young adolescents. The research project consisted of three studies: a series of informal group discussions on "Growing up"; questionnaires on aspects of self-concept and attitudes to menstruation with 80 boys and 87 girls; and interviews on expectations and experiences of menarche with 44 girls. The review and research demonstrate adolescents' negative attitudes to and lack of knowledge about menstruation and the limitations of 'traditional' psychological research. Neither traditional psychological practice nor a more feminist inductive content analysis were able to account for the patriarchal nature of menstrual knowledge, the meanings of menstruation for adolescents or girls' subjective experience of menstruation. Part II traces the emergence of patriarchal conceptions and practices of menstruation in British culture and Western psychology. This is done through a discursive analysis of: the female body, sexuality and menstruation from 1600 to 1850; the scientific debates about 'The Woman Question', the female body and menstruation from 1850 to 1914; and the emergence of the 'pre- and postmenarcheal girl' in 20th century psychology from 1937 to the present. Part III presents a feminist poststructuralist discourse analysis of the inscription of young British adolescents into menstrual discourses. This is done through an analysis of the group discussions and interviews with adolescents which discusses: the discourses available to young British adolescents to make sense of menstruation, what menstruation comes to mean to adolescents and how these discourses, practices, and meanings constitute girls' subjectivity.

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The undertaker led the little coffin away
from all the other headstones to the
boundary wall. 'Suicide', he told me.
The 13 year old girl had started bleeding;
she knew there was something very wrong
and there wasn't anyone to ask.

Dr. Chad Varah
Founder of Samaritans

Where language and naming
are power,
Silence is oppression,
is violence.

Adrienne Rich (1977)

INTRODUCTION

This thesis is about the discourses of menstruation available to girls and women living in late 20th century British society to understand and explain the (bleeding) female body. It is also about my struggle to understand and explain the place of menstruation in psychology and female subjectivity. When I began this research I was interested in questions about how girls' self-concept and feelings about themselves might change as they mature physically and begin menstruation. My initial approach to these questions was shaped by traditional academic psychology - a psychology which is formulated "as a coherent and individuated scientific discourse."¹

As I came to understand during the course of my research, this traditional scientific psychological discourse seeks to produce rational and objective explanations of a discrete and unified 'self' that are 'true'. Its claims to truth are based on its formalised methods of experimentation, data collection and analysis with an emphasis on reliability and validity.² The researchers' values, commitments and experiences are considered to be irrelevant in this scientific approach to psychology: they are seen as 'personal issues' to be controlled and excluded because they contaminate data and bias results. These concerns with bias, control, reliability, validity and objectivity result in a focus on the micro processes of the research endeavour. It is assumed that "ignoring the constitution of science within political desires, values and interests will somehow increase the reliability of accounts of nature and social life."³ And it was within these discursive practices that I was trained as an undergraduate and postgraduate psychologist. And it was from this standpoint that I began my doctoral research.

However, as a feminist I found this positivistic psychological standpoint incompatible with my commitment to the improvement of women's position in science and society. The way in which rational science separates the means of doing research from its ends, removes

the researcher from the research process and assumes that 'facts' can be collected on the social world could only too easily put me in the position of simply reflecting and perpetuating the "unequal power relations which already exist in society."⁴ As I sought for my research to have a feminist perspective, I did not want to detach myself from my research or to present my research:

...in such a way that we strip 'ourselves' from descriptions, or describe our involvements in particular kinds of ways - as somehow 'removed' rather than full-blown members of the events and processes we describe.⁵

However, in the first part of my research on the social psychology of menarche this was exactly what I found myself doing. This was a difficult period for me. On the one hand I did the literature review, formulated a research design, planned the research programme and carried out data collection. On the other hand I found myself without an adequate feminist theory or method to account for my research findings or experience. Even more difficult was the changing nature of my research interests and questions. As I learned more about the place of menstruation and menarche in psychology and the lives of girls, I wondered why there was so little psychological research on menarche and 'normal' menstruation? Why did my research and other's research reveal such negative attitudes to menstruation? Why was I finding it so difficult and embarrassing to talk about my own research? Where did this negativity and embarrassment come from? And what did menstruation and menarche mean to young adolescent girls?

Part I of this thesis presents my struggle to find a feminist psychological theory and method for my research. In Chapter 1, "Research on Menstruation with Adolescents", I introduce the early stages of my doctorate research in which I reviewed the literature on adolescents and menarche, defined the aims for the proposed plan of research, did the preparation for the data collection and conducted the first phase of the research. In brief the data collection consisted of three parts: i) group discussions, ii) psychometric testing and

iii) interviews. The first phase of the research including the group discussions raised difficult questions about my research aims, theory and methods. As I struggled with these I continued into phase two - the psychometric testing. In Chapter 2, "Menstrual attitudes, knowledge, and effects", I present the results of this testing both in terms of what it does tell us and what it does *not* tell us about young adolescents' attitudes to and knowledge about menstruation. In Chapter 3, "Girls' expectations and experiences of menstruation", I discuss what was to have been the third phase of the proposed research - the interviews. Here the problems with a traditional psychological approach became acute: the interview material did not lend itself to hypothesis formulation or quantifiable methodologies. It was even difficult to use a more feminist contextual analysis on what was proving to be a difficult subject - the female body and menstruation.

It turned out there were no easy solutions. From the beginning of my research I had been interested in a feminist critical psychological approach; however, my research was under the direction of two male psychologists committed to a positivistic psychology. We manage to bridge this divide in the early stages, but as I carried out the research the difficulties and dilemmas of bridging these two positions proved to be more problematic than I had imagined. I needed a different approach - one which could deal with history, contradictions, values and subjectivity and one which could address questions of speaking, silence and meaning. I almost gave up at this stage. Then I had the good fortune to attend a conference on "Discourse and Gender" and here I realised there was a psychological theory and methodology which could address my questions and concerns. I transferred my doctoral research to Goldsmiths' College and a female (feminist) professor interested in girls, subjectivity and 'postmodern' psychology. I made, what was for me, the difficult change from a more traditional psychological approach to a feminist poststructural discourse analysis. This change opened the space for me to pursue the questions about menstruation and menarche which had arisen in Part I of the research: questions about the place

of menarche and menstruation in psychology, the sources of negativity and everyday ignorance and silence about menstruation and the meaning of menstruation for young adolescent girls. It is these questions which are addressed the second and third parts of this thesis.

Part II on the historical construction of the female body and menstruation in Western culture discusses my change of theory and presents my historical analysis of the present psychology of menarche. In Chapter 4, "Poststructural psychology and discourse analysis", I discuss the specific approach I take to discourse analysis and histories of the production of knowledge. Although discourse has a 'history in psychology', there are so many positions taken and methods prescribed⁶ that it is necessary to situate my approach and explore my assumptions. In Chapter 5, "Constructing the Menstruous Woman in British Culture", I trace the changing conceptions of the female body, sexuality and menstruation from 1600 to 1850. In Chapter 6, "The Woman Question", I identify the effects of changing conceptions of the female body/nature, the rise of feminism and the development of the modern human sciences on theories and practices of menstruation from 1850 to 1914. And in Chapter 7, "Girls' Menstrual Milestone and Trauma", I chart the psychological interest in menarche and adolescent girls from its emergence in the 1930s through to its construction as a developmental milestone signalling womanhood in the 1990s.

Having established the status of the menarcheal girl in modern psychology and related human sciences, I then analyse the inscription of young British adolescents into the discourses of menstruation in Part III. In Chapter 8, "Girls and boys talking (bleeding) bodies", I investigate the discourses and practices available to young adolescents in relation to menstruation and, therefore, what menstruation has come to mean to them and how these discourses, practices and meanings constitute girls' subjectivity. In Chapter 9, "Girls' talk about menarche and menstruation", I discuss the discourses available to girls to understand their changing bodies, how their subjectivity is constituted in relation to learning about menstruation and girls'

expectations and explanations of menarche and menstruation. The thesis ends with Chapter 10 in which I reflect on and summarise my research, consider its limitations and comment on its implications.

Once this research had been more or less completed I was faced with a further difficulty: how was I to write the thesis? I could have presented the research as if I had begun with a discourse analysis; however, given the difficulties and constant changes this did not seem to be the right or the most helpful way to do it. Not only had I not done this, but my experiences and struggles as a feminist, a psychologist and a woman doctoral student had been an integral part of this project to find a feminist psychological approach and to understand the meaning of menstruation for girls. I argue with other feminist researchers that reflecting on my place within the research is a central part of the process and product which also enables a greater understanding of a group's or individual's experience.⁷

This was brought home to me when I gave a paper on "Text and the Bleeding Body: Doing (Feminist) Discourse Analysis" at the 1993 Crossing the Waters Conference. Here I talked about my difficulties with supervision, theory and methodology discussing how I had changed to a different place and approach. The interest and comments of the audience, especially women attempting to start or complete doctoral programmes, made me decide to write this thesis as a narrative of change. Not only can this be justified by reference to the narrative tradition in women's work and feminist scholarship or to the usefulness of such an account to other women researchers, but to some extent it was the only way I could write it. This is therefore not a thesis in the style of the rational scientist from which the author, her history and desires are stripped. This is a thesis in the style of a narrative ^{and} ^{*(see below)} It tells the 'story' of my doctoral research into the discourses of menstruation and girls, menarche and psychology.

* to the extent that I have not begun the thesis with the traditional review of the literature. Rather, to mark my break with a positivistic psychological approach, the literature is initially reviewed through the use of footnotes in conjunction with the opening text and more critically reviewed later in Chapter 7.

PART I

THE SOCIAL PSYCHOLOGY

OF

MENARCHE

CHAPTER 1

RESEARCH ON MENSTRUATION WITH ADOLESCENTS:

preparation, problems and doubts

INTRODUCTION

The original intention of my doctoral research was to investigate the effects of menarche on adolescent girls' views of and feelings about themselves. I was interested in questions about how girls' self-concepts change as they mature physically and begin menstruation. Questions about whether puberty and menarche result in girls feeling better or worse about themselves, does their self-esteem become higher or lower? How does puberty and menarche affect girls' motivations and ambitions, do they become more stereotypically feminine or not? And how do young British adolescent girls view menstruation and how do these change as they start menstruation themselves, what are their expectations and experiences of menarche?

From the social psychology research on menarche, I learned that adolescents of both sexes from a variety of countries held primarily negative attitudes to menstruation and lacked accurate information.⁸ There were a significant number of girls, depending on their cultural or socio-economic background, who were unprepared for the onset of menstruation. There was evidence that a lack of preparation for and/or negative expectations of menstruation could result in girls' having negative reactions to menarche⁹ and an increase in negative menstrual symptoms.¹⁰ The mother role's was often considered of prime importance in the socialisation of girls' attitudes and expectations about menstruation.¹¹ In contrast to Helene Deutsch's psychoanalytic formulation of menarche as traumatic,¹² subsequent studies by developmental psychologists did not show menarche to be particularly traumatic,¹³ nor did it appear related to girls' self-esteem or self-image.¹⁴ However, it was still considered a memorable and significant event for girls, often signifying the assumption of an adult feminine role.¹⁵

Boys were more likely to be ignored by researchers, while the limited research into their attitudes and beliefs indicated that boys were more likely to ignore the subject themselves.¹⁶ Fathers appeared

to be uninvolved in the communication of information about menstruation to either boys or girls.¹⁷ However just as research into boys and menstruation was limited, there was little research into fathers and menstruation.

I found these findings informative, but I did not know how they related to British adolescents. At the time of my literature review in 1989/90, there was no published psychological research into British adolescents' menstrual attitudes, expectations or knowledge. Nor had my previous British training and experience with adolescents informed me about their views of menstruation. In my own professional training and experience as a youth worker, teacher and educational psychologist,¹⁸ I have no memory of ever discussing or studying the subject.

I find it difficult to admit that as a professional woman preparing to work with adolescents, particularly girls, that this aspect of female experience could have been so absent from my study and practice. It was only on reviewing my practice notebooks and the basic required texts that I realised how absent it was. I am amazed and disconcerted. I did at least three in-depth studies of adolescent girls and menstruation was not discussed once. For my Diploma in Adolescent Development, our basic psychology text was The Psychology of Adolescence.¹⁹ In this text there was no mention of menstruation. There were only two references to menarche, one in the development of the reproductive system, "and in girls breast development and menarche", (p.39) and one a graph of "YEAR OF MENARCHE" (between pages 40 and 41). In six²⁰ of the basic texts for my educational psychology training, neither menstruation nor menarche had a single listing in any of the subject indexes.

Even in my practice as a youth worker and a secondary school teacher, I do not remember discussing the subject either with staff or young people, including the girls with whom I worked. We must have been aware of girls' periodic requirements, but they were viewed as hygiene/health problems belonging to the marginal world of girls' toilets, school nurses or women P.E. teachers. I admit to a certain

amount of dismay that menarche and menstruation have been so disregarded that they have not been spoken or written about in so much of mainstream adolescent psychology, sociology or education. Although some feminists argue that the social construction of menstruation promotes the patriarchal devaluation and subjugation of women,²¹ I would argue that it is not a conspiracy by men or women²² authors or practitioners to denigrate female bodies or experiences. Rather as professionals in Western society, our practices and views are shaped by the same cultural forces which create girls' 'negative' attitudes to menstruation, boys 'ignoring the subject', 'the importance of the mother' and the 'uninvolved' father.

In planning my doctoral research, I could have made British adolescents' menstrual attitudes and knowledge the primary focus of my research: there was, and still is, a lacuna in this area of British social and developmental psychology research. But I wanted to go beyond attitudes and knowledge if I could. In part this was because I suspected that my research would reveal similar findings to those already published about adolescents in Western Europe and the U.S.A. In part I was searching for data and methods that would take me beyond the current normative findings and practices of 'traditional'²³ mainstream psychology. I was becoming intrigued by the sources of these negative attitudes repeatedly reported, but never accounted for, and about the meanings that menarche and menstruation might have for girls.

At the same time as I was planning my research design, I was following what I described in my research journal as "parallel paths". One path was that of traditional social psychological²⁴ theory and method which is based on attitude research, questionnaires and controlled studies, statistically analysed. I was encouraged this way by my research supervisors, two males psychologists who were working in the positivist scientific tradition of hypothesis formulation and statistical analysis. The other path was that of feminist and critical psychology. I was pulled this way because of my own feminist commitment²⁵ and because I was teaching a third year university

psychology option on "Gender Issues in Psychology". A key theme in this course was feminist critiques of Western science and psychology.²⁶

At this early stage, I was still managing to straddle the divide between these two approaches so that my supervisors and I were able to agree a research design and programme.

PROPOSED PLAN OF RESEARCH

Aim of the investigation

The aim of the investigation was to research the experience of menarche and menstruation in relation to aspects of female identity and self-concept and to consider its theoretical implications for female adolescent development.

Proposed plan of work

The proposed plan of work was a study of adolescent girls from 1989 to 1991 and their social environment in relation to aspects of their development particularly menarche and menstruation. The methodology was to be:

i) Group Discussions: semi-structured group discussions with three groups of girls and three groups of boys in the first year of a secondary school in South West Britain.

ii) Psychometric Testing: psychometric testing using paper and pencil tests with approximately 80 girls and 80 boys²⁷ (aged 11 to 12 years old) in the first year of a secondary school in South West Britain. The tests were to include background data, a semantic differential, a self-esteem inventory, a possible selves questionnaire and a menstrual attitude questionnaire with the testing to take place every year for at least 3 years.

iii) Semi-structured Interviews: all female participants in the first year of the above school were to be interviewed on aspects of self-concept, possible selves, significant life events, physical development and menstruation. The interviews were to take place every year for at least 3 years.²⁸

iv) Parental Interviews: one interview with the parent(s) of each female participant covering parental reactions and attitudes to their daughter's menarche. (This was one part of the research plan that was never undertaken.)

This proposed plan of work was to be in four phases. The first phase was to be the preparation for the research and data collection. One part of this was to obtain the necessary approval for the research from the relevant education authorities, schools and ethics committee of my university. The other part was to be the pilot testing and preparation of the questionnaires and interview schedules. The group discussions were considered part of the pilot testing. The second phase was to be the recruitment of participants and the administration of the questionnaires. The third phase was to be the interviews. These three phases were to be completed in the first year of the data collection. The fourth phase was to be the re-administration of the questionnaires and the interviews with the same participants over the following two years.

As there had been no multi-method or multi-measure studies with girls before and after their menarche,²⁹ this research design promised a distinct contribution to psychological knowledge as well as opportunities for originality. And because it was a multi-method and multi-measure design being done on a subject of interest to women by a woman, it promised possibilities for both a traditional analysis and a feminist analysis.

PHASE ONE: APPROVAL AND PREPARATION

Approval

My reading of the psychological literature on menarche and my conversations with interested professionals impressed on me that menstruation can be a 'difficult' subject to research, especially with children or adolescents. Not only is menstruation considered a socially 'taboo'³⁰ subject especially in any public, mixed sex or mixed age setting, but doing research with children and adolescents carries with

it additional ethical and professional considerations. Therefore, if I wanted to do research with young adolescents about menstruation, I realised that my preparation and organisation had to be carefully planned.³¹

As I wanted to do the research with a substantial number of adolescents from mixed social backgrounds over a period of time, I decided to seek access to participants through schools. Although doing research on menstruation with young adolescents in schools has certain disadvantages, it was difficult to know how else to have repeated contact with a relatively large and mixed group of adolescents over a period of three years. I began by having informal conversations with the relevant services responsible for children and adolescents in order to obtain support for the study before asking for formal permission from the Local Education Authority concerned. I talked to senior staff in the Educational Psychology Service, Child Health, Child Protection and the Health Education Advisory Service. They were very interested in the study and considered it an important and neglected topic. Having received their support, I wrote to the Local Education Authority for formal permission to do the research which I obtained (see Appendix A), but the reference by the Deputy Secretary for Education to "a research programme of this nature" shows the culturally sensitive nature of menstruation.³²

During my initial reading about adolescent girls' identity development, the issue of abuse arose, particularly sexual abuse. Even though it is was not a focus in my research, the experience of previous researchers³³ as well as the comments of a number of British women professionals on my research indicated that if I planned to do confidential interviews with adolescent girls, then I needed to take this issue into account. I therefore obtained advice and support from the Local Authority Joint Consultancy Team (Child Protection) of the Social Services Department and Health Authority. We agreed a procedure in the case of any girl self-reporting abuse (see Appendix B).

My research proposal with the formal permission from the Local Education Authority and the procedure for Self-Reported Sexual Abuse was approved by the Ethics Committee of my university. Then I approached two schools with my research proposal gaining the necessary approval from the Headteachers.

Preparation for Pilot Testing

Having obtained permission to do the research and negotiated access to possible participants, I prepared the next stage of pilot testing. My supervisor and I had agreed that a useful starting point in the research would be discussions with groups of girls and boys. My supervisor suggested them as a form of focus groups.³⁴ Although I was discouraged from using a grounded theory model because generating theory in this manner for a doctorate was considered unrealistic, these groups would serve as a pilot study for the data collection. While agreeing with this suggestion, I was even more interested in the group discussions because they offered the opportunity to investigate social influences on girls' experience of menstruation. The thing we failed to discuss was how these discussion groups were to be analysed: this was to prove problematic.

On reflection in preparing these group discussions and the later questionnaires and interviews, I drew on a number of social constructions and practices; foremost that menstruation is a socially taboo³⁵ subject. Within this culturally dominant view, menstruation is thought of as a female subject not appropriate for gendered social conversation.³⁶ It is a private, female hygiene matter to be controlled and concealed, especially from men, so that it does not disrupt the everyday life of school or work.³⁷ Not only was I aware of this from my reading, but also from my own experiences as a menstruating woman. Until I started my research, I would not talk about menstruation with men or boys I knew socially or at work. I never thought about it, I just didn't do it. As an adolescent and adult woman, I have always managed my menstrual periods so that I would never display any evidence of menstruation. This is the dominant menstrual practice of females in

Western culture. Consequently, when planning my research design, without a second thought, I planned single sex discussion groups and girl only interviews assuming they would more acceptable to parents and adolescents as well as more comfortable for me.

However, not only is menstruation a gendered subject, it is a sexual subject. From a scientific and biological perspective, menstruation is a sign of female fertility and, therefore, it is associated with sexuality. This makes it a subject for 'mature' adults, not a subject for 'immature' children. It is not that children should be completely ignorant or 'kept in the dark' about basic reproductive processes; in fact most adults in our society advocate that children should be educated about the basic 'facts of life'. In the current establishment of a national curriculum "the *rudiments* of reproduction"³⁸ must be included, but only at a level appropriate to a child's understanding. It is considered inappropriate, even dangerous, for children to know too much about sexuality. In the words of John Patten (1993), the Education Secretary, all sex education should encourage children "to consider the moral dimension of their actions" which requires "preparing them for the challenges and responsibilities [of] sexual maturity".³⁹ So children by virtue of their immature morality and limited ability to deal with challenges and responsibilities are not expected to be knowledgeable about menstruation, fertility or sexuality. But of course adults are; therefore, education about 'it' becomes necessary at some stage.⁴⁰ In part this is so that girls can manage their menstrual periods, but also, so that girls (and boys) can control female fertility.

This creates a cultural conflict in relation to the 'sex'⁴¹ education of young people. The average age of menarche is 12 years 6 months⁴² with a normal range of plus or minus 2 years. This means that some girls reach menarche at 10 years old, for which it is considered they should (and must) be prepared. However, girls and boys of 10 to 14 years of age are still considered more as a child than an adult; for example, the legal age of heterosexual consent is 16 years old. And

although there is a recognition that some young people do begin to engage in sexual activities around 14 to 16 years old, this is still not considered to be in the best interests of young people or the society. The current debates about sex and AIDS education and Christian values connotes the society's deep conflicts about desire, sexuality, and morality. For example, an article on sex education in a 'quality' paper was headed "Pupils to be taught virtue of self-restraint PATTEN CRUSADES FOR SEX EDUCATION WITH A MORAL FLAVOUR".⁴³ So the dilemma becomes: How can girls, not children yet not adults, be prepared for menstruation and the possibility of fertility, without encouraging their sexuality? And how can boys be made aware that menstruating girls are fertile, without inciting male sexuality?

I negotiated these contradictions by positioning myself within a social scientific, developmental psychology theory and practice while at the same time taking up an "egalitarian feminist" position.⁴⁴ As an 'egalitarian feminist psychologist', I could work within the system to adjust existing procedures and theories to reflect the interest of women and girls. As a social scientist and senior lecturer in a British university, it is legitimate for me to investigate aspects of adolescent experience and knowledge through group discussions, questionnaires and interviews. And, although menstruation itself can be a difficult topic, by placing it within developmental psychology,⁴⁵ it becomes part of scientific theories about biological maturation and child developmental milestones. Not only are children and their development seen as important scientific and social concerns, but it is a particularly appropriate 'female' subject. Therefore, my interest in young adolescents of both sexes can be seen as a normal woman's interest in childcare and 'mothering' avoiding suspicion of any possible unsavoury (sexual) 'male' interest.⁴⁶ From this perspective, I can be seen as an asexual but woman social scientist whose research object is "normal growing up", and whose subject is "children".⁴⁷

It was within this framework that I prepared and carried out the data collection for my research. The discussion groups, questionnaires,

and individual interviews were to be about "Growing-Up" with menstruation as just a part of scientific and educational theories of biological maturation and health education, unrelated to sexuality. In this way I could approach menarche as a legitimate object of social science investigation outside of power and gender relations.

PHASE ONE: GROUP DISCUSSIONS

Aim

My aim with the discussion groups was to encourage young adolescents to talk about different aspects of growing up, including puberty and menstruation. In this way I hoped to encourage the "diversity of participants' accounting practices"⁴⁸ about the body and menstruation rather than restricting variation to a set of specific questions as in a more traditional formal interview.⁴⁹ At this stage, I was not attempting to obtain representative, significant or normative data.

Participants

I recruited the participants from the first year⁵⁰ of a co-educational, comprehensive school in a large town in South West Britain. As the pupils in this school were placed in one of three academic ability bands,⁵¹ I decided to have a girls' and boys' discussion group from each band. I visited three classes to tell the pupils about my research and to request volunteers for the following week. The pupils who volunteered were given a letter to parents informing them about the research (see Appendix C).⁵² In the event the discussion groups consisted of:

<u>Band</u>	<u>Girls</u>	<u>Boys</u>
Low	Group 1, 5 girls	Group 2, 9 boys
Middle	Group 6, 7 girls	Group 5, 4 boys
High	Group 3, <u>6 girls</u>	Group 4, <u>2 boys</u>
	TOTAL 18 girls	TOTAL 15 boys

The groups are numbered in the order in which I saw them.

Methodology

For the discussions, I used a semi-structured guide consisting of six headings with questions (see Appendix D). It starts with a general introduction and questions about growing up and physical development before asking about menstruation. For the girls only, I had a further heading and questions concerning their own feelings, experiences and expectations of menstruation and menarche. Although my aim was to allow the adolescents to "elaborate on their views in a relatively naturalistic conversational exchange",⁵³ I also wanted the discussions to cover the same topics more or less systematically.

The discussions were held in empty offices or classrooms. I audio-recorded them using a standard portable cassette recorder with a small high quality microphone. As soon as possible after each discussion group, I took structured process notes (see Appendix E). I transcribed the six discussion groups onto computer disc using a consistent orthographic system which I developed.⁵⁴

Analysis

Once the groups discussions had been transcribed, I was presented with the question of the analysis. As they had only been intended as a pilot study to inform the preparation of the questionnaires and interviews, initially I did a relatively straight forward content analysis. I categorised the adolescents' comments under the headings I had used in the interview schedule. This gave me some useful information about their views and experiences, especially in relation to their knowledge about menstruation. I used this information to inform my preparation of questions related to and about menstruation: I discuss this preparation in the later methodology sections on the questionnaires and interview schedule.

However, I was not satisfied with this content analysis. It left out what I considered to be the most informative and important aspects of the adolescents' discussions about the body, physical development and menstruation. In the content analysis the adolescents' comments were taken out of the context of the entire discussion so that much of their

significance was lost and any social influences on their views and knowledge were difficult to incorporate into the findings. Any unwillingness or inability to discuss certain things was insufficiently theorised: there was no place for what was not said. I considered these aspects of the group discussions too important to exclude from my research. Therefore, I decided to do a further analysis - a "contextual analysis"⁵⁵ which had been developed by feminist psychologists to analyse interview material. As I understood this method it considered the context of a person's talk in two ways: any particular excerpt from an interview was analysed first in the context of the entire, unabridged interview and second in the context of the person's life. Using this approach I went back to the group discussion transcripts to do the following analysis.⁵⁶ Although there were difficulties with this method and its underlying theory as I discuss below and in Chapter 3, I was able to analyse the adolescents' comments within the context of the discussion groups and their lives at home and at school.

GROUP DISCUSSIONS: FINDINGS AND DISCUSSION

Feelings about physical development and growing up

It quickly became obvious in these group discussions that bodily processes and development were not easy topics for young adolescents to talk about. Like most adolescents in British culture, they came to puberty and menstruation with a historically defined and difficult relationship to their own bodies and sexuality. From my own experience as a teacher and mother in Britain, I know that most children have been trained in a body and toilet hygiene in which the genital area is 'private parts' and the body's waste products are 'dirty, don't touch'. Once children enter school, they are expected to cover up, conceal and control the genitals and excretory functions, both literally and figuratively. They 'spend pennies', penises are 'willies', breasts are 'bristols' and female genitalia are an undifferentiated 'bottom' or 'down there'. Bodily functions and sexuality are not openly or

explicitly discussed in front of children by adults, especially primary school children.

This cover-up obviously includes women's menstrual cycle. In these discussions, very few of the adolescents knew about or had seen any evidence of their mother's or other women's menstrual cycle. When asked if their mothers or older sisters ever said anything about menstruation, the most frequent answer from boys was "No" and even many girls said their mothers were "embarrassed". If menstruation was ever mentioned, it was usually to girls in relation to pathology - cramps, headaches or moods. It was with this experience of hygiene training and against this background of silence, secrets and taboos about the body that these young adolescents were maturing physically and learning about menstruation.

Knowledge about the physical development of girls and boys

This pattern of silence, secrets, and taboos was reproduced in schools. When I asked the adolescents whether they had been taught about physical development and menstruation in schools, their responses fell into three categories. The first was silence: the girls and boys could not remember being taught anything about physical development or menstruation in school. The second was secrets: in this situation girls were taught about menstruation separately from the boys. Either the girls were taken to another room to be "told about it" or the boys were sent off to work somewhere else. The boys could remember the girls having a separate lesson, but they never knew what had been taught. They were not given similar lessons. Here menstruation was a secret matter for girls, something to be hidden and kept away from boys.

The third was the breaking of the social taboos surrounding the body. In this situation, schools taught about physical development and menstruation to the girls and boys together. This co-educational teaching contravened social rules against openly discussing sexuality and intimate body matters in mixed gender groups. The girls did not like it because of the boys behaviour: the girls described that the boys "just started laughing and everything", and boys remembered that "if you

laughed at it then you were sent out." Not only this, but this teaching was taking place at the same time that girls were beginning to develop breasts. Although the girls did not say much about this aspect of their development in the group discussions, one group of boys did. They made several comments about 'bristols' and breasts with one boy actually asking me, "Why do women have breasts, miss?"

This teaching in school about physical development, although no doubt well intentioned, appeared to have a contradictory effect. In the attempt to educate young people about the workings of their bodies and to inform girls about menstruation, the female body was being presented as more extraordinary than the male body. These young adolescents considered that most things happened to girls whereas boys just "get a little bit bigger". Boys' physical and sexual development received less emphasis. Although these boys were embarrassed by their voice breaking, male penises and seminal emissions were not treated in the same way as female breasts or menstruation. Both the boys and girls considered growing up was easier, even if not necessarily better, for boys than girls.

Sources of information

Boys main sources of information about physical development appeared to come from school and peers. This was not a topic they discussed at home nor read about in their books or magazines. Girls' sources of information were more varied. As well as learning about physical development from school and peers, they picked up information from their mothers, books and magazines.

Menstruation

All the girls in these discussion groups had heard of menstruation. They described learning about it when they were around 10 years old with most remembering being surprised and shocked at first. Their mothers were their main source of information, although girls considered mothers were "embarrassed" about the topic. Girls described being taken aside to somewhere private to be told about "it". In contrast to the girls, a number of boys said they had not heard of

menstruation. Of the boys who had, they typically learned about it when they were about 10 or 11 years old. Unlike the girls, the boys learned about it from school or other boys. Their mothers or sisters tended not to talk to them about menstruation at all. From these adolescents' comments, it would appear that the 'secret' of menstruation had been well kept.

Certainly, the majority of both the girls and boys were remarkably ignorant about menstruation. They understood that women have "periods", but most did not know what that entailed. The boys said they "didn't understand it at all". Even the girls who knew menstruating entailed bleeding did not understand why, or where from, or how often, or how much. The level of ignorance is hard to over-emphasise. A number of girls had disturbing ideas: "about getting pains and suddenly start bleeding" and "something goes wrong with your insides and that when you are starting [] you get your blood pressure up".

Girls' feelings and attitudes about menstruation and menarche

As girls had learned the most from their mothers, I wondered what they might have been told? Although I did not interview these girls' mothers, I did start having conversations with all sorts of women about menstruation. From these conversations, it appeared that many women do not have a clear understanding of how menstruation or their bodies function. Therefore, the descriptions of physical development and menstruation that women give to girls must be vague and incomplete at best and incorrect at worst. These girls were told: "not to worry", "it is natural and happens to all women" and tell your mother when it happens. Some girls had been shown how to use "pads". The emphasis was on hygiene - staying clean and dry - and concealment - no one will know. The reassurance that it is "natural" and "nothing to worry about" offered these girls little comfort, they were "worried" about starting.

In terms of their expectations, these girls were not sure what menstruation would be like. The first menstrual period was a particular concern: they were worried about when and where it might happen. They were especially anxious that they did not start at school or in "French

class". Although a few girls wanted to "get it over with", many girls were worried and few were scared. On the whole, they were "not looking forward to it".

CONCLUSION: PROBLEMS AND DOUBTS

This contextual analysis of these discussion groups was certainly more powerful and satisfying than a straight forward content analysis. It did allow me to discuss social influences on adolescents' knowledge and feelings about physical development and menstruation from a 'feminist' perspective. ^(See pp. 56-59 for a discussion of this feminist perspective.) But it left a number of questions unanswered and a number of difficulties intensified.

First, it did not address the source of the cultural construction of the female body and menstruation: it just shifted the focus from adolescents to their families and schools. It did not explain why mothers were embarrassed, why women were poorly informed about the biology of menstruation, why fathers were absent in talk about menstrual education or why schools used explanations of pubertal development that emphasised female changes more than male changes.

Second, this feminist analysis was limited to a re-evaluation of women's psychology through a specific focus on women's experiences and talk. Although men and patriarchal theories were implicitly assumed to be part of women's environment, the power of the male-dominated culture to shape women's experiences and talk was not theorised. On the basis of my discussions with adolescents, I was finding this exclusion of male practices, male discourses and male dominated institutions problematic. It removed from the analysis a powerful influence on girls' and women's experiences of and knowledge about menstruation.

Third, by adopting this approach, I had side-stepped questions about psychology's model of the self. This contextual analysis assumed the relatively stable "personality type"⁵⁷ of traditional psychology. In contrast, critical social psychology had problematised the "self"⁵⁸ and the individual/society split.⁵⁹ This made problematic any

assumption that people have 'real' thoughts or experiences that can be "constructed" through "really talking",⁶⁰ or in the case of my research that adolescents have 'real' thoughts, feelings and experiences somehow beside, outside or below those learned in and influenced by a male-dominated society.

Fourth, my experience of the discussion groups had intensified the division between a traditional psychological methodology and a more feminist critical psychological theory. I was beginning to have serious questions about the nature of the 'self' assumed in the questionnaires I was using on self-esteem or possible selves. Although the inclusion of boys as participants acknowledged the importance of males in menstrual constructions, I began to wonder how much a menstrual questionnaire might reveal about young adolescents' attitudes to and knowledge about menstruation. The interviews with girls promised a better understanding of girls' expectations and experiences of menstruation, but I was having serious doubts about the efficacy or power of a contextual analysis to explain how or why girls came to give specific accounts or to have specific experiences of menstruation. Although my male supervisors never explicitly discouraged a feminist perspective on my research, I was beginning to realise how little they could support the inclusion of an explicitly feminist theory in my thesis.

It was difficult to resolve these problems and questions at this point in my doctoral research. I was caught by the arrangements made with the schools and the influential position of my supervisors. I continued with the preparation for and execution of the questionnaire and interview phases of the research which I discuss in the next two chapters. The contextual analysis of the discussion groups was subsequently replaced by a discourse analysis which I present in Part III of the thesis.

CHAPTER 2

MENSTRUAL ATTITUDES, KNOWLEDGE, AND EFFECTS:

British adolescents, menstruation, and psychology

INTRODUCTION

In this chapter I present the results of the questionnaire phase of my research. This research was done with 167 young adolescent girls and boys using a number of psychometric measures over a two year period. As I discussed in the previous chapter, this testing was initially planned as part of a three year investigation into the experience of menarche and menstruation in relation to aspects of female identity and self-concept. However, it was during the second year of this phase of data collection and analysis that I began to have such serious methodological and theoretical problems that the original aims and plan of my work had to be reconsidered. Here I discuss the interim aims and findings of the psychometric testing which I had done and discuss both what this does tell us and does not tell us about young adolescents' attitudes to and knowledge of menstruation, and the effects of menstruation and menarche on girls.

AIMS

The aims of this research are to investigate two sets of separate but related questions. First, what do young British adolescents know and believe about menstruation? What are their sources of information? Do boys and girls differ in their views? Second, what is the effect of menstrual status on girls' knowledge and beliefs about menstruation? What is the effect of menarche on aspects of girls' self-concept? In relation to knowledge and beliefs about menstruation, questionnaires were used to assess adolescents: i) sources of the information, ii) beliefs about the social, physical, and psychological aspects of menstruation and iii) feelings about menstruation. In relation to the effect of menarche on girls, measures were used to assess three aspects of girls' self-concept: i) sources of self-esteem, ii) possible selves and iii) overall self-esteem.

PARTICIPANTS

The participants in this study consisted of 80 adolescent boys and 87 adolescent girls from the first year of two state co-educational, comprehensive secondary schools with an age range of 11 to 16+ years. Both schools were in South West Britain in communities with a mixed economy based on farming, fishing, tourism, industry and the service sector. As a result the familial socio-economic status was quite heterogeneous. On the basis of the information provided by the adolescents on their fathers' occupation, socio-economic status was determined using the Registrar General's classification. Eight percent (8%) were in social class I, 23% in social class II, 11% in social class III non-manual, 38% in social class III manual, 11% in social class IV, 1% in social class V, 2% in the armed services and 6% unclassified. The ethnic origins of the adolescents were not asked, but they were predominantly white European.

Although the adolescents were not classified academically, they were drawn from across the range of academic ability with 55% being recruited from all the mixed ability tutor groups in one school and 45% being recruited from three middle stream English classes in the other school. All the adolescents were in their correct year at school and did not differ significantly on any of the measures as a result of the school attended. At the first questionnaire testing the mean age for boys was 11 years, 11 months old and for girls 12 year old. In terms of menarcheal status, 85% of the girls were premenarcheal.

PROCEDURE

Pilot testing of measures

The questionnaires were pilot tested with four adolescents, 2 boys and 2 girls, from the first year of a state, co-educational, comprehensive secondary school. They were the same age and from a similar background as the adolescents in the main study. They were

recruited through my personal contacts and I obtained parental permission for them to take part in the pilot tests. The questionnaires were given to them in one setting as a group: I introduced the questionnaires one at a time, the adolescents did each questionnaire and then we discussed it as a group. There were no major difficulties with any of the questionnaires as devised and they said they enjoyed doing them. Some minor adjustments were made to instructions and phrasing to make them clearer. Their scores indicated that differences between adolescents could be identified; for example, the two boys had higher self-esteem scores than the girls.

Recruitment of Participants

Recruitment for both the questionnaire and interview phases of the study was done at the same time. I saw the adolescents in school to personally request their participation in the study. I explain the purpose, the procedure and the method of data collection. If they agreed to participate, a letter was sent home with them informing their parents of the forthcoming study. If parents did not want their child to take part, then they were requested to return the tear off slip at the bottom of the letter (see Appendix C). Informing parents of the research and obtaining their permission was done in this way on the recommendation of the senior staff in the schools. They considered this the most appropriate and effective way of obtaining parental permission for the adolescents who wanted to take part. On the basis of previous experience, they had found it difficult to get adolescents and parents to return any forms by the date required. Therefore, if parental permission had been sought through returning a signed form, it could have difficult to include adolescents who wanted to do the study but had not remembered their forms. There were adolescents who did not want to take part and whose parents refused permission: this was 10% of the girls and 5% of the boys.

This procedure did risk putting adolescents in the position of taking part in the study by default in that they did not have a slip signed by their parents and they did not themselves want to admit they

did not want to take part. As a result, I was careful at each stage to re-inform the adolescents (and the schools) that no one had to participate if they did not want to and that they could withdraw at any point. The issue of participant agency, power and choice in any study is problematic; in relation to adolescents and children it is even more fraught with difficulty. However, adolescents and children do have the power to resist and subvert adult authority in the school setting. It may not be ideal to do such a study in school, but on the basis of my experience of the pilot testing, I was relatively confident that doing the questionnaires could be as beneficial and interesting as school lessons.

Administration of the questionnaires

The questionnaires were administered twice to the same participants: once in their first year of secondary school in 1990 and once in their second year in 1991. The procedure was the same both times. I gave the questionnaires to the participating adolescents in school normally during a tutorial or English lesson. I stressed that their responses were anonymous⁶¹ and that there were no right or wrong answers. After I had explained the rating scales, they were told to proceed at their own pace and to ask for clarification or assistance. Any adolescents not doing the questionnaires were simply asked to read or work at their desks. As long as the adolescents were relatively quiet, they were left by me to do what they wanted. I only interfered if they became too noisy or if they were obviously disturbing other pupils. The teachers tended not stay with the classes.

MEASURES

There were five different measures used in this questionnaire phase of the research.

1. Personal Data Form

There were two personal data forms devised by me (see Appendix F). In the first year, basic background information about their age, sex, parents' occupations and family composition was

requested. Although I was not making any predictions on the basis of social class, I did want to have an indication of the composition of my sample. Questions on family composition and reading material were included as a result of the group discussions. Some of the adolescents had made comments related to family composition; for instance, a few girls had mentioned obtaining information about menstruation from their older sisters. Other adolescents had commented on how the absence of a father or mother might effect the source of menstrual information. It seemed prudent to obtain this information for possible analysis. The questions on the adolescents' reading material were included for a possible investigate of media representations of menstruation. This form was only given once, in the first year of the data collection.

A second personal data form, one for females and one for males, was given in the second year. As I had originally planned to interview all the girls, I had not asked about their menstrual status in the first year questionnaires. Subsequently, I only interviewed a proportion of the girls. As I needed information on all the girls' menstrual status for the analysis, a further question on menarcheal status for the girls was included. In order to ask a commensurate question of boys, I asked if their voice had started to "break or change". I took the opportunity to ask two open-ended questions about their views on growing up and the study itself.

2. Descriptions

This is a semantic differential test (see Appendix G) developed by Franks and Marolla⁶² to measure sources of self-esteem. They proposed that self-esteem is a function of two processes or what they called Inner Self-Esteem and Outer Self-Esteem. Inner Self-Esteem was seen as resulting from the individual's feelings of efficacy and competence. The greater the feelings of power and competence, the higher the inner self-esteem. Outer Self-Esteem was seen as resulting from the social approval of significant others in the individual's social environment. The greater the social approval and sense of self-worth, the higher the outer self-esteem. An Anglicised version of this test was included in

this research because it had been developed for use with young adolescents aged 12 to 13 years old and it could be used to measure changes in girls' perceptions and sources of their self-esteem as a result of menarche.

3. Possible Selves Questionnaire

This questionnaire⁶³ was based on the concept of possible selves which was introduced by Markus and Nurius⁶⁴ to complement other conceptions of self-knowledge. The responses reflect individuals' ideas of what they would like to become in the future. These were in six categories: general descriptors, i.e. "self-confident"; physical descriptors, i.e. "overweight"; general abilities, i.e. "cook well"; occupational alternatives, i.e. "dentist" and descriptors tied to the opinions of others, i.e. "feared". Versions of the questionnaire had been used with variety of individuals including young adolescents and appeared useful in understanding individuals' future actions in specific domains. An Anglicised version of 60 possible "hoped for" selves were used in this study (see Appendix H).

4. The Self-Esteem Inventory

An Anglicised version, one for males and one for females (see Appendix I), of Coopersmith's⁶⁵ Self-Esteem Inventory (SEI) was used to measure overall or global self-esteem. The SEI had been reported to have good convergent, discriminant and predictive validity,⁶⁶ although its discriminant validity has been questioned.⁶⁷ As a further study⁶⁸ with adolescents had shown it to have good convergent validity in relation to other measures of self-esteem, I decided to use this inventory to measure any changes in the ~~participants'~~ ^{girls'} self-esteem as a result of menarche.

5. Menstrual Attitude Questionnaire

There were no menstrual attitude questionnaires for young British adolescents at the time of my research. Brooks-Gunn and Ruble⁶⁹ had developed an 18 item Menstrual Attitude Questionnaire for adolescent females in the U.S.A. Weiden⁷⁰ in her research in the U.S.A. on adolescent girls' menstrual attitudes developed an additional 9 items

for this questionnaire. As I had not intended to devise a menstrual attitude questionnaire as part of my research I preferred to use one of these; however, there were a number of difficulties in using either of these questionnaires.

First, the items had been developed for adolescent females so that many of them were inappropriate for boys, for example: "I envy boys because they don't have to menstruate." Second, a number of expressions were specifically North American and would not necessarily be understood by young British adolescents, for example: "I make [] an extra effort not to be crabby during my period." These two difficulties could have been addressed by adjustments in the language of the questionnaire, but there was a third problem. The questionnaire items were biased towards negative attitudes and knowledge about menstruation. Of the 27 items in Weiden's extended version of the questionnaire, I considered 17 presented either negative attitudes or information. For example: "I can tell [] my period is coming because of breast soreness, backache, cramps or other physical signs" or "Menstruation is something to feel ashamed about." The problems with using negatively biased menstrual questionnaires has been pointed out by various psychologists.⁷¹ I did not want to re-produce this negative construction of menstruation, especially with young adolescents. The group discussions had indicated that many young British adolescents were poorly informed about menstruation. It was possible this included negative menstrual symptoms; therefore, I did not want to give my participants this negative information through a menstrual attitude questionnaire.

Since I had neither the time nor the desire to develop a new questionnaire, I decided to use a limited number of Weiden's 27 item version of the Brooks-Gunn and Ruble menstrual attitude questionnaire for adolescent girls. There were 12 items which I considered appropriate for my research:⁷² 3 were used exactly as written with 1 changed marginally and 8 were adjusted for use with boys as well as

girls and/or changed to be more positive with 2 of these split to make 4. I developed 4 additional items: 3 concerned talking about menstruation to teachers, fathers and mothers with the other 1 about overall feelings towards menstruation. I now had an 18 item questionnaire with 8 positive items, 9 negative items, and 1 general item (see Appendix J). This questionnaire was intended to determine British adolescents' attitudes to menstruation in relation to four aspects: social aspects, "When girls have their menstrual period they don't want others to know."; physical effects, "Most girls have cramps or pains when they menstruate."; psychological effects, "Menstruation makes most girls feel grown up and mature." and feelings, "Menstruation is something to be happy about."

In addition, there were two items on their menstrual knowledge at the beginning of the questionnaire: the first asked whether they had heard of menstruation and the second asked their original source(s) of information (see Appendix J).

RESULTS

Sources of Information about Menstruation

In the first year of this study when the adolescents were 11 to 12 years old, the majority indicated that they had at least heard of menstruation: for boys 89% (71 of 80)⁷³ and for girls 95% (83 of 87). Of the four girls who indicated on the questionnaire that they had not heard of menstruation, three were subsequently interviewed revealing that 2 did know about menstruation but didn't want to answer the questions and 1 denied all knowledge of menstruation stating that "I don't want to know!"

For both girls and boys, the primary source of initially learning about menstruation was their mothers. Mothers were chosen as the first source of information by 68% (59) of girls and 34% (27) of boys. For some girls, school 9% (8) and sisters 7% (6) were additional sources of information. Boys were more reliant on extra-familial sources with schools 20% (16) and friends 20% (16) being chosen almost as often as

mothers. None of the girls chose their fathers and only one boy chose his.

Attitudes to Menstruation

Table I on the following page presents the results of the menstrual attitude questionnaire. The mean scores and the percentage of "Don't Know" responses of the boys, premenarcheal girls and postmenarcheal girls for each of the 18 items on menstrual attitudes are presented. The attitudes are grouped under four headings: social aspects of menstruation, physical effects of menstruation, psychological effects of menstruation and feelings about menstruation. The scores of the boys, the premenarcheal girls and the postmenarcheal girls were each compared for any significant differences on the Student T-test using the subcommand of SPSS. The levels of significance are given in the text following the table. In the first year of the study, there were 80 boys, 75 premenarcheal girls and 12 postmenarcheal girls. Their responses were rated on a 6 point scale from 1 = disagree a lot to 6 = agree a lot. See the following Tables II to IV for the scores, standard deviations and significance levels for each item on the questionnaire for the above comparison on the Student T-test.

TABLE I: Menstrual Attitudes
Scores for Year 1 by Sex and Menstrual Status

Attitudes/Items	Mean Scores			Percent "Don't Know"		
	Boys	PreM Girls	PostM Girls	Boys	PreM Girls	PostM Girls
SOCIAL ASPECTS						
Not want others know	5.1	4.9	5.2	13	7	-
Talk easily mother	3.8	5.0***	5.3***	14	1	-
Talk easily father	2.0	1.7	1.6	24	16	8
Teachers uncomfortable	3.7	3.7	3.8	24	26	8
Not talk just anyone	4.4	4.6	4.3	18	3	-
Embarrassing discuss	3.9	4.1	3.4	23	9	8
Good to discuss	3.8	4.2	4.0	26	17	8
PHYSICAL EFFECTS						
Causes headaches	3.9	4.3	3.9	69	37	16
Sign of good health	3.8	4.0	4.6	56	31	8
Causes pain/cramps	4.0	4.6	4.4	72	33	16
Do sports/swimming	3.2	4.6**	4.3	41	8	-
PSYCHOLOGICAL EFFECTS						
Upset before/during	4.6	4.9	5.8*	41	20	8
Feel same as usual	2.5	2.8	1.7#	33	17	-
Feel grownup/mature	4.8	4.4	4.6	29	11	8
FEELINGS						
Girls envy boys	3.6	3.0	4.2#	21	11	-
Happy about mens.	2.4	2.7	3.3	42	23	16
Stop periods if could	4.7	4.4	4.7	41	21	-
OVERALL FEELINGS	2.6	3.0	3.3			

(This one item had a scale of 1 = negative to 5 = positive.)

* Significant difference between postmenarcheal girls and other 2 groups.

** Significant difference between premenarcheal girls and boys.

*** Significant difference between both groups of girls and boys.

Significant difference between pre- and postmenarcheal girls.

TABLE III: Menstrual Attitudes
Scores for Year I Boys and Premenarcheal Girls

<u>Attitudes/Items</u>	Boys		Premenarcheal Girls		Student T-Test		
	Mean	S.D.	Mean	S.D.	t.	d.f.	p.
SOCIAL ASPECTS							
Not want others know	5.1	1.15	4.9	1.08	1.11	126	.27
Talk easily mother	3.8	1.92	5.0	1.29	4.27	129	.00
Talk easily father	2.0	1.34	1.7	1.00	1.19	108	.24
Teachers uncomfortable	3.7	1.72	3.7	1.58	.01	103	.99
Not talk just anyone	4.4	1.64	4.1	1.79	1.14	125	.26
Embarrassing discuss	3.6	1.67	4.1	1.26	1.06	177	.29
Good to discuss	3.8	1.53	4.2	1.43	1.49	108	.14
PHYSICAL EFFECTS							
Causes headaches	3.9	1.55	4.3	1.43	1.20	63	.24
Sign of good health	3.8	1.66	4.0	1.50	.73	79	.47
Causes pain/cramps	4.0	1.64	4.6	1.25	1.70	65	.09
Do sports/swimming	3.2	1.90	4.6	1.41	4.35	104	.00
PSYCHOLOGICAL EFFECTS							
Upset before/during	4.6	1.38	4.9	1.07	1.17	97	.25
Feel same as usual	2.5	1.49	2.8	1.45	.91	103	.37
Feel grownup/mature	4.8	1.34	4.4	1.32	1.73	109	.09
FEELINGS							
Girls envy boys	3.6	1.53	3.0	1.65	1.71	115	.09
Happy about mens.	2.4	1.31	2.7	1.19	1.24	94	.22
Stop periods if could	4.7	1.23	4.4	1.71	1.12	94	.27
OVERALL FEELINGS	2.9	.61	3.0	.80	1.24	130	.22

(This one item had a scale of 1 = negative to 5 = positive.)

In relation to the social aspects of menstruation, all three groups thought that menstruation i) required discretion and ii) was generally embarrassing to discuss. This was especially the case in relation to fathers: the item on discussing menstruation easily with your father obtained the lowest score for each group on any item. The only exception to the general high levels of embarrassment about menstruation was for girls in discussion with their mothers. This was the only item on the social aspects of menstruation which yielded any significant differences between groups. Both groups of girls scored significantly higher agreement than the boys on the ease of talking to their mothers about menstruation: premenarcheal girls ($t=4.27$, $d.f.=129$, $p<0.001$) and postmenarcheal girls ($t=2.61$, $d.f.=71$, $p<0.01$). Although adolescents were embarrassed by the topic, they did tend to "agree a little bit" that it was good to discuss it. The "Don't Know" scores were in the expected direction: overall boys had the highest percent of "Don't Know" scores in this section, 26% to 13%, with postmenarcheal girls having the lowest, 0 to 8%. However, it was in relation to the social aspects of menstruation that the largest number of boys had an opinion: they had their lowest percent of "Don't Know" scores on these seven items.

With the physical effects of menstruation, all three groups tended to agreed that menstruation causes headaches, cramps and pain with premenarcheal girls having slightly more negative attitudes to physical effects than boys or postmenarcheal girls. However, menstruation was seen as a sign of a woman's good health. Again there was only one item in this grouping on which there were significant differences between the groups, in this case between the boys and premenarcheal girls. The boys thought that girls could not do things like sports and swim in comparison to premenarcheal girls ($t=4.35$, $d.f.=104$, $p<0.001$) who thought they could. Although the difference between boys and postmenarcheal girls was not significant, postmenarcheal girls held similar views to to premenarcheal girls. However, boys and premenarcheal girls were not as knowledgeable about the physical effects

of menstruation as about other aspects tested on this questionnaire. Both boys and premenarcheal girls had their highest percentage of "Don't Know" answers in this section dealing with physical effects: for boys between 55% - 72% and for girls 31% - 37%. They just did not know if menstruation causes headaches, cramps, pain or if it is a sign of good health.

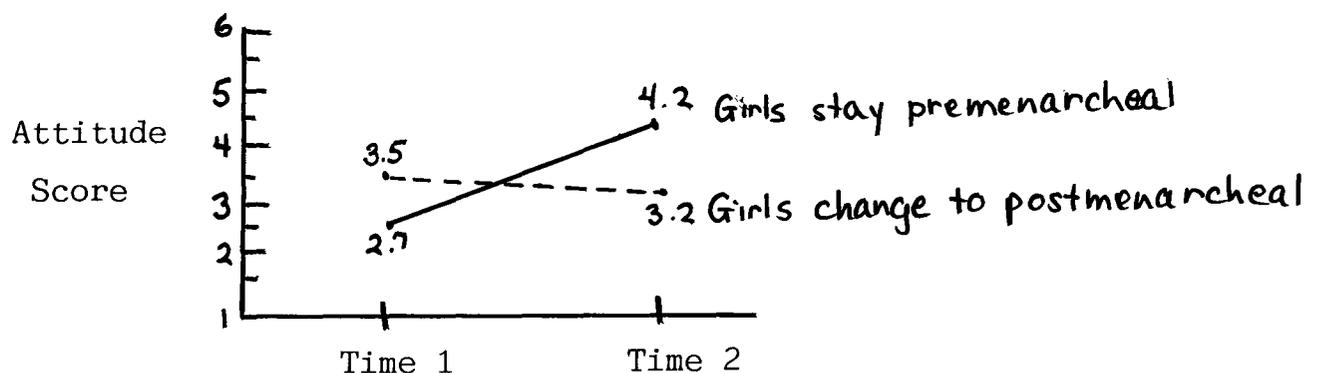
In relation to psychological aspects, all three groups thought that menstruation: i) caused girls to be more easily upset before/during menstruation, ii) made girls feel different from usual and iii) made girls feel grown up and mature. There were some interesting differences between the three groups on these items. In relation to feelings before/during menstruation postmenarcheal girls agreed significantly more than either of the other two groups that girls are "more easily upset before/during menstruation": compared to premenarcheal girls ($t=2.17$, $d.f.=66$, $p<0.01$) and boys ($t.=2.78$, $d.f.=51$, $p<0.01$). This item had the highest score (5.8) by any group (the postmenarcheal girls) on any item in the questionnaire. Although all three groups thought that menstruation made girls feel different from usual, the postmenarcheal girls felt this most strongly. There was a significant difference between their scores and premenarcheal girls ($t=2.55$, $d.f.=68$, $p<0.01$). Again, the "Don't Know" scores were in the expected direction with boys having the highest percentage of don't know responses and postmenarcheal girls the least.

In their feelings towards menstruation, all three groups had more negative than positive feelings. All these adolescents agreed that girls would stop their periods if they could and that menstruation was not a thing to be happy about. Their overall feelings about menstruation tended to be "alright" with boys being slightly more negative than girls. There were no significant differences between the groups on these three items. In relation to girls envying boys their freedom from periods, postmenarcheal girls were obviously finding menstruation more problematic than the premenarcheal thought it would be. They agreed significantly more that "girls envy boys because they

don't have to menstruate" compared to premenarcheal girls ($t=2.16$, $d.f.=71$, $p<0.05$). Again, the "Don't Know" scores were in the expected direction with boys having the highest percentage of don't know responses and postmenarcheal girls the least.

Effects of Menarche on Attitudes to Menstruation. In order to investigate the possible effects of menarche on girls' attitudes to menstruation, I analysed the scores on the menstrual attitude questionnaire of those girls whose menstrual status had changed during the year. This was done by an analysis of variance of the scores of the 38 girls who were premenarcheal at both tests points and the 36 girls who were premenarcheal during the first test but were postmenarcheal by the second test. This analysis of variance was an ANOVA performed on each of the 17 items using the MANOVA subcommand of SPSS. Of the 17 items only one, item 2: "Girls envy boys because they don't have to menstruate.", showed a significant interaction ($F=7.56$; $d.f.=1,53$; $p<0.01$; see Figure 1) and even this was in the opposite direction to one of interest. The girls who were premenarcheal at the first test and postmenarcheal by the second test did not change significantly but the girls who were premenarcheal at both tests points did change. There were no other items which showed a change in the direction of interest; in other words, a change in attitude for the girls who had become postmenarcheal but no change in attitude for the girls who stayed premenarcheal.

Figure 1: Mean scores at test 1 and test 2 for each of the two groups.



Effects of Menarche on Aspects of Girls' Self-Concept. In order to investigate the possible effects of menarche on aspects

of girls' self-concept, I analysed the scores on the measures of sources of self-esteem, possible selves, and overall self-esteem of the same two groups of girls.

On the measure of sources of self-esteem, an analysis of variance, an ANOVA using the MANOVA subcommand of SPSS, of inner and outer self-esteem for the two groups showed no significant mean effect for GROUP or TIME or an interaction (all F's less than 1.4; d.f. 1,72). Girls' inner and outer self-esteem scores showed no change as a result of menarche.

On the measure of overall self-esteem, t-tests on the self-esteem scores at time 1 and at time 2 were performed between the two groups of girls using the subcommand of SPSS. These showed no significant difference between the two groups (Self-esteem at time 1: overall mean 96.3; standard deviation 7.68; $t=1.14$; d.f.=72; n.s. Self-esteem at time 2: overall mean 97.9; standard deviation 9.0; $t=.84$; d.f.=72; n.s.). Girls' overall self-esteem scores did not change as a result of menarche.

On the possible selves questionnaire, a series of chi square tests using SPSS were performed on the two groups of girls. The groups were: Group 1 - the girls whose menarcheal status did not change between test 1 and test 2 and Group 2 - the girls whose menarcheal status did change between the two tests. The significance levels of the two groups of girls on the Fisher's Exact Test were compared. When the Fisher's Exact Test could not be computed because the cells with expected frequency were too great, the Pearson significance level was used (see Appendix N, pp. 416a-c for further explanation of the analysis and the full test results). There were only two items on the possible selves questionnaire that showed a significance difference in the direction of interest, e.g. item 29, "Go into business" and item 59, "Go to university". However, in looking at the actual scores on the chi square test of these two items, we can see that the pattern of change was similar for both groups of girls (see Appendix N). On the other 58 possible self items, there was either no change in girls' choices or the changes were similar in both groups. There was little evidence that girls' choices of possible selves changed as a result of menarche.

DISCUSSION

What did these questionnaires tell us about young British adolescents' knowledge and beliefs about menstruation? Did girls and boys differ in their views? And what was the effect of menarche on girls? We learned that mothers were in fact an important source of initial information about menstruation, especially for girls. Mothers were the one person girls considered easy to talk to about the subject. Fathers were not involved in discussions about menstruation and neither were most boys. Only a third of boys had learned about menstruation from their mothers, and they considered it was difficult to talk to mothers about the topic. This was one of the few differences between girls and boys on the menstrual attitude questionnaire. The biggest difference between them was in their "Don't Know" responses. Boys consistently answered fewer questions about menstruation than the girls. At times as few as 12 out of the 80 boys would give a response on an item; in this case, boys did not know whether menstruation caused pain or cramps.⁷⁴ However, when the boys did answer the questions, their responses were similar to the girls.

On the whole boys' and girls' attitudes to menstruation were similar and largely negative with few exceptions. These adolescents considered menstruation an event about which people should be discreet: it was embarrassing, upsetting for girls and caused physical discomfort. Although girls considered it less restricting and more a sign of good health than boys, neither group considered menstruation as something to be happy about. Both girls and boys thought women would stop menses if they could.

In the first year, there were some differences between the pre- and postmenarcheal girls but only three were statistically significant. Compared to the premenarcheal group, the postmenarcheal group thought girls were more upset before/during menstruation, felt less the same during their periods and envied boys more because they did not menstruate. However, these differences were not found between premenarcheal girls and those girls who had become postmenarcheal in the second year of testing. This would suggest that any differences between these girls' attitudes to menstruation were not necessarily to do with

the actual onset of menstruation. The differences in the first year may have been an effect of the timing of menarche or the group size. As there were only 12 postmenarcheal girls in the first year group out of the sample of 87 girls, any conclusions could only be tentative. It is possible that the relatively early menarche of these 12 girls had affected their responses. There is some evidence that early maturing girls report less positive menarches than later maturers, but it is inconclusive.⁷⁵ Certainly the lack of effect of menarche on other aspects of girls' self-concept does not support any firm conclusions about these differences.

As we have seen from the measures used in this study, there was very little indication that menarche had any effects on girls' self-esteem, attitudes to menstruation or choices of possible selves. These findings are supported by current psychological research into menarche.⁷⁶ It appears that British adolescents' knowledge and experiences of menstruation are similar to other Western adolescents. What these findings do not support are the claims made by current researchers that menarche is "the signal event" of female puberty which affects how a "female thinks about herself overall". There is not even much evidence that a girl's "personal experience" of menstruation has any significant affect on her "attitudes" toward menses.⁷⁷ It is possible to argue that any lack of evidence for menarcheal effects is due to any of number of factors. For example, menarcheal affects may be more long term so that they do not appear within two years of menarche,⁷⁸ they may be more unconscious than conscious,⁷⁹ they may be insufficiently researched⁸⁰ or the instruments may not sensitive or appropriate enough to detect the changes. All of these claims about menarcheal research can be substantiated to a greater or lesser extent, but I don't want to pursue these particular issues here. I want to discuss another reason why I think psychologists, especially women, repeatedly and insistently claim a space in psychology and science for the importance of menstruation in girls' and women's lives - their experience. But not just their personal experience of menarche and menstruation, as important as that undoubtedly is, but their experience of doing research on menstruation within a traditional psychology research methodology and theory.

Let me illustrate what I mean by women's experience of "doing research on menstruation" within the confines of traditional psychology with two examples: one from Arlene McGrory's 1990 article on young adolescent girls' responses to menarche and the other from my own research experience. In her research McGrory used a research design based on traditional psychological theory and method which she did not question. Yet it was not the results of her questionnaires or statistical analysis which she found most interesting. In her own words, "the most interesting finding of the study relates to the resistance of parents to allow daughters to participate in the study" because the parents were "uncomfortable and embarrassed".⁸¹ She found the social construction of menstruation more "interesting" than the findings of her questionnaires. Yet, the social aspects of menstruation were absent from her research design: a research design based on traditional psychological theory and method. It was this social aspect of my own research on menstruation that I was finding 'most interesting' and problematic. In 1990 during the second phase of my research, I made the following comment in a seminar paper⁸² I gave to my department:

How can 'traditional' psychological method include the reactions of subjects during the testing? In each of my group test situations, one boy has asked loudly "What's menstruation, Miss?" to the delight of the boys and the embarrassment of the girls and me. Where is the theorising of meaning for these private, personal events which have public significance? As one girl stated: "My biggest worry is that my period will start in French class."

Like Arlene McGrory, I was finding what was going on around the research, the social construction of menstruation and its meaning for girls, more interesting than the questionnaires. And like Arlene McGrory, the social aspects of menstruation were absent from my research and analysis. The psychological theory and method on which my design was based did not theorise the social or subjective aspects of menstruation.

IN CONCLUSION

There is no doubt that these questionnaires were informative about adolescents' attitudes to menstruation, but they were not informative about why parents are so "uncomfortable and embarrassed", why boys and girls have such negative attitudes to menstruation or what menstruation means for girls? These questions remained in the background of my research as I administered these questionnaires and analysed this data. I was not going beyond attitudes or normative data. My research appeared to be driven by concerns about the micro processes of methodology rather than a feminist psychology⁸³ concerned with questions of importance to women - like why boys embarrassed girls and women researchers? There did not appear to be a place for my concerns, values or interests in my own research: I continued to struggle with this dilemma as I did the second set of interviews with the girls. It is these interviews and my difficulties with their analysis which I discuss in the following Chapter 3.

CHAPTER 3

GIRLS' EXPECTATIONS AND EXPERIENCES OF MENSTRUATION:

listening to girls' voice and silence



INTRODUCTION

In this chapter I present what was to have been the third phase of the proposed research - the interviews. As I discussed in Chapter I, these interviews were initially part of a three year investigation into the experience of menarche and menstruation on aspects of young adolescent girls' identity and self-concept. The interviews were done with 47 girls twice in two years using a semi-structured interview schedule. They were transcribed and a contextual analysis was begun; however, it was during this analysis that I finally came to the conclusion that I would have to change my theory, methodology and supervision. Here I discuss the original aims of this part of my research, the participants, the procedure and the interview schedule. I then go on to discuss the difficulties I had with the analysis, my conclusions and the subsequent change in my position.

AIM

This part of the research was designed to investigate adolescent girls' expectations and experiences of menarche. As the adequacy and source of prior knowledge and preparation had been shown to have an effect on menstrual experience, premenarcheal girls were to be interviewed to explore: their sources of information about menstruation and how they felt when they first found out about it; the adequacy of their information and what sense they made of menstruation; and their feelings about and expectations of menarche and menstruation. The same girls were to be interviewed after they had begun menstruation to discover: their experiences of menarche and menstruation and how these experiences had effected their feelings about menstruation; how their knowledge had changed as a result of beginning menstruation; and what sense they made of menstruation postmenarche.

PARTICIPANTS

In the initial design for the research, the intention had been to interview all the 87 girls who had participated in the questionnaire phase of the study. However, when I began to plan the interviews in detail, I realised that it would not be possible for me to personally interview 87 girls at least twice. As the entire interview procedure could take over an hour, this would take more time than had been anticipated when planning the research. This was without taking the transcription time and analysis into account. I therefore decided to interview all the participating girls from one of the two schools. This was the 46 girls from the school in which all the pupils in the first year had been asked to participate. As there were no differences between the adolescents from the two schools on any measure including family background, this was a representative sample of the female adolescents in this study.

These 46 girls from South West Britain were predominantly white European and from 11 to 12 years old at the time of the first interview. (See Chapter 2, section on PARTICIPANTS, for further details on the adolescents' backgrounds and social class.) In terms of menarcheal status, at the first interview approximately 40 girls were premenarcheal and 6 were postmenarcheal. At the second interview approximately 21 girls were premenarcheal and 25 were postmenarcheal. As I relied on the girls' self-report of menstrual status, these figures while relatively reliable could only be approximate. There is evidence that earlier maturing girls will not always admit that they have begun menstruation.⁸⁴

PROCEDURE

Pilot testing of the semi-structured interview schedule

The interview schedule was pilot tested with 2 young adolescent girls, both premenarcheal. They were of a similar age and background to the adolescents in the main study. They were recruited through my personal contacts and I obtained parental permission for them to take

* The pilot interviews were conducted to determine whether the questions were understood by young adolescent girls and to check the girls' responses to the interviewer's questions.

part in the pilot test.^{*/} Each interview was done in one session in my study at my home and ~~were~~^{was} tape recorded. I introduced the interview, explained the procedure and assured the girl that the interview was confidential.⁸⁵ There were no major difficulties with either interview. One girl said she was nervous at the beginning but her response at the end was positive, as was the second girl's:

*First girl*⁸⁶

Q: Should I change any of the questions?

A: No, they are good.

Q: How did you find [the interview]?

A: It was good, it was interesting.

Second girl

Q: Would you like to comment on my questions?

A: I thought it was a very good lot of questions.

They were good questions, they are not too embarrassing and they are not, you know, round the edges, you know, they are proper, good questions.

The interview schedule was not changed.

Recruitment of Participants

The girls were recruited at the questionnaire phase of the study as discussed in Chapter 2, section on PROCEDURE, Recruitment of Participants.

Interviewing

The girls were interviewed twice: once in their first year of secondary school in 1990 and once in their second year in 1991. The procedure was the same both times. The interviews took place in May/June approximately 2 months after the questionnaires had been administered. I did the interviews over a three week period at the school during the normal school day. They were held in empty offices or quiet rooms that were available for that day: there was no special interview room for talking to adolescents in this school. Each interview was audio-recorded and subsequently transcribed⁸⁷ onto computer disc using a consistent orthographic system which I developed.⁸⁸

The teaching staff were informed when I was in the school interviewing and requested to allow girls to attend the interview if it was convenient. The first girl to be interviewed each day would be sent a note from me via the school secretary asking for her to attend for her interview "if it is convenient." At the end of the interview, she would then take a note from me to the next girl to be interviewed.

I began the interview by asking each girl if she still wanted to participate reminding her that she did not have to do the interview, she could withdraw at any time, and she could refuse to answer any questions. If she still agreed to participate, I told her the interview was confidential⁸⁹ and asked her permission to tape record the interview. At that point, the tape recorder was turned on and the interview began. It was conducted in a consistent but flexible manner. The entire procedure took about one hour. In the event, no girl refused to be interviewed or tape recorded,⁹⁰ although some girls did refuse to answer some questions.

I had two primary concerns about doing individual interviews with young adolescent girls in school. My first concern was the extent to which they felt they could choose to participate or withdraw from the study. I did as much as I could to give them a choice about being interviewed without actively discouraging them. However, it must be recognised that some girls may have felt pressurised by the situation to participate: I think this may have been unavoidable if the interviews were to be done in school.⁹¹ My second concern was the extent to which the girls felt the interviews were confidential. In the pilot group discussions, girls had expressed concern about teachers gossiping about them. Although I told the girls the interviews were to be confidential, I took particular care not to mix or gossip with the teachers in the school so that I could be seen as staying separate from staff.

SEMI-STRUCTURED INTERVIEW SCHEDULE

The semi-structured interview schedule (see Appendix K) was devised at an early stage in my research when I was interested in two issues: one was the effects of menarche on aspects of girls' self-concept and the other was the relationship between girls' expectations of menstruation and their subsequent experience of menstruation. In developing the schedule, I drew on current literature in the following areas: aspects of self,⁹² peer and sexual relationships,⁹³ motivation and significant life events⁹⁴ and attitudes to menstruation.⁹⁵ The interview schedule was devised to cover the following areas with each girl:

- i) introduction
 - information about the content and procedure of the interview
 - consent for the interview
- ii) self-concept and self-esteem
 - self-report on self-esteem
 - self-concept
- iii) identification with adults and possible selves
 - open-ended questions on possible selves
 - identification with adult role models
- iv) relationships with friends and opposite sex
 - level of interest in and activity with boys
 - views about sexual behaviour and morality
 - nature of peer group relations
- v) physical development
 - attitudes to physical development
 - evaluation of own body

vi) menstruation

for each girl

- knowledge about menstruation
- reactions to first learning about menstruation
- sources and adequacy of knowledge
- opinion on education for menstruation
- peer communication about menstruation

for premenarcheal girls

- expectations of menarche and menstruation
- expected communication with others about own menarche
- expected reactions of others to own menarche
- worries about menstruation
- expected impact of menstruation on self and relationships
- negative and positive attitudes to menstruation

for postmenarcheal girls

- experience of menarche and menstruation
- communication with others about menarche
- reactions of others to menarche
- worries about and problems with menstruation
- impact of menstruation on self and relationships
- negative and positive attitudes to menstruation

vii) general issues

- feelings about being a girl
- significant life events and their affects
- motivation

viii) debriefing

- ask opinions about the study
- allow for discussion of any area of concern
- deal with any unresolved issues
- ask for consent to be interviewed the next year
- thank the girl for the interview.

ANALYSIS AND DISCUSSION

I began my analysis of the girls' interviews with the "contextual analysis"⁹⁶ I had used with the groups discussions presented in Chapter 1. My choice of this analysis was influenced by the work on women's "Self, Voice, and Mind"⁹⁷ by feminist psychologists Mary Field Belenky, Blythe McVicker Clinchy, Nancy Rule Goldberger and Jill Mattuck Tarule.⁹⁸ As a feminist I share with them the belief "that conceptions of knowledge and truth that are accepted and articulated today have been shaped throughout history by the male-dominated majority culture"⁹⁹ so that psychological "theory has established men's experience and competence as a baseline against which both men's and women's development is then judged, often to the detriment or misreading of women."¹⁰⁰ When adopting a contextual analysis based on "descriptive interviewing"¹⁰¹ in which "the women speak for themselves",¹⁰² feminist academics are applying the political principle "that women's experience can provide a direct route to women's consciousness or identity."¹⁰³ This is consistent with humanistic criticism of traditional psychology that people's experience is "neither sought or valued."¹⁰⁴

By interviewing only women and proceeding with a contextual analysis "inductively...so that we might begin to hear the unheard and unimagined"¹⁰⁵ through steeping themselves in the "women's recorded and transcribed words",¹⁰⁶ feminist psychologists hope to give voice to women's own meaning and experiences. With my own interest in the meaning and experiences of menstruation for adolescent girls, this approach promised a feminist psychological analysis for my research. And my initial analysis of the interviews were informative about girls' knowledge and expectations of menstruation, for, as Wendy Hollway states, this approach achieves "a reasonably faithful reproduction of whatever assumptions people use to interpret their own experience in the research relationship."¹⁰⁷

However, an inductive contextual analysis continually proved to be problematic for me, in part because it is based on the idealist

assumption that "the knowledge is there, based on experience, and can be represented in an account."¹⁰⁸ In this case the analyses demonstrated that these young adolescent girls had limited knowledge about menstruation, and of course that premenarcheal girls had no direct or 'inner' personal experience of menstruation on which to base an account. Neither could the majority of girls talk openly enough about menstruation to present direct accounts to an adult so that even the postmenarcheal girls would give minimal or no accounts of their experience of menstruating.

In addition, an inductive contextual analysis tends to treat the account of the participants as producing facts which are the 'truth' about the individuals' inner thoughts, feelings or experiences. These revealed 'truths' are not conceptualised as text produced by discursive practices and mediated by social and power relations. The effects of the gender of the participants and researcher, the power of males over females or adults over children, the site of the research whether it is a highly regulated school site or a free wheeling street site, do not form part of the analysis. Rather a contextual analysis "reproduces (and legitimates through science) whatever discourses research participants use to position themselves at the time";¹⁰⁹ and this of course includes the researcher whose position is treated unproblematically as just a presenter of this 'revealed truth'.

Using this approach presented two problems. First, I was in danger of reproducing the normative social science discourse about British adolescents' ignorance of the biology of reproduction and negative attitudes to menstruation - what I call the menstrual misconceptions and miseries discourse. I consider I found myself in just this position with a conference paper I gave early in my research titled, "The Experience of Menarche: Misconceptions and Miseries". This paper was based on a contextual analysis of the girls' interviews in which I had categorised girls' expectations of menstruation as "don't know", "unpleasant", "concerned" and

"matter-of-fact" and their experiences of menstruation as primarily "a nuisance" and "oppressive". Here I had inadvertently pathologized the female body (it is a source of menstrual miseries), labelled girls as 'ignorant' (they don't or won't understand the biology of menstruation) and blamed either the mother or the teacher (they should educate girls about 'it') for this state of affairs.

But second and even more problematic, I found myself unable to account for many of the adolescents responses or my experience of the interviews (or the discussion groups). Rather than going beyond "attitudes" to accounts or meanings, my contextual analysis constituted the body and menstruation as an ungendered scientific object about which adolescents have 'feelings', 'knowledge' and 'beliefs', not the object whose femaleness embarrasses the girls:

*Girls' Group*¹¹⁰ -

[] it is too embarrassing.

So embarrassing [] like its your private parts

and constitutes their subjectivity:

Girls' Group -

It make you feel all self-conscious and it makes you not want to talk about anything.

Yea [Yea [Yea

or the 'other' whose sexuality repels and fascinates the boys:

Boys' Group -

You don't have to have billiards (breasts)

GGGG (giggling)

You don't have to have tits

GGGG (giggling)

They call them bosoms [they are called bosoms

[]

Mam, mam, they knock you out

GGGG (giggling)

[]

Why do girls have breasts?

or the experience about which they have nothing to say:

Postmenarcheal Girl

Q: When did your periods start then?

A: Er a couple of months ago.

Q: What was the first one like?

A: Er don't know really, don't know.

To explain adolescents' lack of knowledge, embarrassment or unwillingness to talk about menstruation and what this might mean for girls requires more than an inductive contextual analysis which codes and categorises subjects' accounts as if they are an "expression of the real person".¹¹¹ As Chris Weedon states:

The idea that it is possible to achieve self-expression of oneself as a woman, man or 'ungendered' individual in language assumes an already existing subjectivity which awaits expression. It also assumes that language is a transparent medium which expresses pre-given meaning.¹¹²

CONCLUSION

It was during this second year of my data collection and analysis that my methodological and theoretical "parallel paths" diverged so far that I stopped analysing data; and eventually, I stopped going for supervision. As I suspected at the beginning of my research the psychometric testing was producing similar findings to those already published about adolescents in Western Europe and the U.S.A. Even more importantly for me, my research design and methodology was not taking beyond the current normative findings and practices of traditional mainstream psychology. Slowly I realised that I needed to place myself in a different position and to use a different theory and methodology. Following in the footsteps of male masters of traditional psychology even with the addition of woman-centred descriptive interviewing was not going to give my research the feminist perspective or insights into subjectivity and meaning that I was seeking. After a number of unhelpful manoeuvres, I transferred my doctoral research to Goldsmiths' College and a female professor¹¹³ of the psychology of communication with an interest in girls, subjectivity and 'postmodern' psychology.

A new chapter opened in my work and it was hard work. I was presented with unimagined questions like "How did psychology come to

ask the questions it is asking about girls and menarche?"¹¹⁴ and "What is Western culture's conception of the female sexuality?" I struggled to even understand the questions and in that struggle embarked on the historical, cultural and psychological constructions of the female body, sexuality and menstruation. A different analysis of the interviews and group discussions became possible: I present these in Part III. But first there was work to be done on discourse, poststructural psychology and the history of menstruation: I present this work in Part II of this thesis.

Notes for Introduction and Part I

Notes for Introduction

1.

Rose, Nikolas (1985) The Psychological Complex: Psychology, Politics, and Society in England 1869-1939. Routledge and Kegan Paul: London, p. 3.

2. A classic psychological text states, "the term "reliability" always means stability or consistency...."(p.29) and validity is "the degree to which the test actually measures what it purports to measure" (p. 29) in Psychological Testing by Anne Anastasi (1965), second edition, The Macmillan Company: New York.

3. Harding, Sandra (1991) Whose Science? Whose Knowledge? Thinking from Women's Lives, Open University Press: Milton Keynes, p. 148.

4. May, Tim (1993) Social Research: Issues, Methods and Process, Open University Press: Buckingham and Philadelphia, p. 41. See this work and Ramazanoglu, C. (1992) "On Feminist Methodology: Male Reason Versus Female Empowerment", Sociology, Vol. 26(2), pp. 207-12, for a discussion of how a feminist or critical research commitment cannot sustain such a rationalist position.

5. Stanley, L. and Wise, S. (1983) Breaking Out: Feminist Consciousness and Feminist Research, Routledge and Kegan Paul: London. p. 155.

6. See Ben S. Bradley (1993) "Introduction: The Future of Developmental Theory", Theory and Psychology, Vol. 3(4), pp. 403-14, for a discussion of the critiques of psychology as a science and the prescriptions for a 'new' theory.

7. Harding (1991) argues that "our cultures have agendas and make assumptions that we as individuals cannot easily detect. Theoretically unmediated experience, that aspect of a group's or an individual's experience in which cultural influences cannot be detected, functions as part of the evidence for scientific claims", p. 149.

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Ruble and Brooks-Gunn (1982a).
14. McGrory, A. (1990) "Menarche: Responses of early adolescent females", Adolescence, Vol. 25, pp. 265-270.
- Weiden, J.P. (1984) "Menstrual Attitudes, Self and Body Image, and Overall Psychological Adjustment in Pre- and Post-menarcheal Girls", Ph.D. dissertation. University Microfilms, Inter.:Adelphi University.
15. Grief, E.B. and Ullman, K.J. (1982) "The psychological impact of menarche on early adolescent females: A Review", Child Development, Vol. 53, pp. 1413-1430.
- Scott, C. et al (1989a).
16. Amman-Gainotti, M. and Serra, G. (1983) "Knowledge and Beliefs about menstruation", Eta-Evolutiva, Vol. 15, pp. 15-27.

17. Amann-Gainotti (1986).

18. I qualified as a Youth Worker in 1972 and worked as a youth worker for 2 years. In 1974 I qualified as a middle/secondary school teacher and worked as secondary school teacher for 3 years. In 1984 I qualified as an Educational Psychologist and subsequently worked as a child and adolescent psychology consultant. This was in the U.K.

19. This was a series of nine lectures first published in 1966 by The Faculty of Education, University College of Swansea. The following references are from the 1970 reprinted text.

20. Chazan, M., Moore, T., Williams, P., Wright, J. and Walker, M. (1974) The Practice of Educational Psychology, Longman: Great Britain.

Cronback, L.E. (1970) Essentials of Psychological Testing. Third Edition, Harper & Row: United States.

Gillham, B. (1978) (ed.) Reconstructing Educational Psychology, Croom Helm: London.

Mittler, P. (1974) (ed.) The Psychological Assessment of Mental and Physical Handicaps, Tavistock: London.

Rutter, M. (1975) Helping Troubled Children, Penguin: Great Britain.

Rutter, M., Maughan, B., Mortimore, P., and Ouston, J. (1979) Fifteen Thousand Hours. Secondary Schools and their effects on Children, Open Books: England.

21. Waldeck, R. (1988) "Der rote Fleck im dunklen Kontinent: I. Das Tabu der Menstruation", Zeitschrift-fur-Sexualforschung, Sept. Vol. 1(3), pp. 189-205.

22. A number of the texts I quote above are written by women, two of my three training courses had women lecturers, and all three courses had a significant number of mature women students.

23. In using this phrase 'traditional', I am referring to the type of psychology which is dominant in academic institutions particularly in North America and Britain. This 'traditional' psychology is concerned with "the prediction and control of behaviour" (Parker, 1989, p. 3) and "objectivity" (Squire, 1989, p. 47): it tends to ignore the wider cultural debates about de-construction, post-structuralism, post-modernity, and feminism. I do not want to repeat these debates here as they are directly addressed by numerous current authors to whom I refer through out this thesis.

24. There was some feminist social psychology published at this time, but it was very limited, see Sue Wilkinson (1986) (ed.) Feminist Social Psychology, Open University Press: Milton Keynes.

25. I was intrigued by the theory and method presented in Wendy

Hollway's (1989) Subjectivity and Method in Psychology: Gender, Meaning and Science, Sage: London.

26. We were reading texts such as Evelyn Fox Keller (1987) "Women Scientists and Feminist Critics of Science", DAEDALUS, Fall, pp. 77-91; Jane Ussher (1989) The Psychology of the Female Body, Routledge: London; and Corinne Squire (1989) Significant Differences - Feminism in Psychology, Routledge: London.

27. This was considered the number necessary to do 'meaningful' statistical tests by my main supervisor although we had not planned the statistical analysis to be used.

28. At the time this was planned, I was concerned about the amount of data this design would generate. However, my supervisor considered this was necessary. Such a plan for doctorate research was in my opinion only ever feasible because I was a part-time student.

29. Grief and Ullman (1982)

30. This is a contested term, see Sophie Laws (1990) Issues of Blood: The Politics of Menstruation, Macmillan: London. However, it is commonly used in everyday discourse in the sense of a "prohibition resulting from social or other conventions" as defined by Patrick Hanks (1986) (ed.) second edition, The Collins English Dictionary, Collins: London. 'Taboo' was used in this way repeatedly by various people I talked with about my research from health professionals to psychologists to students as well as friends.

31. The perceived difficulty of researching menstruation with adolescents in Britain was highlighted by the comments of two academics to a paper I gave on my research at The Psychology of Women Conference in Edinburgh. One was amazed that I had been given permission by the schools and parents to do the research as she considered that such permission would not have been forthcoming in her area. The other had wanted to do similar research for her doctorate and had been advised against it.

32. My application to do this research may have been helped by my previous professional duties and personal contacts in the area. I had worked as a Senior Lecturer and Training Consultant at a local college for 10 years, I am a qualified Educational Psychologist, and my son was in a local comprehensive school.

33. See Mary Field Belenky, Blythe McVicker Clinchy, Nancy Rule Goldberger, and Jill Mattuck Tarule (1986) Women's Ways of Knowing: The Development of Self, Voice, and Mind, Basic Books: New York, pp. 58-59 for women's discussion of childhood abuse; and G. Lindsay and A. Peake (1989) "Child Sexual Abuse", Education and Child Psychology,

Vol. 6, No. 1 for discussion of the situation in Britain at the time of this research proposal.

34. See B.G. Glaser and A.L. Strauss (1967) The Discovery of Grounded Theory: Strategies for Qualitative Research, Weidenfeld and Nicholson: London for a discussion of the role of focus groups in the formulation of theory from data.

35. At this stage, I had not considered the concept of taboo as problematic but had just reproduced the dominant discourse of menstruation as culturally taboo. I discuss the origin of the concept of taboo and its insertion into scientific discourse in Part II of this thesis.

36. British society's problem with menstruation entering the public space was clearly demonstrated by the removal in 1993 of the Claire Rayner television advertisement for menstrual sanitary products. The advertising of sanitary products was entirely banned from television until 1979, see Sophie Laws (1990) p.46.

37. See Sophie Laws (1990) and Shirley Prendergast (1989) "Girls' Experience of Menstruation in School", in Lesley Holly (ed.) Girls and Sexuality, Open University Press: United Kingdom.

38. Preston, B. (1993), "PATTEN CRUSADES FOR SEX EDUCATION WITH A MORAL FLAVOUR", *The Times*, Friday, April 23. The italics are mine.

39. Preston (1993).

40. It is not only young people who appear in need of education about sexuality, but many adults are constituted in the media as 'ignorant'. This is exemplified by: the 1993 Channel 4 television programme on adult sexuality presented as educational; the magazine advertised on television by a young man in which the reader (male) is promised to learn about "her responses" and even "yourself"; and of course, there are the constant articles in women's magazines promising to teach you all you even wanted to know about "SEX".

41. Although menstruation can be taught within health education or as part of human biology, it is associated with sex education as I discuss later in the thesis.

42. Tanner, J.M. (1978) Fetus into man: Physical growth from conception to maturity, Harvard University Press: Cambridge, MA.

43. Preston (1993).

44. Squire (1989) p.7.

45. A popular textbook by P. Mussen, J. Conger, and J. Kagan (1979) fifth edition, Child Development and Personality, Harper & Row: New York places the discussion about menarche in a section titled "SEXUAL MATURATION" within an "individual differences" and "developmental sequences" discourse, p. 430.

46. When I began my research this association was explicitly stated to me by a male research psychologist who said that a man would not be able to interview adolescent girls about menstruation.

47. See my letter to parents, Appendix C.

48. Potter, Jonathan and Wetherell, Margaret (1987) Discourses and Social Psychology. Beyond Attitudes and Behaviour, Sage: London, p. 164.

49. Potter, J. and Mulkay, M. (1985) " 'Scientists' Interview Talk: Interviews as a Technique for Revealing Participants' Interpretative Practices", in J. Brenner, J. Brown, and D. Canter, (eds) The Research Interview: Uses and Approaches, Academic Press: New York.

50. The average ages of first year pupils is 11 to 12 years of age.

51. In this school, the children were placed in classes in either a low, middle, or high ability band for all their subjects for the first term based on their primary school reports and achievement tests. The discussion groups took place in December of 1989.

52. This letter had been prepared on the advice of the schools, and was approved before the research began.

53. Potter and Wetherell (1987) p. 165.

54. This system is not included because subsequently I used a different system (see Appendix L). This is discussed in detail in Part III of the thesis.

55. Belenky et al. (1986) p. 16.

56. On basis of this analysis I prepared a paper on "Expectations of Womanhood: The Social Construction and Consequences of the Menarche" which I gave at the BPS Psychology of Women Conference at Birmingham in 1990. It was subsequently published in the British Psychological Society Psychology of Women Newsletter in 1991.

57. Belenky et al. (1986) p. 155.

58. See for example Jonathan Potter and Margaret Wetherell (1987) pp. 102-103.

59. See for example Wendy Hollway (1989) p. 25.

60. Belenky et al. (1986) p. 144.

CHAPTER 2

61. I had informed them in the introduction to the research that a report and book would be written on the basis of their responses, but that no one person would be identified.

62. Franks, D.D. and Marolla, J. (1976) "Efficacious actions and social approval as interacting dimensions of self-esteem: A tentative formulation through construct validation", Sociometry, Vol. 39, pp. 324-41. This test was based on a modified version of Osgood's semantic differential discussed by M. Brewster Smith (1968) and confirmed by Viktor Gecas (1971).

63. The material for this questionnaire was obtained by private correspondence from Hazel Markus, 5256 Institute for Social Research, The University of Michigan (1987).

64. Markus, Hazel and Nurius, Patricia (1986) "Possible Selves", American Psychologist, Vol. 41, No. 9, pp. 954-69.

65. Coopersmith, Stanley (1967) The Antecedents of Self-Esteem, Freeman: San Francisco.

66. Robinson, J. and Shaver, P. (1973) Measures of social psychological attitudes, Institute for Social Research: Ann Arbor, MI.

67. Wylie, R.C. (1974) revised edition, The self-concept: Vol. I. A review of methodological considerations and measuring instruments, University of Nebraska Press: Lincoln.

68. Demo, David H. (1985) "The Measurement of Self-Esteem: Refining Our Methods", Journal of Personality and Social Psychology, Vol. 48, No. 6, pp. 1503-11.

69. Brooks-Gunn, Jeanne and Ruble, Diane N. (1980) "The menstrual attitude questionnaire", Psychosomatic Medicine, Vol. 42, pp. 503-12.

70. Weiden (1984) pp. 182-5.

71. See Mary Brown Parlee (1973) "The premenstrual syndrome", Psychological Bulletin, Vol. 80, No. 6, pp. 454-65 for an early

critique on menstrual questionnaires or P.G. Aubuchon and K. Calhoun (1985) "Menstrual Cycle Symptomatology: The Role of Social Expectancy and Experimental Demand Characteristics", Psychosomatic Medicine, Vol. 47, No. 1 (Jan/Feb), pp. 35-45 for a discussion of demand characteristics. Although Brooks-Gunn and Ruble were aware of this literature and had included positive items in their questionnaire, they were still not able to develop enough positive items to counter balance the dominant social construction of menstruation as unpleasant, embarrassing, and pathological.

72. See Appendix M for the Weiden version of the Menstrual Attitude Questionnaire -- form for adolescent females (Brooks-Gunn and Ruble, 1980). I used items: 1, 3, 4, 7, 10, 11, 13, 15, 16, 19, 20, and 27.

73. The number of responses are given in parentheses.

74. As menstrual cycle symptomatology is not the focus of this thesis, I do not want to pursue this idea too far, but boys' ignorance of menstruation particularly menstrual symptoms may have contradictory and important implications for women. On the one hand it could be considered as beneficial to women in that men do not necessarily view menstruation as pathological. On the other hand, it could lead to men ignoring the very real difficulties that women can have with their menstrual periods. I believe the contradictions of menstrual cycle symptomatology for women and feminists are discussed by Sophie Laws (1990) and Janet Sayer (1989).

75. Rierdan, Jill; Koff, Elissa and Stubbs, Margaret (1989) "Timing of Menarche, Preparation, and Initial Menstrual Experience: Replication and Further Analyses in a Prospective Study", Journal of Youth and Adolescence, Vol. 18, No. 5, pp. 413-26.

76. See Brooks-Gunn and Ruble (1980, 1982), Clark and Ruble (1978), McGrory (1990), Simmons et al. (1979, 1983), Weiden (1984).

77. These quotes are taken from the opening of Arlene McGrory's 1990 article, page 265; however, her statements are just one example among many. These kinds of statements about menarche as the 'significant' event in female pubertal development are commonplace and I discuss them further in Part II of the thesis.

78. See K. Ulman (1984) "Impact of menarche on adolescent girls' psychological functioning and family relations", Dissertation Abstracts International, 45B. University Microfilms No. DA 8416868. She discussed the longer term effects of menarche.

79. See Deutsch (1944) or Kestenberg (1964) for a discussion of the unconscious aspects of menarche and menstruation.

80. See McGrory (1990) for comments on the lack of research into menarche.

81. See McGrory's (1990) article pages 264-5 for further discussion: she said that of the 167 parents contacted, 67 refused to allow their daughters to participate in the study.

82. When I gave this seminar to my psychology department, I remember being particularly anxious about this presentation to a male dominated and largely traditional psychology department which included my two male supervisors.

83. Here I use the term feminist psychology to connote what Mary Brown Parlee (1975) defined as "someone who is both a feminist [] and a psychologist and whose research is in an area where a psychologist's perspective on feminism affects the way she or he formulates problems and questions", p. 131, footnote 43.

CHAPTER 3

84. See Anne McGrory (1990) for comments on the "threatening" nature of menstruation for early adolescent girls, p. 267. It would appear that at least 2 girls out of the 46 in my study had lied about their menstrual status in the first year interviews. They said they were premenarcheal, whereas in the second set of interviews, they said they had started menstruation during primary school. This was a year earlier than the first set of interviews. By the second set of interviews, most of the girls in the study thought other girls had begun menstruation; therefore, by the second interview these two girls could have felt it was 'normal' to menstruate. They then found it possible to admit to their own menarche.

85. This was particularly important with these two girls as they lived in my neighbourhood and I knew their mothers socially. I told them they could discuss any aspect of the interview themselves, but that I would not discuss or print any of the personal material from their interviews. Both the mothers subsequently expressed interest in what had been discussed commenting on how interesting and enjoyable their daughters had found the interview.

86. "Q:" identifies that the interviewer is speaking and "A:" identifies that a young person is speaking. Text quoted from the transcripts is identified either by the use of indentation and single spacing or quotation marks. None of the participants names are used. See Appendix L for the transcription notations.

87. I did not personally transcribe all the interviews although that had been my intention. When I began the doctorate research I was working part-time and doing the doctorate research part-time. By the time I began to transcribe the interviews I was working at a university more or less full time as a Senior Lecturer with a substantial administrative load. It was decided that I should have assistance in the department in transcribing the interviews. Three of us worked together on the transcriptions. Unfortunately because word processing was still relatively new, we ended up using three different word processing packages. This did not cause any difficulties initially because I was doing the analysis from hard copy (printed sheets), but it did cause difficulties later when I wanted to analyse the interviews on THE ETHNOGRAPH. I discuss these difficulties in Chapter 9.

88. As in Chapter 1, this system is not included because subsequently I used a different system (see Appendix L).

89. I explained that it was confidential in the sense that I would not discuss anything she had said to me with anyone in the local area, especially any other girl interviewed or any member of the school staff. However, she could discuss any part of the interview with anyone she wanted as it was about her. Her responses would be used as part of the research, but they would be anonymous.

90. On one occasion I turned the tape recorder off because a girl wanted to discuss a confidential domestic situation which was not relevant to the research.

91. One advantage could have been that girls were free from pressure by parents not to participate because of the parents' "embarrassment". Another solution might have been group interviews or group discussions; however, there are girls who prefer individual interviews to group situations. It is difficult to know how to resolve the problems of participant consent when doing research with a number of adolescents over time.

92. See Demo (1985), Gilligan (1982), Markus and Nurius (1986), Markus (1987), and Warner (1981).

93. See Lees (1986) and Stanworth (1981).

94. See Belenky et al. (1986), Josselson (1987), and Van Hook and Higgins (1988).

95. See Brooks-Gunn and Petersen (1983), Brooks-Gunn and Ruble (1983), Weiden (1982), Whisnant and Zegan (1975).

96. Belenky et al. (1986) p.16.

97. From the title of their book, Women's Ways of Knowing: The Development of Self, Voice, and Mind (1986).

98. Their work in turn was influenced by American feminist psychologists Nancy Chodorow, Carol Gilligan (1982), and Jean Baker Miller (1976) working in what Corinne Squire (1989) has characterised as a "woman-centred psychology", p. 78.

99. Belenky et al. (1986) p.5.

100. Belenky et al. (1986) p. 7. I believe their project as feminist psychologists is to try to take "both a woman-centred feminism and egalitarian feminist psychology further, by creating an alternative, female-specific psychology" as discussed by Corinne Squire (1989) pp. 79-80.

101. Hollway, Wendy (1989) discusses how what she calls "descriptive interviewing" is characteristic of feminist social psychology, p. 40.

102. Belenky et al. (1986) p. ix.

103. Hollway (1989) p. 40.

104. Hollway (1989) p. 41.

105. Belenky et al. (1986) p. 11. This inductive method is not exclusive to feminist methodology. Grounded theory by B.G. Glaser & A.L. Strauss (1967) suggests focus groups and in-depth interviews to develop theory from data through an inductive process.

106. Belenky et al. (1986) p. ix.

107. Hollway (1989) p. 40.

108. Hollway (1989) p. 41.

109. Hollway (1989) p. 40.

110. All the quotes in this section are taken from the group discussions and interviews.

111. Hollway (1989) p. 42.

112. Weedon, Chris (1987) Feminist Practice and Poststructuralist Theory, Blackwell: Oxford U.K. & Cambridge U.S.A., pp. 82-83.

113. I attended a day conference in London on "Discourse and Gender" in December 1990 at which a number of women academic psychologists gave papers on their work including Valerie Walkerdine. As a result

I transferred my Ph.D. in October 1991 to Goldsmiths' College in order to be supervised by Professor Walkerdine.

114. I remember this vividly as being one of the first questions Professor Walkerdine asked me once we began supervision. It was not a question I had ever been asked and I only really understood the question after completing the research for Part II of the thesis.

PART II:

THE HISTORICAL CONSTRUCTION

OF THE

FEMALE BODY AND MENSTRUATION

IN WESTERN CULTURE

CHAPTER 4

POSTSTRUCTURALIST PSYCHOLOGY AND DISCOURSE ANALYSIS:

changing my theory and method

INTRODUCTION: CHANGING APPROACH

My change in supervision opened the space for me to pursue the questions about menstruation and menarche which had remained in the background of my research. Questions about why is there so little published psychological research on menarche and 'normal' menstruation, especially considering the literature on menstrual pathology? Why is menstruation such a socially sensitive topic when so many other 'taboo' subjects have been opened up? Why are so many girls and boys, and women and men, so 'ignorant' about menstruation? Why do so many people - female and male, younger and older - appear to have such negative views about menstruation? Where has this negativity come from? And why did I find myself with these same negative emotions about menstruation so that I felt an immediate reluctance to research menstruation even as I suggested the topic myself?

As I had realised in the first part of my research the dominant theories and methods of mainstream psychology do not address these questions. Even women psychologists researching menarche have focused on the quantification of menstrual attitudes and knowledge rather than questioning their nature. Their research is based on the "taken-for-granted, common-sense facts"¹ of the female body and of a menstruation which is always everywhere tabooed and the significant sign of womanhood. Neither is the more explicitly feminist qualitative methodology in psychology, 'giving a voice', necessarily a "valid one".² In part because such an approach does not theorise the social aspects of women's subjective experience, and in part because such an approach does not consider that "silences, as well as 'giving a voice' can be empowering."³ Too often this research neglects the issue of social and power relations in the formation of women's views, attitudes, experience and 'voice' as well as

neglecting questions of who is being empowered and in whose interests this empowerment is being enacted.

I required an approach that would enable me to, as it were, get behind the assumptions of the present psychology of menarche so I could analyse sources of menstrual conceptions and practices both in psychology and the subjects of that psychology. An approach that would enable me to tackle the following questions: Where have negative menstrual attitudes come from? How has psychology come to ask the questions it has asked about menarche and girls? What is British, and Western, culture's conception of the female body, and how has that conception influenced our understanding and practice of menstruation?

These were very difficult questions for me when they first arose: they were not the kinds of questions which had been addressed in my years of psychological training and practice. To ask where an attitude has come from implies a concern with history and modern psychology tends to ignore the history of its subjects and the ways that history forms them. To ask how particular psychological questions have come into being implies specific social, political and historical influences on scientific concerns and modern psychology presents itself as an impartial science pursuing ever more objective 'facts' and 'truths' about the 'real' world of human mind and behaviour separate from the domains of the social, political and economic. To ask what is the culture's conception of the female body implies an understanding which is constructed by particular cultures and power relations and in modern psychology conceptions of the body assume an unproblematic truth given by a factual biology unmediated by social or power relations. In order to tackle these questions I needed an approach in psychology concerned with history, the production of knowledge, and the way claims to truth are established as well as a psychology concerned with how people come to think, feel, talk and behave in the ways that they do, and how relations of power - of sex, race, and class - affect all these questions.

POSTSTRUCTURALIST PSYCHOLOGY AND DISCOURSE ANALYSIS

There is a position in current psychological knowledge, research and practice concerned with these questions. It tends to be associated with what is called poststructuralist psychology and discourse analysis as influenced by the work of Michel Foucault.⁴ And this approach "already has a history in psychology."⁵ Unfortunately for those of us new to this area, there are two major difficulties. The first is that the category 'discourse' within the social sciences "is becoming embarrassingly overloaded and more likely to induce confusion than any clarity it might originally have been set to produce."⁶ And second a poststructuralist psychology is part of the "break with major assumptions about the subject matter of modern psychology, in particular by the decentring of the self, the move from the inside of the psyche to the text of the world, and the emphasis on practical knowledge."⁷

A move to a poststructuralist discourse analysis for a traditionally trained psychologist like myself does not come easily, because, as "Foucault argues, we must give up ingrained habits"⁸ of thought and practice. We must not treat knowledges "purely as theoretical architectures" nor distinguish between theory and praxis. Rather we must conceive of "knowledge as a practice".⁹ In this way we can consider how knowledges comes into being rather than assuming they either just stand for some "real" thing or that they are "signs" expressed in language.¹⁰ For example to have a psychology of menarche, there must be practitioners of psychology or 'psychologists' and there must an object of that psychology or 'menarche'. But even more there must be the conditions for the 'psychologists' - places for them to work, institutions which support them, research technologies, publications, teaching and training institutions, libraries. And there must be the conditions for a

'menarche' - definitions of it, problems about it, findings on it, ways of researching it, the subjects of it and justifications for researching it. All of these things are a part of the knowledge - the psychology of menarche. They are not contingent issues to be controlled or ignored in pursuit of the 'truth', but are part of the creation of psychological 'truths'.

It was in pursuing the history first of the female body and second the psychology of the menarche that I began to understand both what is meant by these concepts and the power of this approach. For example, before I undertook the analysis presented in Chapter 5, "Constructing the Menstruous Woman in British Culture", I just took it for granted that the female body and the male body are completely different, have always been completely different and will always be completely different. This seems just common sense as well as scientific fact and underwrites much research into the menstrual cycle. However, I discovered this has not always been the case: there have been and are different ways of seeing the human body. In early 17th century British anatomy and medicine, the female and male body was viewed as essentially the same, although some differences were recognised. Even in the scientific Victorian era, as I discuss in Chapter 6, "The Woman Question", a leading scientist and physician argued for the similarities between the female and male body. Dr. Jacobi stated that between the "two sexes, is a difference not of kind, but of degree."¹¹

I argue that a feminist poststructuralist psychology allows us to see the female body as a "medium of culture" and as Foucault has argued "a *practical*, direct locus of social control"¹² as well as a material, biological body. Far from being the pre-given object about which scientists and psychologists make 'discoveries', the body is "trained, shaped, and impressed with the stamp of prevailing historical forms of selfhood, desire, masculinity, femininity."¹³ And if as Chris Weedon argues "patriarchal power rests on the social meanings given to biological sexual difference,"¹⁴ then it is

fundamental to a feminist psychology of menarche that we tackle "questions of how and where knowledge is produced and by whom, and of what counts as knowledge."¹⁵

These questions about knowledge are especially important if we accept that "the process of productions of knowledge is always open to the effect of politics,"¹⁶ because there is always the danger of research re-producing rather than challenging, resisting or transforming existing relations of power. We can become enmeshed by the practices of institutional psychology and medicine "into collusion with forces that sustain"¹⁷ our own subordination as women. For example, in tracing the history of menstrual research in Chapter 7, "Girls' Menstrual Milestones and Traumas", I found that Dr. Therese Benedek, a researcher, physician, author and psychoanalyst, re-produced in her work the arguments of anti-feminist male biologists that women's emotions and behaviour are controlled by their sexual cycle.¹⁸ These arguments have been used repeatedly to restrict women's participation in public and economic life including education and medicine; so that Therese Benedek re-produces the very arguments which could subordinate her own, and other women's, interests and ambitions.

In the research on menarche, I argue that it was anti-feminist (and male dominated) psychology that constructed the onset of menstruation as a 'critical' period marking the menstruating girl as both vulnerable to trauma and fundamentally different (biologically different) from the adolescent boy. This construction of menarche as a 'significant' developmental event with no male equivalent which signals 'womanhood' and 'femininity' remains unexamined by many women research psychologists. In this literature menarche is treated as a pre-given object of biology; not the historical creation of a particular kind of twentieth century psychology. So that even as women in psychology are seeking to redress the gender imbalance in psychological practice by more research by women on topics of

interest and importance to women, they re-produce patriarchal conceptions of the female body by ignoring the historical and cultural construction of their subject. With a psychology ignorant of history and devoid of power relations we risk mistaking manmade objects for nature-given realities; thereby inadvertently supporting the *status quo*.

In contrast when a poststructuralist analysis is applied to the psychology of menarche, it assumes that knowledges of the female body, menstruation and adolescence are cultural productions involving the participation of wider social practices. This analysis is not of the psychology of menarche in terms of "its internal coherence as a body of scientific work".¹⁹ Rather the psychology of menarche is assumed to be the product of particular discursive practices and not of an independent, materially given object on which psychologists do tests and obtain results. Foucault's approach to the histories of the production of knowledge has been called "a history of the present precisely to the extent that it is structured by conclusions and considerations already established concerning present practices and institutions".²⁰ And it is this 'history of the present' which I undertake in this second part of my research on girls, menstruation and psychology.

DISCOURSE ANALYSIS

Central to my poststructuralist analysis of the history of the female body, menstruation and menarche is the concept of 'discourse', because it is this that is the "unit of analysis".²¹ In Changing the Subject, Henriques et al. define discourse in the "most general sense as any regulated system of statements", and in this sense discourse has a "long ancestry."²² However the concept is a problematic one, in part because of the various uses to which it has been put. Cousins and Hussain identify the following: in a branch of socio-linguistics to analyse speech and conversation, in a linguistics of subjectivity as part of a general speculation about

the relations of language to possible positions of the human subject in language, to extend the theory of ideology and as part of a philosophical debate about knowledge and reality.²³ In psycholinguistics it has focused on structural linguistics with an "emphasis on structural analysis and its relative neglect of content";²⁴ whereas in poststructural discourse analysis there is a central concern with content and a "step away from language".²⁵ In part it is this paradoxical move to discourse but away from language as well as its break with many of the major assumptions of modern psychology that makes poststructural discourse analysis problematic as well as "curious, useful, dangerous and liberating."²⁶

So how can (poststructuralist)²⁷ discourse be defined? Ian Parker describes it as "*a system of statements which constructs an object*".²⁸ This is a helpful definition in understanding how an object of psychological study, like the menarche, comes into being. But it can be limiting for understanding that a discursive object, like menarche, does not exist on its own; it is always part of a wider body (or bodies) of knowledge. So not only is menarche an object in the discipline of psychology, but it is also to be found in biology, medicine, psychoanalysis and anthropology. These different disciplines not only construct the object, menarche, differently but they make competing claims about it. For example, in biology menarche is only one developmental event in a series of biological changes during puberty: it is a normal reproductive function. Whereas in psychoanalysis menarche is a significant psychic event during the psychosexual development of feminine identity: and it is a psychic trauma. As an object is always constructed within these wider systems of what Foucault called a discursive formation,²⁹ I find it more helpful to consider discourse as *a regulated system of statements which constructs an object in a body (or bodies) of knowledge*.

So what is meant? First let us consider 'statements' because this term is used in the following special way:

i) "A statement must not be confused with a sentence or with a proposition"³⁰ or a hypothesis - it is not just 'text'. It may be any of these but it will also be more because discourses are *always* social practices. This is because bodies of knowledge never operate in a vacuum, but are always part of a disciplinary practice. Knowledge is produced by practitioners (people doing things) occupying positions in institutions, whether formal institutions like universities or more informal institutions like a feminist publishing co-operative. This is an important point and the difference between a poststructural discourse analysis and a language oriented approach. As Foucault said discourses are "practices that systematically form the objects of which they speak".³¹ They cannot be reduced to linguistic structures or logical units. In this way, the analysis is a step away from language and concerned with content and practice.

ii) It is not so much that a statement refers to or signifies a particular object, like menstruation, but more that it organises the object in a discursive formation, like discourses of the body. In this sense the concept of a discursive formation is more helpful in an analysis of the discourses of the female body than the concept of a knowledge. There is not a knowledge of the female body in the sense that there is an organised field of knowledge of, say, psychology. Rather the discourses and practices of the female body come from a number of different knowledges, like psychology, medicine, biology, etc.

iii) "A statement always possesses a relation to a subject" - a speaker, a person. But the subject's importance in discourse analysis is not the relationship to a particular and unique person, but rather to a "particular structure of a locus which individuals can occupy,"³² like a scientist or university lecturer. An individual person may come and go, but the institutional position remains.

iv) The statement cannot 'stand alone' but must operate in combination with other statements. So that a statement operates in a discursive field "made up of all the formulations to which the statement refers (implicitly or not) either by repeating them, modifying them, or adapting them, or by opposing them, or by commenting on them; there can be no statement that in one way or another does not reactualize others...."³³

v) A statement has a "form of materiality which determines its capacity to be repeated." Statements do not exist as unique events or purely by taking on an identity in language but rather the "identity, the material repeatability, of the statement lies in the institutional register"³⁴ with its "possibilities of reinscription and transcription".³⁵

Let me illustrate what is meant by these ways in which *statements construct an object in a body of knowledge* using material from the following Chapter 6, "The Woman Question". It is possible to identify a scientific discourse of menstrual pathology by tracing the history of the menstrual cycle and the premenstrual syndrome.³⁶ In this history, for example, we find this statement about women and menstruation: "The (female) voice also is liable to be affected at the menstrual periods, and the skin and breath sometimes have a peculiar odour. Mental depression may exist, and be accompanied by nervous pathological phenomena."³⁷ This is in F.H.A. Marshall's (1910) The Physiology of Reproduction. This was a seminal text in this field which was reprinted for over 40 years as well as often quoted and used in higher education institutions - it had a material repeatability in the institutional register.

Marshall, the so called 'father' of reproductive physiology, was a 'respected and renowned' scientist. However, the importance of this statement does not rest so much on him as an unique individual or even its truth about menstruation as a physiological process as on his position as a well published author, a 'father' of a knowledge,

and a university lecturer at Cambridge. His 'facts' about menstruation were authoritative and important not because he used 'scientific' research as such, but because of his position in institutions of power and in the discursive field. He was quoted by other 'respected and renowned' authorities as well as quoting such authorities himself. This statement did not stand alone, but was part of the wider debates, explanations and statements of women's nature and body as well as the menstrual cycle.

That discourses are always social practices "open to the effects of politics"³⁸ is exemplified by the scientific practices of this era. For example, in constructing his physiology of menstruation, Marshall used the work of a 'respected and renowned' authority, Cambridge biologist Walter Heape who was also widely quoted. He influenced scientists in a number of fields through his research on sexual desire and menstruation in primates.³⁹ Heape was as an active and rabid anti-feminist who used his formulations to argue against equality for women.⁴⁰ And even more important for women's lives, these patriarchal 'scientific' formulations of the menstrual cycle were used in medical practice to define menstruation as 'illness'; thereby subjecting women to a restrictive regime and subordinate position.

So we see that there is not a scientific discourse of menstrual pathology because one scientist, however renowned and famous, told one woman she was ill because she was menstruating/not menstruating; or even because one scientist published such a statement. Rather there is a scientific discourse of menstrual pathology because statements such as Marshall's are reinscribed and transcribed in the institutional register by subjects in particular positions of influence. The importance of such statements is not so much their relation to the material reality of female physiology or to the structure or meaning of language, but more that such statements organise the discourses and practices of the female body. It is the

production of a particular discourse, menstruation as 'illness', which subjects real women to social practices which regulate and discipline their actual bodies and being.

Second, this approach to discourse analysis proposes that a discourse is *regulated* and *systemic*. There are implicit rules of a discourse which delimit what can be said, how it can be combined with other discourses, and how it is different from other categories of discourse, i.e., in the scientific discourse of menstrual pathology, a scientist cannot explain menstrual distress by reference to women's sinfulness or fall from grace - this explanation is religious, not scientific. The rules of any specific discourse only allow for certain kinds of statements and not other kinds of statements: in other words, "the rules delimit the sayable".⁴¹ But paradoxically a discourse is also productive. It provides the space for making new statements about objects and constructing new knowledges. For example, the early 20th century biological 'discovery' of hormones made possible both the treatment of some dysfunctions like infertility and the concept of premenstrual tension. This biology of hormones has provided some of the key concepts and metaphors about the human body and physiological processes which the discourses of premenstrual tension and sex differences utilise in the production of their propositions and findings.

Furthermore, these propositions and findings have to be consistent with the concepts, metaphors, analogies, facts, and statements used in that discursive field, i.e. later twentieth century explanations of menstrual distress must address the issue of hormones. Marshall at the turn of the twentieth century could account for menstrual distress and women's place in society by using concepts and findings from comparative biology and evolution - ideas about women being less evolved than men, but more evolved than primates and specially designed for reproduction and the domestic

sphere. Whereas today, menstrual distress and sexual difference are predominately accounted for by reference to women's 'raging' hormones, not women's more primitive nature.

However, this is not to say that any particular discourse is itself entirely internally consistent, rational, or the 'best'/'truest' explanation. In the literature on premenstrual syndrome, most researchers will at some point proclaim menstruation to be a 'natural physiological event'. This is stated even though the research only investigates and discusses the diseases and unnatural turns of the menstrual process. And, as important as their statements, is their confidence in these 'scientific' findings about the nature of women because of the direct implications for practice. Experts proclaim, and women experience, their menstrual cycle as the cause of their 'problems' and its 'treatment' as the solution, in spite of various substantive critiques.

These examples from the discourse of menstrual pathology illustrate how every discourse is part of a discursive complex, locked in an intricate web of practices. So that "what the analysis seeks to constitute is the practice of a particular knowledge..."⁴² As well as the statements, there must be institutional sites, technologies, practitioners, sites of practice, rules of practice, subjects, objects, publications and libraries. It is important to emphasise that a poststructural analysis proposes that every discourse be regarded as:

- i) the result of a practice of production;
- ii) a production at once material, discursive, and complex;
- iii) and always inscribed in relation to other practices and other discourses.⁴³

POSTSTRUCTURALIST PSYCHOLOGY

In discussing discourse analysis, I need to go a few steps further and briefly discuss some of a feminist poststructuralist psychology's break with the major assumptions of modern psychology, particularly about the individual and society, the nature of science, and relations of power.

The individual and society

A poststructuralist analysis provides an alternative approach to the 'individual' and 'society' by regarding both these as productions "rather than as the pre-given objects of the human sciences."⁴⁴ This is radically different from the approaches in sociology and psychology which tend to take the 'individual' and 'society' as already given independently and separately produced entities. In a poststructuralist approach the production "of subjectivity and of sociality" are regarded to be indissoluble⁴⁵ as well as historically specific.

The use of the term 'social' is meant to mark a break from the sociological concept of 'society' as used in such expressions as 'society effects' or 'the impact of society on individuals'. Here society is assumed to be a unified, unproblematic entity with volition or agency - it does things to individuals or has effects on individuals. In contrast, Foucault suggested that there are various discourses, practices, apparatuses and institutions that together form the social. And that this complex of processes and relations needs to be problematised, not glossed over by using the concept 'society'.

The use of the term 'subject'⁴⁶ and 'subjectivity' are central to poststructuralist theory marking a crucial break with conceptions of the individual which are "still central to Western philosophy"⁴⁷ and modern psychology.⁴⁸ This 'individual' of modern psychology appears either as the positivistic normal, unitary and rational hu/man⁴⁹ or as the humanistic unique, coherent and essential self.⁵⁰ These 'individuals' are pre-given subjects without a history and

without a gender, separate from society and power relations, and with their behaviour underwritten in the end by biology. But this exclusion of contradiction and this division of the individual from society means that psychology finds it difficult to deal with the effects of the social and the evidence of the irrational. In contrast, concepts of the subject and subjectivity displaces "objective rationality from the centre of the human subject"⁵¹ and proposes a multiple and dynamic subjectivity "always positioned in relation to particular discourses and practices and produced by these - the condition of being subject."⁵² In this sense our subjectivity is: our individuality and self-awareness; our "ideas, beliefs, and emotions";⁵³ our conscious and unconscious; our sense of ourselves and our ways of understanding our relations to the world. And our subjectivity is contradictory, irrational and in process.

The use of the term subjectivity rather than 'self', 'identity', or 'individual' is a displacement of the individual/society couple and the nature/nurture debate. This couple and debate remains locked in trying to determine what is 'inside' the person and 'outside' in the society; what are the effects of an inside pre-given nature versus the effects of an outside changing environment. Whereas in discourse analysis the subject is always already social; there cannot be the one without the other. Our subjectivity is constituted in the social: it is not the result of some essential nature or universal mental process to be 'discovered' by the objective psychologist in the laboratory. In displacing nature, this theorisation does not deny the body or brain, but it does deny that our knowledge, our behaviour or our subjectivity can be accounted for by reference to our nature or biology as a baseline.

The nature of science

Modern mainstream psychology considers its knowledge as scientific. This 'science' in psychology entertains ideas about: an objective progress towards an absolute truth, ungendered scientists dispassionately pursuing reality, unchanging individuals who can be

assessed and applications of 'pure' findings. In contrast, a feminist poststructuralist psychology rejects the autonomy of science, the disinterest of the scientist and objective knowledge outside cultural and power relations.

In a poststructural analysis scientific statements are seen as the result of two things: i) They are a labour of production, but a production constrained by the material nature and processes of the real objects of scientific investigations: i.e., biological theories of menstruation are a discursive production, but they are constrained by the material nature and processes of the female body. ii) There is a difference between the real object and the object of knowledge. ~~An object of knowledge~~ ^{*(insert see opposite page)} is always a construction that depends on current theories, practitioners, research techniques, systems of understanding, and historical and cultural circumstances. For example, in Victorian science, the menstrual period was considered as the most likely time for conception with the mid-cycle the least fertile time; whereas now the opposite is considered correct. I would argue that female fertility in 1910 and 1990 are basically the same, but our knowledge is different. Scientific theories do not give privileged access to *the truth* of material objects: "As most scientists themselves would acknowledge, it can only ever produce specific knowledge, with particular implications."⁵⁴

Relations of power and discourse

In proposing the human sciences as a production of knowledge, psychology is brought into a theory of discourse which recognises the investment of power and desire in the discursive process. Psychology is not seen as an autonomous science pursuing its goals in objective isolation, but is part of a complex of practices that are always already historical and social. The production of psychological knowledge is a "consequence, as well as the condition, of power relations."⁵⁵ Therefore in a poststructuralist analysis "power is invested in discourse; equally, discursive practices produce, maintain or play out power relations."⁵⁶ For example, in the

scientific discourse of menstrual pathology, we saw that the production of a particular knowledge about menstruation had the power to regulate medical practice and women's lives. Equally, the construction of a menstrual pathology played out the power relations between men and women at that time. In this sense, a discourse analysis is always concerned with relations of power even if power is not the primary focus of the research.⁵⁷ This is in marked contrast to dominant modern social psychology practice in which "at times, it is as if power were a social obscenity."⁵⁸

But what is meant by *power* in poststructuralist theory? Even in posing the question I fear I risk treading endlessly in what Foucault called "the double question: What is power? and Where does power come from?"⁵⁹ In part this difficulty arises because it is such an all-embracing and reifying term that it may be impossible to answer such a question fully,⁶⁰ and in part because Foucault's discussions about power "represent neither a theory nor a methodology."⁶¹ He described his work as concerned with:

*"How," not in the sense of "how does it manifest itself?" but "By what means it is exercised?" and "What happens when individuals exert (as they say) power over others?"*⁶²

However, as power is a central concern of a feminist discourse analysis rather than give up on the question, I can at least point to the features of its use in this analysis of the historical construction of the female body, menstruation and menarche.

I begin with some refusals. I am not using power as a term of 'empowerment' because, first, empowerment implies a pre-given subject not a decentred subject and, second, it implies that a person can come into possession of a property - power. In a poststructural analysis power is not seen as one-sided, monolithic, or the property of one group or the other. It is not coercion or violence. Rather power is seen as operating through knowledge, discourses and practices in relationships in which a number of possible courses are

open to the agents in question. This is a power which operates to constrain, direct or influence people in a relationship in which conflict, resistance and contradictions are ever present possibilities. This is a resistance which can be conscious or the "mute automatic resistance of that which is in the process of being shaped."⁶³ In this sense, I am not using power as "the reproduction of relations between people in which resistance is suppressed."⁶⁴

Rather my analysis focuses on how "power is exercised within discourses in the ways in which they constitute and govern individual subjects"⁶⁵ as well as objects of knowledge. For example, in the previously discussed Victorian medical practice, the scientific discourse of menstrual pathology gave medical practitioners the power to define menstruation as 'illness' and to subject women to particular regimes of treatment. I argue that their power was not based on violence, coercion or even ~~predominately their social~~ ^{exclusively on} ~~grouping (white men from the upper classes)~~ ^{the social power of men} but on the power of ~~their~~ ^{medical} knowledge and expertise. This power had an institutional base - in universities, hospitals, training institutions, professional associations and doctors' practices. It was its basis in scientific knowledge and social institutions as well as its relationship to 'The Woman Question' that produced and maintained this discourse of menstrual pathology. *(see below)

However, the power of this discourse and medical practice was neither monolithic nor the property of the discourse or its agents. The power was in the relationship between the discourses and the subjects - in which there was conflict, contradictions and resistance. The scientific formulations of menstruation as pathology did not go unchallenged: other eminent physicians and scientists, some women some men, publicly disputed particular theories and practices. There were contradictions: although menstruating women were constituted as periodically too 'ill' to be professional midwives, they were not too 'ill' to be servants, factory workers or mothers and, of course, numerous menstruating women were never 'ill'

* (See Foucault 1976 for a discussion of how the "feminine body" as "hysterical" emerges in the 19th century as a "privileged object of knowledge", pp. 104-5.)

at all. These various conflicts and contradictions opened the space for both alternative discourses and doubts about the 'truth' of particular formulations. With the rise of the feminist movement and women's greater access to institutions of learning and training, these contradictions and conflicts developed into a conscious resistance to the discourse of menstrual pathology. Feminist physicians, scientists and writers 'discovered' and produced alternative knowledge and practices in direct opposition to patriarchal constructions of the female body and nature as I discuss in Chapter 6, "The Woman Question".

A HISTORY OF THE PRESENT PSYCHOLOGY OF MENARCHE

The following chapters are the result of my change to a feminist poststructural discourse analysis. Using this approach I could investigate both the negativity and everyday silence about menstruation that was evident in my research and the nature of modern psychology's concerns about and constructions of menarche and menstruation. A poststructural analysis does not assume that our present conceptions of and questions about menstruation arise from a transparent nature or universal psychic structures. Our present conceptions and questions are problematised so that I was able to do a historical analysis of the present psychology of menarche. This enabled me to take up a position outside of the dominant discourses of menstruation in order to analyse my data. My questions changed from a concern with girls' self-concepts and attitudes to menstruation to questions of: *What* is British and Western culture's conception of the female body, and *how* has that conception influenced our understanding and practice of menstruation? *How* has psychology come to ask the questions it asks about menarche and girls? And *why* is it psychology that asks these questions?

In a sense, this part of the thesis is a history of the emergence of the present psychology of the menarche because I trace the changing conceptions of the female body and menstruation. Here

we see the emergence of conceptions of the female body as completely different from the male body with menstruation becoming the biological process which defines women's nature and role in society. It is transformed from a natural self-regulating process in the 17th century into a pathological condition and universal taboo in the 20th century. And from the formation of psychology as a discipline, the adolescent girl's puberty and onset of menstruation have been objects of psychological concern, regulation and intervention.

This history of menarche is influenced by Foucault's approach to histories of the production of knowledge and Henriques et al.'s use of this approach to reconceptualise "psychology as a body of knowledge."⁶⁶ This 'new' history, a history of the present, is used in two ways. First, conceptions of the female body and the psychology of menarche are not seen as the result of an orderly development of scientific ideas and discoveries about female biology or the psychological effects of menarche on girls, but as a complex and historically specific production of ideas about menstruation, the female body/nature, and the discipline of psychology. Second, this alternative approach to the human sciences problematises the 'psychology of menarche', 'menstruation' and 'the female body'. They are regarded as the effects of a production to be specified rather than as the pre-given objects of the human sciences.

So the discourses which are the object of this analysis are not the psychology of menarche or the biology of the human body as disciplines to be examined in terms of their progressive development of ever more scientific truths about adolescent girls and their bodies nor as disciplines to be examined in terms of their place in a social history. This is not a history of ideas in the sense of starting out from clear or accepted definitions of menarche or female bodies/psyches and describing their development in a 'psychology of menarche' or a 'history of menstruation'. This is a history of a set of specific discursive practices dispersed in a variety of social apparatuses which have women's bodies, behaviours and desires as

their targets. In this sense as I have discussed above, this is a history of the present because "it is structured by conclusions and considerations already established concerning present practices and institutions."⁶⁷

This approach assumes that "knowledges, for example psychology, are productions involving the participation of wider social practices"⁶⁸ and in the case of discourses of the female body are the productions of several bodies of knowledge. This means that the psychology of menarche will be the result of a complex set of conditions and mutual effects between: psychological concerns and social policies on the one hand and the development of knowledge in other human sciences and psychological theories on the other hand. Importantly, this history demonstrates that the discourses of the female body and the psychology of menarche form part of a social technology and patriarchal regulation which has differential effects on girls and boys.

CONCLUSION

This particular history of menarche in itself could have been the object of my thesis and certainly deserves further research. But as it only forms a part of my thesis, I am limited in how far I can take this analysis and, therefore, I have focused on particular concerns and questions: First, *What* are our culture's conceptions of the female body and menstruation, and *how* do these concepts influence our understanding and practice of menstruation? Second, *how* has psychology come to ask the particular questions it asks about menarche and adolescent girls. Thus, in Chapter 5, I trace the changing conceptions of the female body, sexuality, and menstruation from 1600 to 1850. In Chapter 6, I identify the effects of changing conceptions of the female body/nature, the rise of feminism and the development of the modern human sciences on theories and practices of menstruation from 1850 to 1914. And in Chapter 7, I chart the emergence of psychological interest in menarche and adolescent girls

in the 1930s and its transformation from a biological event marking the beginning of sexual maturity and feminine desire to a psychic trauma in the 1940s, a hygiene crisis in 1970s and a developmental milestone signalling womanhood in the 1990s.

My focus on *how* psychology came to ask specific questions about menarche is not meant to imply that the question of *why* menarche emerged as a psychological concern in the twentieth century is of less importance or is completely avoided. It is just that a thorough analysis of the emergence of menarche as a psychological subject is outside the scope of this study; therefore, my discussion of why a psychology of menarche is both more limited and more speculative than my discussion of the particular psychological questions which emerged about menarche.

CHAPTER 5

CONSTRUCTING THE MENSTRUOUS WOMAN IN BRITISH CULTURE:

the female body, sexuality, and menstruation from 1600 to 1850

INTRODUCTION

I begin this brief history of the present psychology of menarche with a chapter on the female body, sexuality and menstruation in British culture starting with 17th century constructions of menstruation. By starting with menstruation in this period, we can see quite clearly how differently the female body, sexuality, and menstruation can be conceived and how transformations in the social world can dramatically change conceptions of the material body. In this chapter, I discuss how in the 17th century the female and male body were seen as one sex with menstruation being a necessary part in the economy of fluids so essential for health and an inciting factor in male temptation into sexuality and sin. It was with the changes and transformations of European and British culture in the 18th century that a foundation was laid for the 19th century view of the female body as somaticised, female sexuality as passive, and menstruation as unnatural with the male body becoming quite the different, stronger sex. This is a story of how women's desire to take part in the new civic order challenged patriarchal power. This challenge was met by the scientific 'discovery' of biologically fundamental sexual differences - the two sexes - and the power of the uterus over women's lives.

THE SEVENTEENTH CENTURY CONSTRUCTION OF MENSTRUATION

Our knowledge about the construction of the female body, sexuality and menstruation in 17th century British society comes primarily from the written texts of the medical profession, the church and its religious teachings, and popular writing.⁶⁹

Medical Discourse

The 17th century medical profession in Britain was dominated by male physicians attempting to obtain and maintain a restricted, monopolistic position. In part this was done through publishing their medical texts and case-books internally in Latin with only a few being written or translated into English. In these texts, the

medical accounts of the physiology and pathology of the female body and menstruation were based on ancient classical medical theories. The physicians case-books⁷⁰ gave some information on menstrual concerns and practices; however, this was limited because most women, especially if they were poor or lived in the country, consulted other women. It was only wealthy women who could choose to bring their menstrual complaints to physicians.⁷¹ Consequently, our present knowledge about the 17th century medical view of menstruation is constructed from primarily male sources who had limited knowledge of women's menstrual experience. There was resistance to the medical profession's attempt to monopolise medical practice and knowledge; and this may have contributed to an increase in the translation of medical works as well as the publication of more 'popular' handbooks.⁷²

In these various texts, the medical discourses surrounding the female body and menstruation were based on the ancient theories of Aristotle (4th century B.C.) and Galen (2nd century A.D.). In their thought and philosophy, the female body was neither different from nor a complement to the male body, rather it was more "in the nature of a duplicate, but in the form of a weakened version that depended on the male act both for health and for pleasure."⁷³ There was a valorisation of the male going back to the Greek culture so man became "the measure of all things, and woman does not exist as an ontologically distinct category".⁷⁴ This resulted in "the standard of the human body and its representations"⁷⁵ being the male body with the female body being a weaker duplicate. This view was so dominant that Galen "demonstrated at length that women were essentially men in whom a lack of vital heat-of-perfection had resulted in the retention, inside, of structures that in the male were visible outside."⁷⁶ Such was the power of this classical one-sex model of the body that for thousands of years it was commonplace that women had the same genitals as men: there were no words for ovary or vagina, and menstruation was not a distinctly female process. Rather the monthly

flow of blood was considered a sign of the inferior, but not the different, nature of the female body.

In Greek natural science, good health was maintained through the achievement of the correct balance of bodily humours and fluids. In this economy of fluids, milk and blood and sperm were connected. As specific mechanisms for reproduction had not been identified, the contribution of the male and female to conception remained a topic of debate in medical and philosophical literature. Within this economy of fluids, menstruation was not considered morbid or polluting. It was part of natural processes in which sweating, bleeding, seminal emission, purging, and elimination were all forms of evacuation that maintained the fluid economy at a proper level. It was only the absence of monthly bleeding that was considered pathological.

With this conception of the human body, it would not have been difficult to invert the Greek hierarchy and argue for the superiority of the female body which could both produce seed and give birth as well as produce milk. In addition with menstruation, the female had regular evacuations to rid the body of impurities thereby naturally maintaining the fluid economy at its proper level. However, Greek patriarchal culture asserted the ascendancy of the male: Aristotle stated that "while the body is from the female, it is the soul that is from the male" (GA 2.4.738b 20-23) and Hippocrates in The Seed, 1-3, maintained that "If women have intercourse with men their health is better than if they do not...intercourse by heating the blood and rendering it more fluid gives an easier passage to the menses⁷⁷; whereas, if the menses do not flow, women's bodies become prone to sickness". In Greek medical discourse not only was the female inferior to the male, but she was dependent upon his sexuality for her health.

Using these Greek theories, 17th century medical physiology and pathology had two main explanations for menstruation: it either purified the blood of females or it removed their excess blood. In the purifying theory, men sweated to remove bodily impurities as they

were more active and had a higher heat. But as women were less active and lacked the vital heat-of-perfection, they had a colder disposition and had to bleed regularly to remove impurities. This led to the menses being referred to as "purgations, because by this fluxe all a womans body is purged of superfluous humours".⁷⁸ In the excess theory, the superior male body used all the blood that was made. But as women had inferior bodies, they could not normally use all their blood so the excess was discharged through various bleeding including menses, nose bleeds, bleeding from the nipples, etc. During pregnancy and breast feeding, menses ceased because the extra blood was used to nourish the child in the womb or to make milk.

With these explanations menstruation was definitely associated with fertility and was considered necessary for conception: it was often "named 'the flowers' because fruit followed".⁷⁹ As reproductive processes were not well understood, there were different ideas about the relationship of menstruation and conception. These included the Aristotelian view that menstrual blood was the material from which the embryo was formed so that "the female seed is a kind of menstrual blood"⁸⁰ and the Galenic view that menstrual blood nourished the child in the womb.⁸¹ Co-existent with this association of menstruation with fertility was its association with sexual desire: "Menstra refined from the blood heats up a women's vulva through an "abundance of matter" and causes her greatly to desire coition".⁸² It would appear that for the 17th century man, the fertile menstruating woman was constituted as both subject to sexual desire and the object of sexual desire.

As 17th century medicine primarily considered menstruation as a natural part of the economy of fluids and the reproductive process, it was only problematic and therefore pathological in its absence or excess in a woman of reproductive age. The only menstrual disorders which merited medical discussion or intervention were immoderate menstruation or the cessation of menstruation in a woman of childbearing age. No special significance appears to have been

attached to menarche or menopause which were not even named: menarche was just referred to as "the start of the flowers" and menopause as "the cessation of the flowers". In terms of what we now label premenstrual tension or syndrome, "Physicians recognised pre-menstrual symptoms, as had the ancients, but did not regard them as a disease or disorder".⁸³ However, as women's bodies were viewed as inferior to men's and regular menstruation was considered necessary for a woman's health to preserve her "from the most terrible diseases",⁸⁴ the pre-condition was ever present for menstruation to become the site *par excellence* of all female pathology as the recurring presence of medical language naming menstruation as 'sickness', 'monthly disease', and 'monthly infirmity'⁸⁵ revealed. This ever present possibility was realised in one 18th century author's opinion on menstruation here called catamenia. Calling on the authority of older texts, Manning (1771) wrote: "It is one of the most established axioms in physic, that the greatest part of female diseases are the consequence of obstructed catamenia."⁸⁶

The Church and Religious Teaching

The Christian religion was a strong force in 17th century British society influencing and regulating people's lives through the church establishment and religious teaching. It was the practice for biblical commentators and preachers to interpret the Bible in part to make clear the social implications of texts to lay people. In relation to women, in the early part of the century these biblical texts were used by various commentators and preacher to constitute the female as inferior and subordinate to men, and through her menstruation, as polluted and polluting. As Crawford considered that "the major influence upon ideas about menstruation at the beginning of the seventeenth century was religious"⁸⁷ it may be that for male preachers and biblical commentators, the issue of menstruation was an important focus of comment and regulation. Certainly the Levitical

texts from this period, which were taken very seriously, defined the menstruating woman as polluted,

"And if a woman have an issue,
and her issue in her flesh be blood,
she shall be put apart seven days':
and whosoever toucheth her shall be unclean until the even."
(Leviticus 15.19 King James' Version),

and polluting,

"And if any man lie with her at all,
and her flowers be upon him,
he shall be unclean seven days;"
(Leviticus 15.24 King James' Version)

Throughout this period there were periodic attempts to exclude menstruating women from religious observances or areas of the church but these were not successful. The primary focus of religious menstrual discourse was the prohibition of sexual activity with the menstruating women: the biblical penalty from Leviticus 20.18 advocated death for this act.⁸⁸ This absence of extensive Christian menstrual taboos⁸⁹ or rituals in 17th century Britain is intriguing: both religious and anthropological literature give evidence to the possibilities of such taboos.⁹⁰ It may be that the absence of menstrual taboos, rituals, or ceremonies indicates women's relative public and institutional insignificance and powerlessness in 17th century Britain rather any possible progressive position.

Co-existent with these religious conceptualisations of female inferiority and subordination was Pauline Christianity's relationship to the body and sexuality. Beginning with St. Paul, immortality was not achieved through procreation but through salvation. At a time when it was believed that Christ was going to return at any instant in the Second Coming to bring eternal life in the hereafter, 'truth' and 'salvation' were seen to come from outside of the body. The Christian ethos was characterised by a self-renunciation and purity of mind and body whose ideal was to be sought in virginity, not

fertility. Sexuality was so strongly associated with sin that "sex was forbidden while a woman was pregnant, menstruating, or breastfeeding...sex was also forbidden during Lent and Advent, on Ember days, and also on Sundays, Wednesdays, and Fridays."⁹¹ For male clerics attempting to obtain immortality through chastity, the female body only too easily became the temptation to carnality. Rather than the menstrual process itself necessarily being the object of regulation, the goal was the regulation and subordination of female and male sexuality exercised through a menstrual prohibition.

In addition the imagery of blood as "the very treasure of life"⁹² may have contributed to the importance of regulating the menstruating woman. For in 17th century Britain, "blood itself was associated with many complex ideas about life and death"⁹³ and about the sacred and profane. We find powerful images of the male Christ's blood redeeming mankind and the martyr's blood healing the sick and wounded. So if men defined the sacred by the blood of the innocent and chaste, how were they to define the female blood of fertility and sexuality? It could not be sacred, so it defined the boundary of the profane and became polluting. We find that "the coverings of images which were defiled were to be cast away "as a menstruous cloth" (Isaiah XXX.22) and that it was "made one of the properties of a good man, not to lie with a menstruous woman" (Ezekiel XVIII.18).⁹⁴

I argue that the co-articulation of the medical discourse of menstruation and the religious discourse of the body resulted in the menstruating woman becoming a site *par excellence* of male temptation into sin. First the medical discourse constituted menstruation as: i) a purifying or excess-ridding process thereby constituting menstrual blood as unclean evacuations, and ii) a part of conception thereby constituting the menstruating women as subject to sexual desire. At the same time, religious discourse spoke of i) women as inferior and subordinate to men, ii) sexual abstinence as the ideal, and iii) woman as the great temptation. The menstruating woman thus became sexually desirous and desiring at the same time as being a

source of pollution and sin. She was constituted as the tempting and dangerous subject to be railed against by various churchmen and theological writers: "Gouge stated that sexual intercourse was immodest and polluted during menstruation, pointing out that it was expressly forbidden in Leviticus under pain of capital punishment"⁹⁵ and Bishop Babington who wrote against this unnatural offence endorsing the death penalty.⁹⁶ As the dangerous and sinful woman was signified by the heightened lust of menstruation, the respectable and virtuous woman was recognised by her chaste demeanour unstained by her polluting bleeding and her silence about her desirous sexuality.

To support the pollution discourse the fear of producing deformed children was brought into play using the text from II Esdras v.8 "and menstruous women bring forth monsters". This was a continuation of medieval theological thought⁹⁷ which was still espoused into the 19th century.⁹⁸ A verse translation of a 16th century text on the art of begetting beautiful children published early in the 18th century reveals this discourse of pollution with its concept of sexual desire for the menstruating woman and the penalties of copulation with her:

Press not your Wives, tho height'ed Lust incite
The Soul to try the pleasurable Fight,
While the Blood monthly rushing from the Veins,
The Flowing Womb with foul Pollution stains...
But if by Chance the Seeds concurring fix,
And with th'impurer Dross of Nature mix,
What a detested, miscreated Thing
From such ill-suited Principles must spring?
Foul Leprous Spots shall with his Birth begin,
Spread o'er his Body, and encrust his Skin;
For the same Poison which that Stream contains,
Transfer'd affects the forming Infant's Veins,
Inbred it fixes deep, and radically reigns.
For Nature's common Bosom nothing breeds,
That this malignant Female Filth exceeds:...
Ye Husbands then such foul Embraces fly,
And tho' provok'd the nauseous Bliss deny;⁹⁹

The venomousness and repetition of these prohibitions suggest anxiety: first, about the attractiveness of the menstruating woman, note how the "height'd Lust" was incited during the monthly bleed, and second, about the effectiveness of the menstrual sexual prohibition. The author found it necessary to entreat husbands to "deny" the "provok'd...Bliss".

Although it is impossible to know, there is evidence that 17th century British men and women did not always desist from copulation during menstruation. Pepys and Mrs. Marten were not deterred from sexual activity, "though she had ellos upon her"¹⁰⁰ and Robert Hooke slept with his servant Nell when she was menstruating.¹⁰¹ This suggests that menstruation was not universally viewed as an ~~distasteful or disgusting~~ ^{utterly off putting} event, although people would have been aware of the religious discourse of pollution.

Popular Writing

It is difficult to know if there were commonplace discourses surrounding menstruation in 17th century Britain. There were some male diarists who "noted their wives' menstruation" simply referring to "them" or "those" with few women diarists mentioning menstruation at all.¹⁰² As there does not appear to have been a reluctance about discussing the topic, at least by men, the silence of other male diarists may indicate a complete lack of interest in the matter as in other bodily functions.¹⁰³ The silence of female diarists is more problematic.

In plays of the period by men, the biblical images of pollution were used. In The Devil's Charter by Barnabe Barnes, the Devil denounces Pope Alexander by declaring:

"Thy soule foule beast is like a menstrous cloath,
Polluted with unpardonable sinnes."¹⁰⁴

Although there were a number of female playwrights in this period, there were no references in the material I read to their plays using menstrual images. Either their work has not been the focus of widely read scholarship, or they too are silent about women's menses.

In popular texts published throughout the period, like The Book of Secrets,¹⁰⁵ Three Books of Occult Philosophy,¹⁰⁶ and The Historie of the World,¹⁰⁷ there was a discourse of menstruation as mysterious and awesome. The female body's powerful capacity to bleed yet live and to bring forth new life was a source of wonder and awe. As menstrual blood was so closely associated with these awesome events, it was constituted as a mysterious product with powerful and even dangerous effects. Various texts maintained that menstrual blood could be used in love potions, to help or hinder conception, to cure afflictions, and avert disasters. In Pliny a menstruating woman turned wine sour, withered grass, blasted buds, discoloured looking glasses, blunted knives, and killed bees for "hardly can there be found a thing more monstrous than is that flux and course of theirs" which "doe hurt the passage by which they goe".¹⁰⁸ Although many people were still held magical views, there was resistance to these 'superstitions'. Jane Sharp was sceptical about Pliny's protestations¹⁰⁹ and Alexander Ross¹¹⁰ denied that blood had the power to provoke love. In general there was a decline in magical beliefs during the 17th century as reflected in James Drake's¹¹¹ rejection of Pliny's ideas as superstitious.

The information available on women's views of menstruation is limited to physicians' case-books, women's medical commonplace books,¹¹² and a few women's diaries. These suggest that women regarded the absence of menstruation and excessive menstruation as symptoms requiring treatment. There were cures for greensickness,¹¹³ mother-fits,¹¹⁴ and "the overflowing of the terms".¹¹⁵ It appears that women used the dominant medical explanations for menstrual processes and ailments. The one woman writer, Jane Sharp, accepted that women's bodies were faulty because they were not able to digest all the blood they made.¹¹⁶

However, it appears that women "did not necessarily share the views of their medical advisers"¹¹⁷ on treatments. They tended to prefer their own remedies, discussing their own cures and ills among

themselves often across social barriers. A remedy for excessive menstruation came with the following comment: "An honest woman revealed this when she had proved it to be true; and she learned it of a poor woman [who] required Alms at her door".¹¹⁸ A remedy for greensickness was "the old Countesse of Arundels prime powder".¹¹⁹ There was no indication of treatments for painful menstruation, pre-menstrual symptoms, or the menopause.

Not only did women resist physicians' medical advice, they were reluctant to reveal their menstrual cycle or distress to men. Crawford argues that "men believed women wanted to be private about their bodies and bodily functions generally".¹²⁰ A 16th century anatomist omitted discussion of female anatomy for fear of being considered indecent.¹²¹ This continued into the 19th century when gynaecological works for women were printed with the illustrations separate from the text.¹²² A Dr. Pierce in the late 17th century noted that he had to consult the mother of a nineteen year old patient who refused to discuss her symptoms with him.¹²³ Indeed, 17th century physicians believed that women were "so shamefac'd and modest" that they would rather suffer symptoms of menstrual disorders than reveal them.¹²⁴ Rather than question women's silence, this discourse of feminine shame and modesty supported the dominant discourse of female inferiority and sub-ordination.

There is evidence that women also had material reasons for their silence. There was an attack on fraudulent physicians in 1670 which spoke of "Groaping Doctors" who pretended they could not discover the causes of disorders without feeling a woman.¹²⁵ Even husbands and fathers would medicate their wives and daughters. One gentleman testified that he had brought his wife and daughter "into good Order" with his cure.¹²⁶ While an 18th century Virginian planter treated his daughter for her menstrual distress which she had tried to keep secret from him but he "at last" found out despite "her obstinacy and secrecy".¹²⁷ Not only could menstruation make a woman subject to social probation and regulation, but she was at risk of

actual physical interference. In the face of discourses which constituted menstruation as the site of sexual desire, female inferiority, pollution and dangerous powers and at risk from male interference, one recourse for menstruating women was silence; either the silent relief of efficient bodily workings or the silent fear of bodily disorders. This may in part explain the problematic paucity of menstrual comment in women's writing of the time.

TRANSITION AND TRANSFORMATION: THE EIGHTEENTH CENTURY

Although the Aristotelian model of the one-sex body was dominate in the 17th century, there were dissenting voices who disputed that "Nature had intended all creation to be male."¹²⁸ A number of male authors contended that women were created different from men; however, women were still constituted as inferior especially in rational processes. These authors described woman as "a House builded for generation and gestation" who was designed for "an easie Life", to stay at home "and looke after Household employments".¹²⁹ Here women were positioned within the "house" so that man could go about his work "in those places where male activity ought to be exercised in a privileged way".¹³⁰ The fact of women's menstruation was used to support this discourse of the inferior female as "the Weaker Vessel" incapable of any activity other than domestic. The vapours from her "Natural disease" rose to her head, suffocated her spirits with too much moisture, "offend the Chamber of Reason, and infect the Parlour of the Passions, the braine and Hart".¹³¹

Although these 17th century authors had begun to dispute the ancient one-sex model of the body: it was not until the 18th century that the two-sex model became dominant. Laqueur claims that "by around 1800, writers of all sorts were determined to base what they insisted were fundamental differences between the male and female sexes, and thus between man and woman, on discoverable biological

distinctions and to express these in a radically different rhetoric".¹³² Although I am only attempting a brief history of menstruation, I want to consider some of the conditions which made possible this transformation of the female body from the 'same as male, if inferior' to the 'different from male, and inferior'. In such a consideration we can see the way in which emerging forms of masculinity and femininity shaped by patriarchal power gave specific social meanings to the body.

Western Europe including Britain was transformed in the 18th century by the Enlightenment, and the co-existent political changes. This philosophical movement stressed the importance of reason and critical re-appraisal of existing ideas and social institutions. This critique challenged the accepted wisdom of the ancient texts and religious teachings, including the one-sex model of gender and the inferior nature and status of women. Laqueur suggests that developments in epistemology and the political sphere were particularly influential in "two sexes...[being] invented as a new foundation for gender."¹³³

The developments in epistemology brought a sharper divide between the possible and impossible, the body and spirit, truth and falsehood, and between female and male. This was mirrored in the development of linguistic distinctions between male and female organs so that by the end of the 18th century scientists could literally 'see' the differences between the female and male reproductive system. The structures that were once common to men and women became differentiated to correspond to the cultural male and female. Concurrently, the scientific revolution, particularly reductionist explanations of phenomena, opened the way for discoveries through experimentation and observation. The nature of things were no longer to be explained by ancient philosophy or religion, but by their physical and/or biological materiality. Thus the cultural differences between female and male could be presented as residing "fundamentally in the body".¹³⁴

Co-existent with the changes in epistemology were the changes in politics. There was an enormously enlarged public sphere, particularly in the post-revolutionary period, with new struggles for power and position between and among men and women, and between and among feminists and anti-feminists. The universalistic claims for human liberty and equality made during the Enlightenment "did not inherently exclude the female half of humanity".¹³⁵ The old boundaries of gender were threatened.

This was exemplified by the French Revolution in which sex became a major battleground. The Marquis de Condorcet argued that it was ridiculous to exclude women from the political franchise because of biology. In 1789 women of the Third Estate petitioned the king for "their sex the right of working without (reglementary) hindrance...Thus before the new world about to open, the first cry of the women was, not to repudiate but to invoke labor...."¹³⁶ In 1791, Olympe de Gouges wrote the "Declaration of the Rights of Women and Citizen".¹³⁷ A genuine feminism arose as the Third Republic and the American Revolution opened the political possibilities for women. Susanne Barrow¹³⁸ showed how the fear of these possibilities engendered an extra-ordinarily elaborated physical anthropology of sexual difference to justify resistance to change. Those opposed to increased civil, public, and private power for women generated evidence for women's physical and mental unsuitability for such advances: this opposition included the vast majority of articulate men. The 'discovery' of biologically fundamental sexual differences provided the material for the erection of new gender boundaries; gender boundaries in which the "one ought to be active and strong, the other passive and weak".¹³⁹

The results of this new 'evidence' were reflected in two late 18th century constructions of menstruation. In one, menstruation became a contingent pathology of civilisation. Roussel, an 18th century moral anthropologist, proposed that "menstruation is not a natural function of the female reproductive system but a product of

modern luxury. Thus what we might take to be a specific reproductive function is expressly somaticized".¹⁴⁰ In the other, menstruation came to demonstrate the power of the uterus over women's lives, and therefore was a natural foundation for gender difference. Gone was any concept of menstruation as a natural process in the balancing of the economy of fluids in the one-sex world. Although different, these two 18th century constructions assumed the fundamental difference of the female body in opposition to the male body - a two-sex world. This fundamental shift in the construction of the female/male body was a pre-condition for the 19th century discourses of the female body and menstruation.

THE EARLY NINETEENTH CENTURY

In the early 19th century, male scientific writers were presenting two contrasting discourses of menstruation. There was a continuation of the "plethoric theory of menstruation"¹⁴¹ in which an "excess of blood" was evacuated "every four weeks" after which there was "complete health and regularity of all forces."¹⁴² Allan Thompson¹⁴³ was quoted as regarding menstruation "as the means for relieving the female system from an overplus of blood, which exists during the whole time that it is capable of propagation."¹⁴⁴ While Wagner in 1853 contended that "the evacuation of the menstrual blood is nothing else than the elimination, under a special form, of superfluous productive material."¹⁴⁵

In contrast, there was the discourse of menstruation as cultural disease. Roussel (1805), Systeme Moral et Physique de la Femme, declared "menstruation to be a salutary crisis intended to relieve a pathological condition induced by the excesses at table common in advanced civilizations".¹⁴⁶ Hageivisch argued that menstruation was a hereditary disease developed by civilisation while Moscati attributed it to the upright posture of the human female.¹⁴⁷ This construction of menstruation "as a pathological process grafted

upon the female economy by a progressively deteriorating civilization"¹⁴⁸ marked a break in the discourses of the female body. Not only did female bleeding become explicitly 'pathological', but it was constituted as an unnatural process brought about by culture. This remarkable view of menses as caused by civilisation, as unnatural, did not appear to have taken root, although it did re-appear periodically throughout the 19th century to support various positions. However, the constituting of menstruation as pathological became more dominant and firmly rooted as the century progressed.

In Tilt's 1851 publication, On Diseases of Menstruation, he declared menstruation to be "a natural function peculiar to women...who are subject to this natural infirmity for about seven out of the thirty years of reproductive life."¹⁴⁹ Dr. Mary Putnam Jacobi writing in 1878 considered that it was the establishment of the fact of ovulation around 1845 that led to the view of menstruation as infirmity: "for the first time the periodicity of menstruation began to be considered as a morbid circumstance."¹⁵⁰ Male scientists evidently considered ovulation to be a dramatic and "remarkable local phenomena".¹⁵¹ The following description of ovulation illustrated the male imagination of the female reproductive process as enthralled of the evolutionary dance of nature 'red in tooth and claw'.

"the congestion of the ovary, ripening of the ovule, effusion of the serum and blood into the Graafian follicle; its rupture; the escape of the reproductive cell; its seizure by the fimbriae of the Fallopian tube; its journey along the oviduct and descent into the uterus; the hyperannia of the latter, the turgescence of its mucous membrane, the rupture of its blood vessels, and local hemorrhage."¹⁵²

Jacobi argued that menstruation came to be exclusively associated with this view of ovulation. And as this ovular theory of menstruation-as-pathology was developed, the general nutritive (and plethoric) theory was "lost sight of".¹⁵³

Although discovered 'facts' may contribute to new formulations, they are never sufficient in themselves for the development of any particular theory: "Formally speaking, an endless number of theories can be constructed to be consistent with a particular body of data."¹⁵⁴ So although knowledge of ovulation may have contributed to pathology models of menstruation, it was not sufficient cause for such models; rather the development of pathology theories of menstruation based on the incommensurate female and male was part of a historical creation of difference in the "institutional and cultural geography of the new public sphere."¹⁵⁵ The prevailing forms of selfhood, femininity and masculinity became stamped on the material body.

The early part of the 19th century was a time of dramatic changes. Thomson described 1815 - 1850 as "The Age of Revolutions" in which there was a "general tendency to extend the ideals of liberty, equality, and, above all, fraternity to social and economic life no less than politics".¹⁵⁶ Laqueur argued that 19th century social contract theory "at its most abstract postulates a body that, if not sexless, is nevertheless undifferentiated in its desires, interests, or capacity to reason."¹⁵⁷ Therefore, the problem was how to legitimate as 'natural' the real world domination of women by men, especially when male privilege was directly challenged as just the title of one book graphically illustrated:

An Appeal of One-Half the Human Race, Women, Against the Pretensions of the Other Half, Men, To Retain Them in Political and Thence in Civil and Domestic Slavery.

Anna Wheeler and William Thompson (1825) London.

Indeed Thomson considered that "in the first half of the century, democracy was treated as a more revolutionary and frightening doctrine than liberalism which made liberals...ready to join with conservatives to crush popular movements...that favoured democratic ideals."¹⁵⁸ In this circumstance, a medical and scientific discourse

dominated by privileged men would support the exclusion of women from the new civil society for reasons based in 'nature'.

IN CONCLUSION

This analysis of the construction of the menstruous woman in British culture from 1600 to 1850 made visible for me the otherwise "hidden"¹⁵⁹ social and political processes in the present production of scientific and academic discourses of the female body, sexuality and menstruation. Before undertaking this study, I had just assumed the female and male body were basically and biologically different with menstruation a specific and unique female physiological function. This had always been and would always be 'the truth' of the body. The only questions possible concerned the extent and effect of sexual difference. It did not appear possible to me to have a completely different picture of the body and menstruation, one in which female and male are basically one sex and menstruation is necessary for women's health and sexually inciting.

As we have seen in the 17th and 18th century there were quite different discourses of the female body, sexuality and menstruation. And I have argued that these conceptions have not changed because of the steady progress of scientific knowledge so that we now have an ever more 'objective' truth about the human body unmediated by culture. The 19th century transformation of women's nature and menstruation were part of a wider transformation of gender and power relations in the society. Women's demands for entry to the new civic society became more persistent, organised and widespread reaching into the very scientific and educational institutions that were elaborating the nature of women's difference and place. There was an intensification of the debates about reproduction, sexuality and women's nature, body and role linked with the growth of the human

sciences. It is how these growing debates on "The Woman Question" were mutually implicated with social concerns about and scientific interests in the female reproductive functions, process and organs that I want to go on to discuss in Chapter 6.

CHAPTER 6

THE WOMAN QUESTION:

science, the female body and menstruation from 1850 to 1914

Few maintain that the sexes are essentially equal, still fewer that the female excel; the general bias of authority has been in favour of the males. From the earliest ages philosophers have contended that woman is but an undeveloped man; Darwin's theory of sexual selection presupposes a superiority and an entail in the male line; for Spencer, the development of women is early arrested by procreative functions. In short, Darwin's man is as it were an evolved woman, and Spencer's women an arrested Man.

Patrick Geddes and J. Arthur Thomson, 1889
The Evolution of Sex, p. 37.

INTRODUCTION

In the later 19th and early 20th century the cultural and scientific division between man and woman had become so "fully differentiated"¹⁶⁰ that woman was spoken of as "other than man",¹⁶¹ menstruation was theorised as "nervous pathological phenomena"¹⁶² and the onset of menstruation as a "very critical period".¹⁶³ The Victorian discursive creation of female and male as socially, morally and biologically even physiologically incommensurate and hence destined by nature and God for different roles in life emerged as always from the intertwined forces of economic, social and scientific developments.

In brief the economic and social developments of the second half of the 19th century were such that women became effectively excluded from the economy and civic society.¹⁶⁴ There had been a weakening of the economic base in conjunction with increased industrialisation so that women with limited or no financial support were finding it increasingly difficult to support themselves without access to education, careers, and jobs. In the competitive labour market men had an obvious interest in keeping women out of jobs, especially skilled, highly paid jobs. And women's 'peculiar' bodily functions, reproduction and menstruation, were an apparent reason to bar women from professions and education by virtue of 'nature'. Women became increasingly dependent on male spouses or relatives, so that in "this sense patriarchy was strengthened".¹⁶⁵ They could not

independently own their own property. If they left abusive or alcoholic husbands they were not entitled to access to their children. The double standard resulted in a male rhetoric which praised women as angels and moral guardians while venereal disease was rife and child prostitution was common.¹⁶⁶ As this situation developed, "some women came to regard it as intolerable"¹⁶⁷ and there was a "growing impetus for female emancipation"¹⁶⁸ which the vast majority of men resolutely resisted.

The attempt to exclude women from the public space can clearly be seen in the debates and writings in the later part of the century. As women continued to seek "equality in voting rights, in wages, in education, in access to careers...",¹⁶⁹ male scientists continued to attempt to exclude them and an "immense body of writing came into being in response to (the) persistent social stirrings that most men viewed as threats to their prerogatives."¹⁷⁰ This was particularly evident in the medical profession as women began to press for entrance to the prestigious medical universities and colleges in both America and Britain.¹⁷¹ Women's active campaigns produced a wave of virulent anti-feminist writing¹⁷² based on the frailties of the female body particularly women's reproductive organs and menstrual functions. For example: Dr. Horatio Storer¹⁷³, an American gynaecologist and president of the Gynaecological Society of Boston, writing in 1868 used menstruation as the reason for women being unfit for professional life, especially as physicians:

granting that women in exceptional cases may have all the courage, tact, ability, pecuniary means, education, and patience necessary to fit persons for the cares and responsibilities of professional life, they still are and must be subject to the periodical infirmity of their sex; which for the time and in every case, however unattended by physical suffering, unfits them for any responsible effort of mind, and in many cases of body also.¹⁷⁴

And Dr. Tilt, when supporting the ban of women from the Obstetrical Society of London in 1874, stated:

women were not qualified by nature to make good midwifery practitioners; that they were unfit to bear the physical fatigues and mental anxieties of obstetrical practice, at menstrual periods, during pregnancy and puerperality; and that it was unfair to society to encourage women to suppose they could fit themselves to assume responsibilities in those formidable obstetric emergencies which too often completely paralyze even men of experience.¹⁷⁵

In conjunction with concerns over the economy and debates about 'The Woman Question', there was growing anxiety about the "future of the 'human stock' " in a Britain with a declining birth rate politically motivated to develop its empire and build "an imperial race."¹⁷⁶ These political concerns arose at the same time as scientific developments in evolutionary biology particularly the Darwinian concept of the 'survival of the fittest' were being propagated and debated. It was not a coincident that an increase in the fertility and domesticity of middle and upper class women¹⁷⁷ as well as a more general programme of eugenics was offered as a solution to the problems of the declining birth rate, "the poor, and 'degenerate'"¹⁷⁸ by a considerable number of professionals including those in medicine, science, and psychology. It appeared that for men women were to be defined by their reproductive cycle and functions which seemed to carry the weighty burden of the future of the British (white, Northern European) race and Empire.

In the human sciences this political and emotional anxiety about women's reproductive and social role was reflected in the growing body of research on women's sexuality, menstrual cycle, and psyche. Menstruation and puberty became objects of scientific enquiry, and as child and adolescent psychology emerged in the early 1900's, the onset of menstruation became inscribed as a significant and critical event in the life and psyche of the adolescent girl. Menstruation and its effects were to become, and continue to be, one of the most 'interesting' and debated of topics in the biopsychic field with the majority of male and anti-feminist scientists

constructing and re-constructing 'the always menstruating enervated woman' while women and feminist scientists disputed and disavowed what they called the 'pseudo-science' and 'dogma' of the menstrual cycle as pathology.

In tracing the developments and debates about the theories and practices of menstruation in the human sciences from 1850 to 1914, I am not arguing that these political, social or economic factors directly caused in any simple sense the specific developments in the science and psychology of the female menstrual cycle, but that rather that each should be taken as mutually implicated, making and remaking the other possible.

THE LATE NINETEENTH CENTURY: DISCOURSES AND DEBATES ON MENSTRUATION

I begin this chapter with the public debates in America and Britain about the effects of menstruation on women's minds and bodies around the time of the publication of Dr. Edward Clarke's influential book, Sex in Education,¹⁷⁹ in America in 1873 and Henry Maudsley's article, "Sex in Mind and Education",¹⁸⁰ in the widely read Fortnightly Review in Britain in 1874.

Dr. Edward Clarke, who had been professor of *materia medica* at the Harvard Medical School and a member of Harvard's Board of Overseers, "became a national spokesman for the anti-feminists in America"¹⁸¹ with the publication of his Sex in Education. Here he claimed that higher education was destroying the reproductive functions of American women by overworking them at a critical time in their physiological development. His arguments were taken up by Henry Maudsley in the Fortnightly Review to attack the educational and professional aspirations of British women. Maudsley used menstruation as evidence that:

women are marked out by nature for very different offices in life from those of men, and that the healthy performance of her special functions renders it improbable she will succeed, and unwise for her to persevere, in running over the same course at the same pace with him [because] for one

quarter of each month during the best years of life...[women are] more or less sick and unfit for hard work.¹⁸²

Such anti-feminist views about women's reproduction and menstrual functions as being particularly vulnerable to disturbance and debilitating even to the point of derangement were supported by scientific proof such as that by Hutchins. In a prize essay accepted by New York State Medical Association in 1875, he claimed:

an experiment of Rabuteau, as a proof that during menstruation the general nutrition of the body is diminished [and] the nervous force is therefore weakened in each organ, - and the period of resistance of each organ is weakened, - it is more sensitive, more liable to derangement.¹⁸³

In order to see how these Victorian scientists could rationalise their theories and practices of the female reproductive and menstrual cycle as 'special' and pathological even in the face of everyday experience,¹⁸⁴ we need to understand their underlying medical and biological assumptions about the female body and menstruation.

The human body was considered to possess a finite amount of vital energy within a closed system so that "anything that diverted women's energy from the reproductive function, such as education or work outside the home must be avoided." In addition, the female body was believed to be "fundamentally inferior to men, and...their nervous systems were more irritable."¹⁸⁵ So that if an 18 year old girl was studying particularly long hours in a strenuous subject, she would be diverting vital energy from her normal physiological functions such as menstruation to her brain. This 'mental' work with its nervous stimulation could deplete her reproductive organs and ultimately impair her ability to bear sturdy children.

In relation to theories of menstruation, the earlier 19th century plethoric theory of menstruation was giving way to an ovular theory of menstruation as scientific knowledge increased about the endocrine functions and the ovary. This ovular theory tended to construct menstruation as an extraordinary exception among physiological phenomena:¹⁸⁶ it was considered so draining on the

female constitution as to be on the 'borders of pathology'. The menstrual period became "the destructive stage" of the menstrual cycle¹⁸⁷ associated with the depletion of the body's vital energy leading to all manner of nervous and physical diseases.

By the later part of the nineteenth century, this discourse on the frailty and inferiority of the female body became so pervasive and powerful that the female sex itself seemed pathological - "the sex itself seems to be regarded as a pathological fact, constantly detracting from the sum total of health, and of healthful activities"¹⁸⁸ - with menstruation becoming the site *par excellence* for proof of women's different and debilitating nature. "It is menstruation that is generally considered the peculiarity of the sex, which most seriously cripples the individual energies of woman, since it alone exerts its influence upon all, and at all times during adult life."¹⁸⁹ For example, a Dr. Guerin (movement medical quoted by Munde Journal Obstetric, August, 1875) wrote: "There is no physiological condition so nearly resembling disease as that which produces every month in an adult woman a change so profound that it has been looked upon as the expression of a morbid condition."¹⁹⁰

Under the guise of the wonderfulness of the female body created for procreation, there was a discursive positioning of women in the domestic sphere. In his argument for separate and limited educational opportunities for women, Dr. Clarke extolled "Woman, in the interest of the race has been endowed with a set of organs peculiar to herself, whose complexity, delicacy, sympathies and force, are among the marvels of creation".¹⁹¹ The middle-class Victorian woman was expected to find fulfilment in "the smaller matters of everyday life...the arrangement of flowers, the furnishing of rooms...",¹⁹² raising children, and creating a home which "is safe whatever else may suffer".¹⁹³ While a Dr. King went further in using the morbid state of menstruation to recommend that women become and stay pregnant for the entire of their reproductive lives:

girls [should] be encouraged to marry immediately upon arriving at the age of puberty, so that menstruation may be at once interrupted by a pregnancy which should be repeated so frequently as to entirely exclude its pathological substitute from the existence of the woman.¹⁹⁴

Maudsley used the fear of producing inferior children to place women in their 'proper' sphere:

It will have to be considered whether women can scorn delights and live laborious days of intellectual exercise and production, without injury to their functions as the conceiver, mothers, and nurses of children. For it would be an ill thing, if it should so happen that we got the advantage of a quantity of female intellectual work at the price of a puny, enfeebled, and sickly race.¹⁹⁵

This discursive creation of difference sought to create "an ideologically sanctioned order of gender differences and public-private spheres"¹⁹⁶ in which the male was free to operate in the public sphere while the female was grounded in a private and domestic life.

Even though rational and experimental science was being used to develop these nineteenth century discourses of menstruation, there were still traces in the nineteenth century texts of pre-enlightenment constructions of menstruation as the source of pollution and danger. For example John Elliotson, an early nineteenth century authority, argued that "to regard women during menstruation as unclean is certainly very useful...." and "in this country, it is firmly believed by many that meat will not take salt if the process is conducted by a menstruating woman."¹⁹⁷ A book by Charles Knowlton, Fruits of Philosophy (1832) "credits many sexual superstitions."¹⁹⁸ It ran to many editions and sold tens of thousands of copies. It was re-issued in the 1870's by Charles Bradlaugh and Annie Besant with footnotes by George Drysdale to update the physiology, but it was not substantially changed.

The links between sexual desire and menstruation, and fertility and menstruation, were still present.¹⁹⁹ John Power (1831) postulated

that ovulation and menstruation were connected.²⁰⁰ George Drysdale²⁰¹ appeared to have used Dr. Adam Raciborski's ideas on the relationship between menses and heat²⁰² to constitute menstruation as a time of increased sexual desire in women.

His Elements of Social Science, first published in 1854, had many editions and sold tens of thousands of copies; the edition from which we quote was the twenty-fifth, published in 1886. Drysdale explained: 'Menstruation in woman corresponds exactly with the period of heat in female animals, and differs only in the unessential particular, that in woman there is an external sanguineous discharge' (p.66).²⁰³

Dr. Jacobi stated in 1878: "The idea that menstruation was the expression of sexual excitement...is still maintained by such writers as Beigel."²⁰⁴ This idea of menstruation as heat constituted the menstruating woman as subject to sexual desire, but of a more limited nature than in pre-enlightenment discourses. In heat she would have been receptive to the advances of a male partner, but only in a passive way and only at that time of the month. This would have been consistent with the emergent discourse of the 'double standard' for sexual behaviour²⁰⁵ in which male sexuality was constructed as active and phallic in contrast to passive and vaginal female sexuality.

These links between menstruation and heat and conception could be very problematic for those Victorians who "believed that in Paradise humans had reproduced asexually and it was only when man had fallen that perfection had been replaced by the evil of sex."²⁰⁶ One attempt to deal with the contradiction of menstruation-as-pathology and menstruation-as-heat resulted in the re-appearance of menstruation as unnatural. An article in the American Journal of Obstetrics in 1875 argued for the unnaturalness of menstruation:

conception was most likely when intercourse occurred during the monthly flow, but intercourse at such times was dangerous and forbidden because the menstrual blood was the source of male gonorrhoea. Since menstruation therefore stood in the way of fruitful coitus it obviously had not been ordained by nature."²⁰⁷

In this account, not only was menstruation unnatural but menstrual blood was so dangerous that it was the source of male gonorrhoea. This was yet another trace of pre-enlightenment constructions of menstruation - in this case of menstrual blood as both powerful and profane.

As in previous centuries, it is difficult to learn about 19th century women's own menstrual discourses and practices. The Showalters claimed that Victorians "maintain an almost complete silence on the subject" with "menstruation [having] no literary reflection, true or false".²⁰⁸ However, in contrast to previous centuries, women were no longer absent from the public sphere and they "persistently resisted attempts to silence them."²⁰⁹ The anti-feminist arguments of Dr. Clarke's, Sex in Education, and Dr. Maudsley's, "Sex in Mind and Education", were a particular impetus to professional and educated women to speak out against the discourse of female inferiority due to the pathology of menstruation. A British woman physician, Dr. Elisabeth Garret Anderson considered it necessary to rebut Maudsley's attack: "it would be out of place for those who approve the changes against which Dr. Maudsley's argument is directed to be silent...."²¹⁰ And Dr. Mary Putnam Jacobi, an American physician and scientist, undertook a study, The Question of Rest for Women During Menstruation, in response to Dr. Clarke's "proposition".²¹¹

Dr. Anderson was reluctant to publicly discuss women's "physiological peculiarities" which she referred to menstruation as "them", "physiological process", "facts of their [women's] organisation", "these times" or "function" in her article. She never explicitly named menstruation, rather she took the moral high ground in relation to male anti-feminists by holding to the morality of modesty and propriety. In this way she supported the feminist position that female physicians, and other female professionals, were required to deal with women and girls on moral and social grounds including protecting female modesty and chastity. She went on to

suggest that "there is grave reason for doubting whether such a subject can be fully and with propriety discussed except in a professional journal"; however, forced to speak out she decided "to speak as plainly and directly" as Maudsley.²¹²

In her spirited defence of women's educational and professional opportunities, she argued that menstruation was only a normal physiological process like any other. It was best ignored when functioning smoothly and it did not interfere with women's lives:

the antecedent improbability of any organ or set of organs requiring exceptional attention: the rule certainly being that, when people are well, their physiological processes go on more smoothly without attention than with it....in adult life healthy women do as a rule disregard them almost completely....Among poor women, where all the available strength is spent upon manual labour, the daily work goes on without intermission, and, as a rule, without ill effects.²¹³

In developing her argument, she claimed that menstruation was even beneficial to women's nervous and mental power, and that it was only pathological in its absence:

that which Dr. Maudsley speaks of as an occasion of weakness...is either not felt to be such or is even recognised as an aid, the nervous and mental power being in many cases greater at those times than at any other....its absence usually gives rise to a condition of nervous weakness unknown while the regularity of the function was maintained.²¹⁴

She supported her argument with the nutritive-plethoric theory of menses. Within this discourse, both men and women had demands made upon their nutritive processes, but women had an abundance of nutritive material ready "for the demand made in childbearing". Therefore menstruation was a process to rid the body of the surplus, "and getting rid of it involves, when the process is normal, no loss of vigour to the woman."²¹⁵

The late 19th century medical anxiety about "any sexual act" being "dangerous and debilitating"²¹⁶ contributed to the arguments²¹⁷ about the possible debilitating effects of higher education on young women's, and men's, reproductive and mental potential. These concerns appear to have contributed to the focus on puberty in general; and on adolescent female menstrual processes and on adolescent male seminal emissions in particular. Dr. Anderson did believe that adolescent growth and new functions²¹⁸ were more taxing on the nutritive powers than subsequent processes were on the mature body; however, she considered this to be true for young males as well. In developing her argument for the education of girls, she suggested:

fathers especially are apt to be thoughtless in expecting their girls to be equally ready at all times to ride or take long walks...we venture to think that far more harm is done to young women in ways of this kind while they are at home, than when they are protected by the quiet routine of school life.²¹⁹

Although she did go on to list the risks of "riding, long standing, lifting heavy weights,--e.g. young brothers and sisters--dancing, and rapid or fatiguing walks" for "delicate girls", she considered that as a rule girls were able "to go on with an ordinary amount of quiet exercise or mental work during these periods".²²⁰

This female view of menstruation as a natural process is indirectly supported by two sources. Marion Harland's manual, Eve's Daughters, published in New York in 1882 recommended a common-sense approach to adolescent menstrual discomforts. For abdominal cramps, girls were recommended to have hot tea and hot water bottles with gin and water as a last resort. For backaches a porous plaster was recommended. Any of these measures should have been only be necessary for two days, and the use of opium, laudanum, or paregoric were strictly forbidden (chapter XII). The first president of the American women's college of Bryn Mawr at Harvard, Martha Carey Thomas recalled in 1908 being haunted by the:

clanging chains of that gloomy little spectre, Dr. Edward H. Clarke's Sex in Education. Thomas' mother remarked 'As neither she nor any of the women she knew, had ever seen girls or women of the kind described in Dr. Clarke's book, we might as well act as if they did not exist.'²²¹

In America the "opposition hammered away at each of Clarke's points."²²² Then in 1874 the Harvard Medical School announced that the topic for one of its annual Boylston Medical Prize competitions was: "Do women require mental and bodily rest during menstruation and to what extent?" As applicants names were not revealed to the judging committee, it was possible for a woman to be judged fairly in the competition. Dr. Mary Putnam Jacobi was encouraged by Cambridge friends to apply for this competition "to test Clarke's thesis."²²³ She described her study as an exacting "inquiry into the limits of human nature" in which she used all the power of established science and statistics to test whether "women require mental and bodily rest during menstruation".²²⁴

In her work she developed a "nutritive" discourse of menstruation to contest the "famous" and scientifically popular ovulation theory which she claimed "construes the menstrual hemorrhage as a subsidiary phenomenon, entirely dependent on the periodic dehiscence of ovules."²²⁵

She argued that the ovulation theory proposed:

i) Puberty was "principally characterized by the sudden development of the ovaries."²²⁶ This sudden process was considered a great drain on the female adolescent constitution and was used to resist female education, by Clarke among others.

ii) "Menstruation is the rutting season for women, the rut is the menstruation of lower animals."²²⁷ Therefore, women's sexual excitation and reproductive capacity were intimately linked and biologically controlled. Not only did this make women subject to an uncontrolled instinctual sexuality, but it constituted woman as more closely linked to the animal kingdom, lower on the Darwinian evolutionary chain than man by virtue of her biology.

iii) Women's "uterus, ovaries, and broad ligaments, are species of erectile tissues" whose "periodic turgescence constitute an erection which should be expected to render the menstrual period an epoch of prolonged sexual excitement."²²⁸ This surprising construing of menstruation as erection was based on the distension of the reproductive tissues with blood. Jacobi considered that "it often happens in regard to this point, that the theory invents facts, where the facts themselves would never have suggested the theory."²²⁹ This would have of course reinforced the discourse of menstruation as rut as well as made women liable to powerful sexual urges. In a moralistic society still strongly influenced by Pauline Christianity we again see the female body becoming the temptation to carnality and pollution. We also see women's sexuality as situated entirely internally - it was vaginal sexuality.

iv) "The periodicity of the menstrual flow constitutes...an extraordinary exception among physiological phenomena."²³⁰ In constituting menstruation as an extraordinary exception, women's incommensurate difference became firmly based in the material body and menstruation became the site of female pathology and inferiority barring her from full citizenship or equality.

In contrast to this ovulation theory, Jacobi put forward a "scarcely yet defined" theory in which menstruation was subsidiary in "the uterus preparatory for a pregnancy".²³¹ She used the full weight of current scientific thought by presenting the notions "acquired in the last few years by Waldeyer, Slaviansky, Grohe, Kundrat, Williams"²³² to construct her "nutritive" theory, which she further supported by her research and medical experience. This "nutritive" theory proposed the following:

i) Puberty was a gradual process with "the ovaries during the three or four years preceding menstruation"²³³ very gradually increasing in size with no substantive development in the uterus or ovaries. This constituted puberty as a gradual process which did not tax the resources of the female adolescent constitution any more than

puberty taxed the male adolescent constitution. Therefore, female education could be commensurate with male education.

ii) Menstruation was part of the reproductive process which "is essentially a process of nutrition." There was to be no confounding of "the two aspects of the reproductive apparatus in women which ought to be kept entirely distinct, namely, the reproductive and the sexual."²³⁴ "There is no longer any necessary association between sexual impulse, menstruation, and the dehiscence of ova."²³⁵ Jacobi firmly separated women's sexual desires and reproductive capacity, liberating women's sexuality from reproductive imperatives. As women were not constituted as subject to an uncontrolled instinctual sexuality, the nature of female sexuality was open to re-constitution as was its relationship to male sexuality. Neither was woman more closely linked to the animal kingdom than man. It even became possible to argue that she was more highly developed than the male because, unlike the male, her reproductive and sexual processes were more highly evolved.

This was a position taken up by the pioneering and reforming doctor, Dr. Elisabeth Blackwell. She took the moral high ground using Galenic terms (sperm emission was a form of menstruation) to construct female anatomy and sexuality as of a higher order than the male with woman being associated with mind and man with nature.²³⁶

iii) "There is no proof that these [uterus, etc.] tissues are ever really "turgescient" in menstruation nor is there any erection or sexual excitement during menstruation. Rather all the processes concerned in menstruation converge, not towards the sexual sphere, but the nutritive...."²³⁷ In other words, menstruation was but one part of a process in which the successive growth of the ova "strictly resembles the successive growth of buds on a bough."²³⁸

This nutritive discourse supported the separation of sexuality and reproduction which Jacobi proposed. She then used this separation to argue that women were less dependent on an animal or sexual element; "in other words, she is sexually inferior"²³⁹ to men.

This would have made females less liable to sexual urges than males, and in the moralistic society of Victorians, the victim of male carnality and pollution, not the temptation. Although this liberated women's sexuality from a biological and vaginal imperative, it subordinated it to reproduction.

iv) "The periodicity of the menstrual flow is not an abrupt interruption of the ordinary physiological life."²⁴⁰ Menstruation became a gradual and ordinary physiological process that nourished the female body rather than depleted it. It was not substantially different from male nutritive processes and Jacobi argued that the difference between the "two sexes, is a difference not of kind, but of degree."²⁴¹ Therefore, menstruation was not the site of female pathology and inferiority nor should it bar her from full citizenship or participation in society.

Dr. Jacobi won the Harvard Medical School's prestigious Boylston Medical Prize with her study. In it she investigated hundreds of women's medical and menstrual histories, school attendance, occupation, exercise, and marital status as well as doing a series of experiments with a small number of women testing their urea, temperature, pulse, phymographic traces, blood corpuscles, and nervo-muscular strength. She concluded "there is nothing in the nature of menstruation to imply the necessity, or even the desirability, of rest, for women whose nutrition is really normal."²⁴² Her study was a feminist scientific resistance to the discursive creation of menstruation as the site for female difference, pathology, and inferiority.

Throughout the later part of the nineteenth and the early twentieth century this battle of the "woman question" continued unabated. Although by 1882 British women were finally allowed independent ownership of their own property, male control over women in the law, work, medicine, and politics was evident. And the struggle for entrance to education was "heartbreakingly slow...The vote seemed to be the key".²⁴³ After several unsuccessful attempts to

get women the vote, an umbrella organisation, The Women's Franchise League, was formed in 1889 to campaign for "complete equality of women in divorce, inheritance and custody of children".²⁴⁴ In 1903 women stepped up the campaign forming the Women's Social and Political Union with the slogan "Votes for Women". As men did not appear to support women's action for greater equality either politically or economically, the campaign for the vote drew wide spread support from women with different interests from better wages and conditions to socialism to better training for widwives. It united "women of very different political views"²⁴⁵ in political action.

As women continued to press their case, there was an "overwhelming masculine tendency, in the face of feminism, to shore up the traditional female role, (with scientists) uncritically lending their theories and their professional authority to the negative side of 'the woman question'."²⁴⁶ George John Romanes, an evolutionist, physiologist, and early comparative psychologist, "set out to persuade his public of female mental inferiority"²⁴⁷ in an article published in the British monthly THE NINETEENTH CENTURY in 1878 titled "Mental Differences between Men and Women".²⁴⁸ Using evolutionary theory, he argued:

...if we take a broad view of these psychological differences, it becomes instructively apparent that a general uniformity pervades them - that while within the limits of each species the male differs psychologically from the female...the males admit of being classified, as it were, in one psychological species and the females in another.²⁴⁹

He stated that he was not against women's education, "we may also hope that social opinion will soon become unanimous in its encouragement of the higher education of women" but this was only to "better equip a wife as the helpmeet of her husband...better to prepare a mother for the greatest of her duties..."; not "to set up an unnatural, and therefore an impossible, rivalry with men in the

struggles of practical life".²⁵⁰ Although he advocated female education, in practice women were to remain in their private and domestic sphere.

From their writing it appears that these men struggled with the contradictions of their own arguments and evidence. Their arguments in support of the physical and mental superiority of the male, and naturalness of the subordination of women were contradictory and even illogical.²⁵¹ Romanes who set out to demonstrate female mental inferiority contradicted himself to the extent of quoting an experiment he undertook in which the women outperformed men! In discussing the 'natural' weakness and dependence of women, he stated that the "deeply-rooted desire to please the opposite sex which, beginning in the terror of a slave, has ended in the devotion of a wife."²⁵² As Edith Simcox pointed out in her response, "The Capacity of Women" in THE NINETEENTH CENTURY,²⁵³ to Romanes' article, it was women's historical and material conditions that accounted for their present condition, not that she was of a different species who had evolved from abject slave into a 'naturally' devoted wife:

The first thinkers of the first ages were taken from the class of gentlemen of leisure, rulers of men, possessed of whatever experiences life then could teach; their leisure was secured by the industry of wives and slaves, and any latent aptitude their sisters might have had for religion or philosophy was sacrificed to the necessity for grinding corn or looking after the maids.²⁵⁴

This continuous and repeated male appeal to the discourse of 'natural' sexual and biological difference (often in the face of quite contradictory evidence) served interests other than dispassionate, scientific 'truth'. Mosedale suggested that many men were unconsciously reacting to the massive changes in the society they knew by "attempting to confine to the traditional mold the one element in the changing pattern which they might have hope of controlling, their women."²⁵⁵ Simcox argued that the male ascetic tradition had lead to men viewing:

every woman to be all 'lower nature.' (And that) this was unjust because the mass of men who were not ascetics had just as much 'lower nature' as the women, and it was not the fault of the latter that imperfect ascetics found their existence a trial or temptation."²⁵⁶

Romanes repeated more than once that he wanted woman to be "the complement, not the rival, of man"²⁵⁷ so that the social organism may beautifully fit together "without expecting women as a class to enter into any professional or otherwise foolish rivalry with men...."²⁵⁸ Allen even more explicitly in his 1889 article "Plain Words on the Women Question"²⁵⁹ stated that it was female duty to marry and have children: "I think, it will be abundantly apparent...that in every community, and to all time, the vast majority of the women must become wives and mothers, and must bear at least four children apiece."²⁶⁰ The co-existence of the fall in the population especially among the middle-class and the ideas of eugenics and evolution lead to fears that "many of the most cultivated and able families of the English-speaking race will have become extinct...."²⁶¹ Allen, considering that the Victorian terms of marriage were a form of "slavery",²⁶² advocated any modifications in marriage and social arrangements:

which will satisfy the woman's just aspiration for personal independence, for intellectual and moral development, for physical culture, for political activity, and for a voice in the arrangement of her own affairs, both domestic and national....- we must at least have mothers.²⁶³

In the face of women's refusal to marry and/or have children, he was willing to concede women's case, but only if this emancipation neither interfered with women's duty to have children nor men's masculinity - for as he warned his female readers - "Now, we men are (rightly) very jealous of our virility."²⁶⁴

A common solution to the awkward and persistent 'woman question' for most educated men, and many women, was not to question the discursive creation of biological difference, but rather to

construct the incommensurately different, if complementary, male and female. This position was persuasively argued by the biologists-sociologists Patrick Geddes and J. Arthur Thomson in their book, The Evolution of Sex, first published in 1889.²⁶⁵ In this popular text they presented "an elaborate causal explanation of the popular view that sexual differences of emotion and intellect are based"²⁶⁶ on the most fundamental "physiological constitution of males and females themselves",²⁶⁷ "the combinations and permutations of molecules..."²⁶⁸

Basing their theory on the work of W.H. Rolph (1884)²⁶⁹ in which the male cells were considered "hungrier, and more mobile" while the female cells were "more nutritive, and usually more quiescent"²⁷⁰ and using market economy metaphors, they proposed that:

the males live at a loss, are *katabolic*, - disruptive changes tending to preponderate in the sum of changes in their living matter or protoplasm. The females on the other hand, live at a profit, are more *anabolic*, - constructive processes predominating in their life, whence indeed the capacity of bearing offspring.²⁷¹

Their entire theory was predicated on the visible characteristics of the ova and the sperm: "the ovum, large, well nourished, and passive,...so the smaller, less nutritive habit, and predominant activities of...the sperm."²⁷² "Here, assuredly, the difference between male and female has its fundamental and most concentrated expression."²⁷³ However, in drawing their careful distinctions between the differences in males and females, Geddes and Thomson firmly distanced themselves from attributions of superiority and inferiority. Rather they contented that: "to dispute whether males or females are the higher, is like disputing the relative superiority of animals or plants. Each is higher in its own way, the two are complementary."²⁷⁴

In contrast to many physiologists, psychologists, and physicians, Geddes and Thomson considered puberty to be a rather minor, if important, change in both males and females. There were no descriptions of dramatic or critical developments or differences in

or between the sexes, rather "the minor changes of puberty in man (are) associated with the commencement of spermatogenesis...(in) the female is marked by a cellular activity within the ovary, not less remarkable than that in the testes."²⁷⁵ I suggest that as Geddes and Thomson were not trying to prevent women from entering higher education, protecting their medical interests, or attempting to create a particular professional discipline they had no vested interest in young women's and men's reproductive development.

It is interesting to compare their views with another popular book, Plain Facts for Old and Young, by an American physician, Dr. J.H. Kellogg, and published in 1888.²⁷⁶ In discussing puberty, Kellogg constituted it as "the critical period" in which the "changes, so varied and extraordinary, often occur within a very short space of time; and as they are liable to serious derangement, especially in the female, great care should be taken...."²⁷⁷ In preparing his case for a critical period, he did not refer to Dr. Jacobi's work which had been published and was generally well regarded. Rather than just publishing "plain facts", it would appear that Dr. Kellogg's and other male physicians interests were served more by a bodily construction which opened opportunities for their expertise and advancement than a body in which "physiological processes go on more smoothly without attention than with it...."²⁷⁸ As he went on to state when discussing female hygiene, "no one can be better fitted to speak on this subject than a physician."²⁷⁹

In relation to explanations of menstruation, Geddes and Thomson began by acknowledging that "the process of menstruation (*menses, catamenia*)...is by no means yet clearly understood."²⁸⁰ However, this lack of scientific understanding did not prevent them from devising their own version of the 'truth'. This happened again and again in the human sciences. Rather than a lack of facts and understanding making scientists and physicians tentative or reluctant about explanations of or interventions in menstrual processes, this very absence of agreed scientific 'facts' about the body's reproductive

processes presented endless opportunities for interested parties (both females and males) to confidently write their own story on the surface of the female body.

Geddes and Thomson dismissed menstruation-as-heat as an old theory along with the theories that "it served to rid the system of impure blood,...or, later, that it was associated with ovulation."²⁸¹ At the time of writing their book, they considered that "At present there may be said to be two rival theories."²⁸² The first theory proposed that menstruation was a kind of surgical "freshening" of the uterus for the reception of the ovum: the second that the menstrual process itself was an expression of the failure of these preparations. They however suggested that the process could be expressed in "more fundamental terms" as a means of getting rid of the anabolic surplus.²⁸³

Their construction of menstruation as a process ridding the body of a surplus of nutritive material mirrored Dr. Jacobi's and Dr. Anderson's nutritive-plethoric theory of menses. It seems likely that Geddes and Thomson were familiar with these ideas, but as they did not cite any references it is difficult to know. However, in contrast to the nutritive-plethoric theory, Geddes and Thomson considered menstruation to lie:

on the borders of pathological change, as is evidenced not only by the pain which so frequently accompanies it, and the local and constitutional disorders which so frequently arise in this connection, but by the general systemic disturbance and local histological changes of which the discharge is merely the outward expression and result.²⁸⁴

Here menstruation-as-pathology had been firmly inserted into the male discursive construction of menstruation, even when it was being compared to the "widely different yet deeply similar world of flowers" where there was the "anabolic overflow of nectar" in "the growing seed or fruit"²⁸⁵ - a process which was hardly pathological.

The late 19th century rival theories described by Geddes and Thomson show a distinct shift in physiological and medical theories

of menstruation from more general processes to a specific focus on reproduction. In these theories menstruation had become the site of reproductive success (preparation for a fertilised ovum), or reproductive failure (the discharge of the dead ovum). As eugenics raised concern over the falling population and the struggles over women's place and nature continued, "a tremendous amount seem(ed) to be at stake in the nature of woman's reproductive cycle and its relationship to desire ."²⁸⁶

These concerns and conceptualisations were reflected in the influential writing of Havelock Ellis,²⁸⁷ whose seven volumes of The Psychology of Sex were published between 1897 and 1928. Havelock Ellis, who originally trained as a physician, was a British writer, one of the founding fathers of the new 'science' of sexology, and a self-professed pro-feminist.²⁸⁸ In what was considered to be "the first major work to deal with normal sexual behaviour in human beings and animals, as well as sexual pathology",²⁸⁹ Ellis wrote that it is "widely accepted that the main cause of menstruation is a rhythmic contraction of the uterus, - the result of a disappointed preparation for impregnation,- a kind of miniature childbirth...i.e., as an abortion of a decidua."²⁹⁰ As well as presenting menstruation as reproductive failure, Laqueur argued that even Ellis, the pro-feminist, viewed menstruation as pathology. He quoted Ellis as concluding that "these facts of morbid psychology, are very significant; they emphasise the fact that even in the healthiest woman a worm however harmless and unperceived, gnaws periodically at the roots of life."²⁹¹ However, elsewhere Ellis argued that menstruation was "a normal physiological process".²⁹² Citing the work of Goodman, Stephenson, and Jacobi, he subscribed to the menstrual wave theory reporting that "menstruation is a continuous process, the flow being merely the climax of a menstrual cycle, a physiological wave which is in constant flux or reflux."²⁹³

As Ellis was not constructing an anti-feminist argument, he did not consistently constitute menstruation as pathology or morbidity

even if he was influenced by some anti-feminist scientific literature. Rather what we see in Havelock Ellis' work was the male fascination with women's reproductive cycle and its relationship to sexual desire. One of his earliest chapters in Studies in the Psychology of Sex was on "The Phenomena of Sexual Periodicity"²⁹⁴ in which Ellis constructed an elaborate argument for menstruation as the "period of the climax of the sexual feelings."²⁹⁵ Once again menstruation was linked with sexual desire.

Ellis was deeply enthralled with "the influence...of cosmic rhythm", and he considered periodicity to be "the character of all biological activity, alike on the physical and the psychic sides."²⁹⁶ He even argued that men had "a monthly physiological periodicity..." in spite of admitting that "precise evidence, however, is, for the most part, lacking."²⁹⁷ He constructed his case for the periodicity of sexual desire and menstruation as "analogous to heat in female animals"²⁹⁸ from the dominant Victorian scientific discourses about 'primitive' peoples and 'lower' animals; written of course by privileged Western men. An example was the influential²⁹⁹ research by Walter Heape on the reproductive cycle of monkeys in which Heape stated "menstruation is shown to be identical with "heat"."³⁰⁰ Walter Heape was a well regarded Cambridge zoologist and virulent anti-feminist who, in the words of Ellis, "most fully and carefully described menstruation in monkeys."³⁰¹

There was both scientific and feminist resistance to constituting menstruation-as-heat and women (and men) as controlled by a seasonal, biological sexual imperative. Even Ellis commented that "this elementary fact of the sexual life has, however, been denied, and strange to say, by two women doctors (Dr. Jacobi and Dr. Blackwell)."³⁰² In spite of this, Ellis concluded that "the majority of authorities (at the very least) admit a heightening of sexual emotion before or after the menstrual crisis"³⁰³ and that "women preserve a primitive phenomenon which earlier...was common to both sexes, but which man has now lost."³⁰⁴ In his pursuit of the "clear"

facts about a natural sexuality which might free men and women from the "evil of ignorance,"³⁰⁵ Ellis, the pro-feminist, once again positions women as the more primitive sex - lower on the evolutionary hierarchy - subject to an uncontrolled instinctual sexuality.

Although Ellis was convinced that sexual desire was at its height during menstruation, he was aware from his conversations with women that few women experienced sexual desire or engaged in sexual relations during menstruation. To account for this contradiction, he maintained that civilisation and advancing culture had intervened in natural desire so that:

the tendency of the female to sexual intercourse during menstruation has everywhere been overlaid by the ideas of a culture which has insisted on regarding menstruation as a super-natural phenomenon which, for the protection of everybody, must be strictly tabooed.³⁰⁶

At this point, the universal anthropological menstrual taboo enters scientific and psychological discourse.

Quoting from Sir Gordon Frazer's seminal work on taboo in The Golden Bough,³⁰⁷ Ellis constructed a theory that ancient and primitive culture connected "women, by the virtue of the menstrual process, with natural or supernatural powers of the world."³⁰⁸ He was careful to differentiate taboo from connotations of unclean or physically foul by arguing that "conceptions of holiness and pollution not having yet been differentiated, women...during menstruation are on the same level as divine kings, chiefs, and priests...."³⁰⁹ Ellis supported his theory by quoting "the distinguished French sociologist, Durkheim" as arguing:

that the origin of the occult powers attributed to the feminine organism is to be found in primitive ideas concerning blood. Not only menstrual blood but any kind of blood is the object...of precautions...in it resides a divine principle, or as Romans, Jews, and Arabs believed, life itself.³¹⁰

As blood was generally taboo and women were chronically "the theatre

of bloody manifestations",³¹¹ the menstruating woman became everywhere for all time 'taboo'.

Ellis considered that this primitive theory of women as possessing super-natural and natural power resulted in them being venerated. This veneration was always allied with an element of fear, because "what men fear is to some extent odious to them."³¹² Ellis appeared to recognise a Victorian male fear and repugnance of women; and by linking this with ideas about taboo and blood, Ellis proposed that women's menstrual processes influenced their position in society. In his revised and enlarged third edition of Studies in the Psychology of Sex, he devoted an appendix to "The Influence of Menstruation on the Position of Women." I think he articulated a dominant male perspective in his society when he suggested that "men habitually view women" through "an emotional atmosphere" constituted by their views of menstruation and that "for a proper understanding of the sexual relations of men and women, it cannot be wholly ignored."³¹³

THE EARLY TWENTIETH CENTURY

It is singular that a process eternally and regularly repeated in the life of woman has never been regarded as quite normal or physiological. It is somewhat less unaccountable that it should have been everywhere considered as a badge of inferiority or a basis of exclusion or disgust.

G. Stanley Hall, 1904
Adolescence: Its Psychology, pp. 502-3

In the early twentieth century, there was no lessening of this emotional atmosphere surrounding woman's reproductive cycle. There was a continuing decline in the birth-rate of the middle classes "whilst the birth-rate of the lower classes"³¹⁴ remained stable fuelling the fear of 'race-suicide'.³¹⁵ By 1904 Karl Pearson wrote: "We are ceasing as a nation to breed intelligence as we did fifty to hundred years ago...the less able, and the less energetic are more

fertile than the better stocks."³¹⁶ With the eugenics promise of "a society in which each child might be born endowed with vigorous health and an able mind",³¹⁷ one approach to this 'problem' was to:

promote selective-breeding policies. Middle-class women, especially, were exhorted to become more productive; to turn their interests away from higher education, professional aspirations and thoughts of suffrage and economic independence, and to rededicate their energies to the serious business of scientific motherhood.³¹⁸

This concern over middle class fertility in conjunction with the medical discourse of the deleterious effects of education upon female fertility created the conditions in the early 1900s for a "regression to the more extreme notions of female inferiority and sex differences."³¹⁹ This included scientific theories. Jean Finot writing on Problems of the Sexes (*Préjugé et problème des sexes*) in 1912 condemned most scientists as "the most ardent advocates of the theory of the inferiority of woman...whether they are animated by a dull hostility or by an excessive admiration for woman, they treat her almost invariably as an incomplete man."³²⁰

This excessively admired, but definitely limited, 'woman' defined by her breeding capacity was inserted into the very foundations of the emerging discipline of Western academic psychology through the extensive work of G. Stanley Hall. One of the "father figures"³²¹ of psychology, he is considered to have "played a leading role in defining the social reality of the time"³²² and to have had "a pervasive influence on the discipline (of psychology), constituting a link between the earliest days and the modern period."³²³

Hall was a eugenicist whose vast and optimistic "scheme was to create the right conditions, through socialization and the educational process, to assist evolutionary progress and thus elevate society to a superstate."³²⁴ He considered that "the child and the race are each keys to the other"³²⁵ and marked adolescence as the crucial period of "a new birth, (in which) the higher and more completely human traits are born."³²⁶ Hall constituted nature as

arming "youth for conflict with all the resources at her command." However, warning his readers that "modern life is hard" with the dangers of "diseases...disorders...perversion...and secret vice," Hall advocated a science of child development separate from religion and medicine in which "psychogenetic applications" of a "biological psychology"³²⁷ could be applied to the questions of youth.

On the woman question, Hall was a conservative, anti-feminist who like other Victorian scientists invested enormous importance in woman's reproductive cycle and its relationship to desire. In his 1904 seminal work, Adolescence: Its Psychology, his aim was to "show the true relation of (female and menstrual) processes to pubertal growth on the one hand and to sexual desire on the other, as well as to fecundity." His purpose was "to help us bring the future mothers of our race to a better discharge of their functions."³²⁸ Hall considered that educating girls to be self-supporting was a crime against nature because woman's purpose was to be a wife and mother. In his preface to Adolescence: Its Psychology, he wrote: "One of the gravest dangers is the persistent ignoring by feminists of the prime importance of establishing normal periodicity in girls, to the needs of which everything else should for a few years be secondary."³²⁹

Hall was fascinated by menstruation and devoted a whole chapter to it as "few, if any, topics in the whole biopsychic field are as interesting."³³⁰ He began his chapter by associating menstruation with sexual desire through a discussion of "rut" in the "higher animals". Using the work of Heape, he connected menstruation with breeding but considered it independent of ovulation. In this way, Hall could argue that "mentality and nerve stimulation" reverberated "clearly in the genital plexus" which could lead to "precocious" (and dangerous) development.³³¹ In other words, women's reproductive organs were connected to their brains and nervous system so that mental over-stimulation or over-exertion would have a deleterious effects on their menstrual and reproductive functions. With this model of the female body, puberty and the onset of menstruation

became "great feebleness at this plastic age,"³³² and Hall could argue for separate, and limited, educational opportunities for young women.

As a thorough researcher, Hall had to concede that "precisely what menstruation is, is not yet very well known."³³³ Undeterred by a lack of established facts or agreed theories, Hall opted for the wave theory³³⁴ because it harmonised "with the older conception of the dominance of the uterine nerve plexi as a sort of pelvic brain... This uterine center would thus be a sort of telephonic switchboard, and hysteria would be due to derangement of its connections."³³⁵ Hall became so enamoured of a female soul centred in her reproductive biology that he actually imagines for woman "a sort of pelvic brain"! Citing various pieces of research, Hall went on to constitute women as "more easily hypnotised, more prone to jealousy,...can make less accurate and energetic movements, and mental activities are less brilliant." Concurring with Havelock Ellis that "a woman during her reproductive life is always engaged in menstruating", Hall considered everything about a woman had to be judged in reaction to her menstrual cycle which "permeates her whole physical and psychical organism". This included "even guilt for crime (which) is lessened."³³⁶

There was scientific research which contradicted Stanley Hall's always menstruating, enervated woman. In 1901 a "careful study on the health of college and non-college women" by Mary Roberts Smith was published in the 1900-1901 Publications of the American Statistical Association.³³⁷ Her study, carried out during the 1890's, compared college women with a control group of non-college women of the same social class. Although the study found that college women married two years later than non-college women and had slightly fewer children, the college women had more children per years of marriage and their children were slightly more robust. "The study found no significant difference between the health of the two groups of women before or after college age."³³⁸

In 1901 Dr. Clelia Mosher, an American scientist, physician and supporter of equal education for women, published a "preliminary note" on her research into "normal" menstruation.³³⁹ In this short paper, she constructed menstruation as a normal physiological function which was incapacitating primarily because women expected it to be. Using extensive clinical and experimental data, she argued that any ill effects experienced by women around menstruation were due to a rhythmical fall in blood pressure. Since her experiments were with men and women whose results were "indistinguishable in character",³⁴⁰ she concluded that:

When we remember how firmly fixed is the tradition that a woman must suffer and be incapacitated by this normal physiological function, it is readily understood how many women would call the depression due to lowered blood pressure, menstrual suffering.³⁴¹

She went on to criticise the research supporting menstrual dysfunction as it "exaggerate(d) the percentage of women suffering from dysmenorrhoea" because it relied on "isolated statements based on the general impressions, as to their own conditions, of individual women filling out a single menstrual record..."³⁴² I am struck by how similar her criticisms are to current criticisms of menstrual cycle research: this striking "similarity between earlier and current versions of the thesis that 'biology is woman's destiny'"³⁴³ has presented both the earlier and the current profeminist scientists with similar problems and dilemmas. Like many current researchers myself included, Clelia Mosher did not deny that women suffered menstrual distress; in this paper she stated that "true dysmenorrhoea is far too frequent."³⁴⁴ However in constructing the case for female equal opportunities in education and employment in the face of a "conservative anti-feminism",³⁴⁵ Mosher found herself resisting the accounts of "individual women" when they constituted menstruation as "suffering" and incapacitating.

Hall was evidently aware of this scientific research: he even quoted Dr. Jacobi's study himself in Adolescence: Its Psychology.³⁴⁶

However, because he so "strongly believed that woman's place was in the home, (he) simply dismissed the statistical studies as inaccurate."³⁴⁷ Hall declared his opposition to feminist views "like those of...Mrs. Fawcett,...that 'the ordinary healthy woman is as fit for work every day of her life as the ordinary healthy man,'"³⁴⁸ and wrote of menstruation as an "illness",³⁴⁹ puberty as "great feebleness"³⁵⁰ and the onset of menstruation as a "very critical experience".³⁵¹ It was not that Hall was animated by a hostility to women, but rather that he only saw and admired women's sexuality. Of the menstruating, and therefore sexual and procreative woman, he wrote:

During the first few days...unconsciously, if entirely healthful, she is more attractive to man; and as the wave of this great cosmic pulse which makes her live on a slope passes, her voice, her eye, complexion, circulation, and her very dreams are more brilliant. She feels her womanhood and glories in it like a goddess.³⁵²

In Hall's romantic depiction of womanhood, there appeared to lurk a deep anxiety about reproductive failure, especially among the middle-classes. It would have been an eugenic imperative for Hall's vision of an aristocratic, racist and sexist superstate that 'white' middle-class women breed. He did not want them diverted or incapacitated by education or employment or independence: he saw their destiny as marriage and procreation. Recognising that women's lack of esteem in the society contributed to women dissatisfaction with their state, Hall called for reverence and awe of woman's procreative, and therefore, menstrual powers. He criticised feminists for accepting "man's estimate of this state" (reproduction and menstruation). He argued that they were disapproving, minimising and trying to eliminate:

the very best thing in their nature. In so doing it is the feminists, who are still apishly servile to man even in one of his greatest mistakes, which has done woman most wrong. She (should) not profane her own Sabbath of biological ordination....³⁵³

Hall's solution to man's mistake was to exult "womanhood as something superior." Rather than women aspiring to male rights and privileges, he called for them to follow a female "freedom, intelligence, and true self-knowledge."³⁵⁴ He argued that woman had her own "intuition and experience", "way of wisdom...more esoteric and mystic," and was "less in need of supplementing her own individual limitations by the study of alien lessons of the schools." He criticised the "man- and school- bred kind of logical consistency to impose which upon her is an outrage to her nature."³⁵⁵ For Hall, female and male adolescent development, and the female and male sex, were incommensurate. Adolescence marked the deep divide between the sexes: "Now begins a great and eradicable difference between the physical and psychic life of woman and man."³⁵⁶

This romantic vision of glorious womanhood and motherhood need not necessarily have excluded women from full citizenship. Hall himself described women as "vigorous, energetic, joyful, brilliant," but only after her menstrual period when she was "born anew."³⁵⁷ During menstruation, she was liable to menstrual "illness" and "irregularities which seem everywhere increasing." So that "hysteria, epilepsy, chorea, chlorosis, and exophthalmic goitre are ...among the neuroses of menstruation" because "the sympathies between the brain and reproductive organs are far more intimate than has hitherto been suspected."³⁵⁸ Stanley Hall, a founding father of psychology and an admirer of womanhood, was to construct the wise but wounded woman, limited to procreation by virtue of her menstrual cycle.

And this was what he did: Using "ancient authorities" as well as 'scientific' research, he constituted the first menstruation as a critical period for female adolescent development stating that "ever since Hippocrates the period of the first menstruation has been thought to be very critical."³⁵⁹ He even suggested it effected subsequent menstrual experience as well attributing "great etiological importance in insanity to the way in which the first

menstruation was established."³⁶⁰ Hall raised concerns about the unprepared girl experiencing deep psychic disturbance and constituted the mother's role as crucial: the first menstruation "in girls not properly instructed may cause great alarm...thus lay deep in the nervous system, the foundation of psychic perturbations at every period... The quality of motherhood has nowhere a more crucial test than meeting the needs of this epoch."³⁶¹

Hall's pedagogic project was to teach girls to value and revere their reproductive and menstrual functions: "instead of shame of this function girls should be taught the greatest reverence for it... these would be the most interesting and beautiful hours of flowering" pointing out that "savagery reveres this state and it gives to woman a mystic awe."³⁶²

Hall recognised the contradiction between menstruation as a natural evolutionary process to be valued for its reproductive importance and menstruation as an abnormal and pathological event which marked women as inferior and disgusting. As he stated: "It is singular that a process eternally and regularly repeated in the life of woman has never been regarded as quite normal or physiological."³⁶³ He accounted for this contradiction by reference to the evolutionary effects of ancient times and "primitive races". Citing Havelock Ellis and Gordon Frazer, he argued that women's "psychic and physical pain may be inherited effects of the ages of ostracism and cruelty suffered at these times" because the "primitive races" used menstrual "tattooing, isolation, many local operations, fasting, close confinement..." The effects of these taboos on menstruation was "repellent tendencies" which were "very ancient as well as *universal*."³⁶⁴

Profeminists continued their resistance to this male scientific reproduction of women as "mysterious being, half hysteric, half angel"³⁶⁵ who should be "the matrix from which proceed the dynamic agents of society."³⁶⁶ In 1908 Martha Carey Thomas called Hall's views on menstruation and periodicity "sickening

sentimentality" and "pseudo-science".³⁶⁷ In 1914 Dr. Leta Stetter Hollingworth considered scientific writing, including Hall and Ellis, to be based on "dogma" written by "men to whom it would never have occurred to write authoritatively on any other subject regarding which they possessed no reliable or expert knowledge."³⁶⁸

In spite of this resistance by feminist educators, scientists, and psychologists, it appears that the anti-feminist Victorian scientific, and psychological, construction of woman, her sexuality, and menstruation continued to dominate. In my own studies of psychology, I have read of Stanley Hall, father of adolescent psychology, and Havelock Ellis, father of sexology and liberator of sexuality, but not of Clelia Mosher, Mary Jacobi, or Leta Hollingworth. These pioneering women educators, doctors, and psychologists, and their profeminist criticisms and findings, do not form part of the academic cannon.

IN CONCLUSION

This historical analysis of the female body and menstruation from 1850 to 1914 made me realise that scientific and psycho/medical theories about women's menstrual cycle do not arise from the transparent nature of the body, universal structures of society or unmediated psyche processes. The female body is not 'naturally' different from and inferior to the male body. Women are not 'naturally' destined to be mothers, wives and housekeepers. Menstruation is not a 'naturally' disgusting, extra-ordinary, taboo or pathological event. These ideas are historically constructed by power relations. They are an aspect of the late 19th and early 20th century creation of two specific, gendered human subjects, the dominant, active male and the subordinate, passive female, who have separate spheres of activity, the one public and the other domestic. In support of this construction of the female as passive and specifically designed for procreation, anti-feminist scientists in conjunction with an increasingly powerful medical profession

repeatedly attempted to 'prove' that female puberty was an extra-ordinarily taxing process on the female constitution, the onset of menstruation was a critical period in the formation of girls' physical/mental health and menstruation was a debilitating, pathological processes which barred women from equality with men.

As women increasingly sought equality, anti-feminist scientists, professionals and politicians continued to attempt to exclude them by producing a vast and virulent anti-feminist body of research and writing on the female body and sexuality, women's nature and role in society and the feminine psyche. This was particularly true of the medical profession and the emerging discipline of child psychology. As more women rejected the traditional Victorian female role and the birth rate among the white upper classes continued to decline, scientific and professional interest in and regulation of the female body and reproductive functions were mutually implicated in a growing political and emotional anxiety about women's reproductive and social role. This interest in "The Woman Question" was however productive of more than just anti-feminist discourse and practice, it also produced feminist research, writing and practice. And, although some of this feminist work echoed earlier conceptions of the menstruating woman in British culture, by the early 20th century the discourses of the desiring and desirous menstruating woman, the onset of the "flowers" and the one sexed body were largely absent from the dominant theories and debates.

Scientific questions about woman and her nature were now formulated around the extent to which woman's destiny was determined by her biology, the effects of menstrual dysfunction and the production of women's femininity, sexual desire and reproductive capacity. In conjunction with this scientific discourse, the emerging child psychology formulated the onset of menstruation as a "critical" period signalling "womanhood", puberty as sexual maturity bringing sexual differentiation and the importance of the onset of menstruation with its possibility for "deep" psychological

disturbance. Caught up these debates and discourse, even feminist women researchers wrote of menstruation as a "taboo" surrounded by "superstition" which required further empirical research because of its educational, sociological, and/or economic importance for women. In this sense, Hall was indeed right when he called menstruation "a most tempting psychological theme" in which "rankly fads and extreme and special theories and practices arise and flourish for a season."³⁶⁹

Having considered in this chapter our culture's changing conceptions of menstruation up to 1914 and established the importance of adolescent female puberty for the emerging child psychology, I want to go on in Chapter 7 to consider whether there is any continuity between Victorian scientific conceptions of the female body/nature and the development of our present psychology of menarche. Are Victorian scientific writings especially those by anti-feminist scientists implicated in later 20th century psychological questions about the onset of menstruation, the development of femininity and nature of female puberty? How did the changes in the social and scientific world especially the two World Wars and the second wave of feminism affect present psychological questions about menarche and adolescence?

CHAPTER 7

GIRLS' MENSTRUAL MILESTONES AND TRAUMA:

twentieth century psychology constructs the 'menarcheal' girl

Thus there has remained an obvious residue of general resentment of men against women. This resentment expresses itself, also in our time, in men's distrustful defensive manoeuvres against the threat of women's invasion of their domains; hence their tendency to devalue pregnancy and childbirth and to over-emphasise male gentility. This attitude does not express itself in scientific theories alone, but is also of far-reaching consequence for the entire relationship between the sexes...

Karen Horney, "The Distrust between the Sexes",
Feminine Psychology. 1930. p. 115.

INTRODUCTION

In this chapter I chart the emergence of contemporary conceptions of and questions about the onset of menstruation and adolescent girls in child psychology. With the establishment of 'menarche'³⁷⁰ in the human sciences as a fixed idea at the beginning of the 20th century a psychology of the 'menarcheal' girls was made possible. Such a psychology came into being in the 1930's with menarche marking the beginning of sexuality maturity and feminine desire. After the Second World War this biopsychic event of child psychology transformed in psychoanalysis and the psychology of women into a psychic trauma and universal taboo only to fade into relative obscurity in the 1950s. It was in conjunction with the second wave of feminism that menarche re-emerged from psychoanalysis to become the developmental milestone signalling womanhood in the child psychology of the 1990s.

In doing this analysis, I have not assumed that these changing conceptions of menarche and its place in the psychology of adolescent girls are the result of the steady progress of child psychology as a science. I have assumed that the emerging 20th century psychology of menarche has been shaped by a multitude of factors in the social and scientific world, in particular the two World Wars, the formation of psychology as a science,³⁷¹ the changes in gender relations, and the role of women and feminism in science and psychology. In order to see how these factors have been mutually implicated in the

psychological making and re-making of the menarcheal girl, I have read more than just the psychological literature including both primary and secondary sources from history, feminist literature, anthropology, medicine, and even newspapers. But I have particularly focused on the role of women in society and psychology as well as the developments in feminism because of their relationship to the discourses of women's psyche, femininity, and body. As Maggie Humm argues:

in this century, it is feminism which represents *the* major change in social thinking and politics because only feminism *radically* questions our understanding of 'men' and 'women' and the social structures which maintain their differences.³⁷²

However, I do not mean to imply that the psychology of menarche is a mere function of feminists' contributions to science or changing social conditions. It neither came into being in a pure space of knowledge nor was it called into existence through social exigencies, but rather "it was made possible by the existence of certain ways of thinking about populations, statistics, evolution, and heredity"³⁷³ as well as certain theories of the nature, the origin and treatment of the female psyche and menstrual pathology.

THE INTER-WAR YEARS: CONTINUITIES AND CHANGES

This account begins in the years between the First and Second World Wars with the publication in America of two articles by academic psychologists on pre- and postmenarcheal girls and the research in Germany by psychoanalysts on the psychology of girlhood. It was here in the work of two psychologists from California, Calvin Stone and Roger Barker,³⁷⁴ and a psychoanalyst from Germany, Helene Deutsch,³⁷⁵ that the menarcheal girl was inserted into 20th century psychology as a specific object of study. It is these particular authors that are the earliest³⁷⁶ cited in contemporary literature;³⁷⁷ therefore, it is with their work that this enquiry into the rise and fall of 'modern' psychological questions about and constructions of

menstruation and menarcheal girl - and their importance to women researchers begins.

So how did this late 1930s and early 1940s psychological literature on adolescent girls and the onset of their menstruation constitute menarche and menstruation? What were the continuities and discontinuities of their ideas, concerns and constructions from the turn of the 20th century to the inter-war years? How were ideas about women's nature and role reflected in this research and writing? What concerns appear to be embedded in their questions about adolescent girls?

In Calvin Stone and Roger Barker's articles³⁷⁸ on adolescents girls and menarche, they opened with a discussion of the sexual and reproductive behaviour of animals with reference to *oestrus*, the augmented sexual drive at puberty, and sexual periodicity.³⁷⁹ Immediately, this work can be seen to emerge from the earlier pre-war concerns of science with girls' fertility and sexuality. Their interest was in "whether in man, also there are analogous changes which are closely correlated with the appearance of the somatic evidence of sexual maturity"³⁸⁰ which the authors investigated through various psychometric tests with a large sample of pre- and postmenarcheal girls. Unlike some of the earlier studies, these were based on the more rigorous methods of the developing discipline of child psychology.³⁸¹ The studies concluded that postmenarcheal girls were more "mature", favoured "heterosexual interests" including "adornment or display of person", disliked "vigorous or strenuous activity", engaged in "day dreaming", and did not "revolt against family discipline".³⁸² In other words the interests, attitudes, and personality of women were constituted as driven towards heterosexual femininity by their biological sexuality. And as these psychologists gazed on their young female subjects, the question of 'man's' sexuality slipped out of focus.

Stone and Barker's interest in the biological basis of feminine and masculine sexuality with a focus on the female menstrual cycle as

a defining feature of female sexual maturity was a continuation of earlier patriarchal scientific theories about 'The Woman Question'. The reference in their 1939 article to F.H.A. Marshall's³⁸³ work on sexual periodicity was a direct link to Victorian theories of a specific female nature and role based on women's reproductive cycle. Marshall, the father of reproductive physiology, used the work of Walter Heape, Havelock Ellis, and Sir Gordon Frazer on the oestrus, female sexuality, and menstrual taboos to formulate a theory of menstruation as on the borders of pathology³⁸⁴ and puberty as "the period at which...the two sexes become fully differentiated" with girls developing their "graceful contour".³⁸⁵ This was the same literature as that used by Stanley Hall in his pronouncements on girls and menstruation in his work on Adolescence: Its Psychology.³⁸⁶

In this sense the work of Stone and Barker as well as other psychologists of this inter-war period³⁸⁷ continued the pre-war scientific and psychological interest in the relationship of pubertal growth and sexual desire. Frank Shuttleworth, researching girls' sexual maturation and physical growth in the 1930s, claimed that the interest in the physical growth of the two sexes dated back to 1872³⁸⁸ with "over two hundred studies (being) reported"³⁸⁹ by 1937. These 1930s studies of girls and menstruation tended to take place as part of the growing field of child psychology. Government and charitable institutions funded large scale quantitative studies of 'normal' girls and boys by academic psychologists claiming to develop norms for social adjustment.³⁹⁰ This statistically defined concept of the 'normal' female and male adolescent was part of "the formation of psychology as a coherent and individuated scientific discourse"³⁹¹ which from its inception:

derived norms of psychological functioning not from an investigation of its object - the human mind and its laws of functioning - but from a question of differentiation - the measuring of degrees of variation. And variation, like normativity itself, was conceived not in psychological but statistical terms."³⁹²

As the specific idea of 'menarche' took root in a 20th century patriarchal medicine and biology concerned with the differences between men and women, differences constructed as "unchangeable, basic, or God's will,"³⁹³ a child psychology concerned with norms of sexual development was presented with a salient object of study - the menarche. Girls' sexual maturity, defined by a biological event - the onset of menstruation - could be systematically observed, tested, measured, and categorised by this emerging normative psychology.

Although Stone and Barker in common with other psychologists considered the "onset of the menses (as) neither the beginning nor the end of pubescent development", for the sake of their statistical analysis "no serious error is committed if one regards the menarche as a sort of mid-point in the total pubertal phase of adolescent physical development."³⁹⁴ Therefore, within the discipline of child psychology, in practice menarche was treated as a discontinuous biological event which marked female sexual maturity. It became a universal, a-historical, biologically based "*milestone* in development which in all ages has separated the child from the young adult."³⁹⁵ There was now a way of determining early, middle, and late maturing groups; girls could be defined as pre- or postmenarcheal; and girls' normal, as well as "unusual and abnormal",³⁹⁶ patterns of growth could be established. The 'menarcheal girl', marked by a specific female biology and defined by a statistical methodology, could emerge as a subject of 20th century psychological science.

With changes in science and society came a change in the questions asked about women's nature and role. After the First World War with advances in their legal, educational, and voting rights, the position of women had improved substantially enough for there to be a 'New Feminism' which believed that women's rights were "undoubtedly in sight".³⁹⁷ It appears that the battle of the sexes over 'The Woman Question' may not have been as central a public or political issue preceding the war as it had been before. With the principle of equal educational opportunities more or less agreed,

educationalists and psychologists were no longer caught in a battle to prove or disprove that girls by virtue of menstruation should not and could not be educated to the same standards, even if not in the same place, as boys.

In child psychology and medicine, this change was reflected by a fading of questions about the debilitating effects of menstruation on adolescent girls. As hygiene and welfare³⁹⁸ became major social themes, the new strategy for the human sciences became "the production of physically efficient bodies and socially productive habits."³⁹⁹ In conjunction with the growing view of childhood as a major influence on adult physical and mental functioning, the space opened for a psychological science concerned about children's families, personalities, constitutions, and experiences⁴⁰⁰ in order to understand and when necessary treat their behaviour.

At the same time, there was deep concern about women's fertility. The birth rate had continued to decline so that by the 1930s it was at its lowest rate.⁴⁰¹ Women who had entered the workforce either as a result of economic conditions, the First World War, or feminism did not conform to the still powerful image of woman as wife and mother.⁴⁰² There was among women "a very real antagonism to the traditional role of Victorian women."⁴⁰³ In the ruling elite a new interest in women arose in part because it was recognised that "women had to be somehow persuaded to give birth to children in order to make up for the lives which had been sacrificed to international capital during the war."⁴⁰⁴ As well as the questions about children, there were questions about sexuality particularly 'problems of sex'.⁴⁰⁵ As girls were constituted as "attaining earlier sexual maturity" and could be educated with boys, there was fear that boys "may be adversely affected by the "female dominance" in size and social drive." As girls were educated to the same standards as boys, there was fear that girls might not take up a proper feminine role but feeling "handicapped" may develop a 'masculinity complex'.⁴⁰⁶

These issues of sexuality were seen as more than questions of biology, physiology, or illness. They had become questions of education, childhood, and sexual desire as well. With its theories about the development of individuals' attitudes, personality, and sexuality, it was child psychology which took up the questions of 'normal' adolescents sexuality, masculinity and femininity, and "social adjustment".⁴⁰⁷ The question of efficient bodies and menstrual functions was taken up by medicine.

By the 1920s medical debates about the relationship of menstruation to ovulation, fertility, sexual excitation, mental stimulation, and unnatural physiological processes had largely subsided with the discovery of the ductless glands in the early 1900s. The menstrual cycle was now agreed to be under the control of the endocrine system, particularly the ductless glands and hormones. Among progressive physicians, menstruation was argued to be a "perfectly natural phenomena" with the "tendency to regard the menstrual function as one of really unnatural delicacy...a relic of the past".⁴⁰⁸ This view was supported by the work of women physicians like Alice E. Sanderson Clow. At the 1924 annual meeting of the British Medical Association Section of Obstetrics and Gynaecology, she reported that "menstruation is a function which, when normal, has no symptoms." From her research with over 2,000 healthy girls, she concluded that 78% of girls had normal menstruation during which they "felt just ordinary" with 22% suffering dysmenorrhoea of which only 3% were disabled.⁴⁰⁹

Although menstruation was no longer necessarily considered as a period of 'unnatural delicacy', the menstrual cycle, particularly its onset during adolescence, was still an important object of scrutiny and regulation by the medical profession. The onset of menstruation was still constituted as a critical time which needed proper management if the female reproductive cycle was to properly establish itself. The earlier questions of menstruation-as-heat or menstruation-as-mental-enervation changed to questions of mental and

physical hygiene, and medical practitioners became the experts in the hygiene, both mental and physical, of menstruation. For example, at the 1927 annual meeting of the British Medical Association Section of Obstetrics and Gynaecology a symposium was held on THE HYGIENE OF MENSTRUATION IN ADOLESCENTS. The opening speaker, R.W. Johnstone, Professor of Midwifery and the Diseases of Women at the University of Edinburgh, commented that:

the hygiene of menstruation in adolescents...is a most important one and, as it is a matter which falls peculiarly within the province of the confidential family physician, there could be no more suitable gathering than this in which to discuss it. Few matters in regard to feminine hygiene have a more profoundly far-reaching importance. The wise management of a girl's life at the period of adolescence gives the functions of her reproductive organs a good start, and if these behave normally to begin with there is the more likelihood that they will continue to do so.⁴¹⁰

So, although medical practitioners might have encouraged girls to feel "quite well and to be free from pain or any unpleasant sensations", to "exercise, as usual", and to carry on their "usual occupation",⁴¹¹ a girl's puberty was still constituted as "the most momentous of the whole lifetime" with the onset of menstruation as the "most obvious and arresting". With medical science's construction of "girl's entire organism (as) concerned in the changes of puberty", it was argued that "early adolescence must form a critical period when unhygienic methods of living may easily produce disastrous results affecting both body and mind."⁴¹²

This construction served the interests of a medical profession attempting to both maintain and increase its practice. Developments in medicine and education might have proved that not all girls' were disabled or delicate during puberty or menstruation, and therefore, not in need of continuous medical care and advice, but the discursive practice of a 'critical period' which demanded 'hygienic methods of living' opened a new area of professional practice for medical science.

In spite of the very real changes in women's rights in the early 1900s and the hopes of the 'new' feminism of the 1920s, the position of women in the inter-war years was still subordinated to patriarchal concepts of masculinity and femininity. The adult male was "attributed responsibility for financial provision"⁴¹³ with women still conceived of as primarily wives and mothers. In the words of Professor Johnstone (1927):

despite any arguments to the contrary, reproduction is the greatest function of womanhood, and certainly it is the only one in which Mother Nature takes any special interest...she has no interest in intellectual developments, and indeed where these are extreme she not infrequently makes the individual pay dearly for them.⁴¹⁴

The onset of menstruation might no longer be considered as preventing girls from receiving an education, but women were still at the mercy of their biological fate - the reproductive cycle. Male physicians continued to prescribe the circumscribed life for women. In order for their reproductive functions to operate normally, women were to refrain from "too strenuous or laborious a life, too much physical or too much brain work" and in addition, women were to cultivate the proper "mental outlook".⁴¹⁵ Karen Horney (1930) characterised the male view as: "Woman may be industrious and useful but is, alas, incapable of productive and independent work...prevented from real accomplishment by the deplorable, bloody tragedies of menstruation and childbirth."⁴¹⁶ Even Alice Clow (1924) pointed out that "textbooks on gynaecology would certainly not lead one to the conclusion that menstruation is normally a painless process. I have not found one which does not give the impression that suffering must be expected."⁴¹⁷

In addition the discovery of hormones presented a new element for the continued scientific construction of a specifically female body and psyche. By 1931 Dr. Robert Frank has recovered the "female sex hormone"⁴¹⁸ and on the basis of a clinical sample of fifteen women from private practice, he confidently published his findings that:

an excessive amount of female sex hormone in the blood may in labial persons produce serious symptoms, some cardiovascular, but the most striking definitely psychic and nervous (autonomic). These periodic attacks are incapacitating and lead occasionally to extreme unhappiness and family discord. They can be directly ascribed to the excessive hormonal stimulus.⁴¹⁹

He had described a new psychic disease of the menstrual cycle - 'premenstrual tension'. The scene was now set for the 'discovery' of a "large group of women who are handicapped by premenstrual disturbances of manifold nature."⁴²⁰ Once again women were constituted as under the control of "ovarian functions or menstrual change" which effected their "emotional and mental make-up" whereas man's behaviour though influenced by "outside forces" remained steadfastly individual.⁴²¹

With premenstrual tension assuming "the status of a 'known' illness, a syndrome,"⁴²² women's menstrual cycle was re-produced as pathology; like 19th century science 20th century science continued to serve the interests of male privilege. It does appear that as women seek entry to male privileges, scientists will "appeal to social prejudice about the ill-effects of menstruation when it suits their interests to do so."⁴²³ This has happened again and again: In the 1930s as women became pilots in increasing numbers, the Journal of Aviation Medicine⁴²⁴ published an article in which it was claimed that menstruation could cause them to have fatal accidents. The evidence was anecdotal, retrospective, and unsubstantiated, but women were denied their pilots' licences.⁴²⁵ In the 1970s as women became active in public life, an influential American doctor publicly remarked that women could not fill leadership roles because of their raging hormones.⁴²⁶ Menstruation and menopause was reason enough to keep women out of and men in top level positions. And more recently the American Psychiatric Association attempted to include premenstrual syndrome as an official psychiatric diagnostic category. It appears that it is only a vociferous feminist challenge that is

preventing the "raging hormone" theory from becoming an official mental illness.⁴²⁷ It was only during the Second World War when women were needed in the industrial workforce that research was published proclaiming that menstruation had no debilitating effect on women's work.⁴²⁸

The 1930s scientific and social interest in women's reproductive cycle and its relationship to women's behaviour and psychology was reflected in the growing discipline of psychoanalysis. Although the father of psychoanalysis, Freud, did not have much to say on the topic of menstruation and its relationship to female puberty, a number of psychoanalysts turned to this topic including Mary Chadwick and Karen Horney.⁴²⁹ Both these authors were quoted in later influential studies: Mary Chadwick⁴³⁰ in Helene Deutsch's (1944) The Psychology of Women and Karen Horney⁴³¹ in Natalie Shainess's (1961) "A Re-Evaluation of Some Aspects of Femininity through a Study of Menstruation".

Mary Chadwick (1932) presented a dominant psychoanalytic construction of menstruation when she opened her monograph with this dramatic statement: "From the earliest times...the Menstrual Period in Women has been surrounded with ideas of horror; danger and fear of contamination in the minds of others, with shame and guilt on the part of the woman herself."⁴³² Using Victorian anthropological studies of taboo, psychoanalysts argued that "the primitive cannot help connecting the mysterious phenomenon of the monthly flow of blood with sadistic ideas"⁴³³ and that "the taboos of primitive people bear eloquent testimony to man's deep fear of women, which centres precisely around menstruation."⁴³⁴ This proposed primitive and universal anxiety surrounding women's menstrual functions supported the constituting of women's sexuality and bodily experience as both fundamentally biologically determined⁴³⁵ and the source of psychological and functional disorders.

Mary Chadwick, using the dubious physiology of Victorian anti-feminist scientists like Dr. Harry Campbell's (1891) Differences

in the Nervous Organisation of Man and Woman as well as various psychoanalytical books and articles, considered women during their menstrual periods as "temporarily unbalanced."⁴³⁶ She argued for deeper research into the "probable causes of the distress most women feel at these times" considering that "the experiences of the girl during puberty" affected her subsequent life and particularly her social contacts.⁴³⁷ In support of her argument for the importance of menstrual experience in forming women's psyche, she discussed Helene Deutsch's (1922) placing of menstruation as the central cause for girls finding puberty more difficult than boys⁴³⁸ as well as the source of women's neuroses.⁴³⁹ She even went so far as to argue that it was the behaviour of women themselves during their menstrual period "which made necessary the prohibitions and limitations imposed upon them."⁴⁴⁰

Caught by a psychodynamic theory in which sexuality and "desire is primary and instinctually anchored deeply in the biological sphere",⁴⁴¹ even a feminist psychoanalyst like Karen Horney presented menstruation as a source of anxiety and pathology. In her 1931 article on "Premenstrual Tension", she wrote that "menstruation, being such a conspicuous occurrence, has become the starting point and the focus of fantasies beset with anxiety" with "every woman's analysis show(ing) that with the appearance of menstrual blood, cruel impulses and fantasies of both an active and passive nature are awakened in her."⁴⁴² Recognising the danger of these concepts for women's equality, she tried to distance herself from the arguments of female inferiority based on the debilitating effects of menstruation and premenstrual tension. Writing that she wanted to "mark the boundaries of this concept as against that of the gynaecologists", she contended that "we are not dealing with a basic weakness, a condition leading to the tendentious conclusion of the lesser efficiency of women."⁴⁴³ However, in spite of her disclaimer, she subscribed to the concept of "manifold psychological and functional

disorders of menstruation"⁴⁴⁴ because of its usefulness in therapeutic practice.

In their discussions of female puberty, both Mary Chadwick and Karen Horney considered the onset of menstruation an important event for the adolescent girl. For Mary Chadwick, it was:

the most dramatic discovery of the girl at puberty is, of course, signs of blood upon her body or clothing, and unless she has been wisely prepared for this event, it fills her with terror and shame from deep reservoirs in her unconscious mind connected with her childish castration fears.⁴⁴⁵

In common with generations of writers on this topic,⁴⁴⁶ she found that few girls were properly or wisely prepared. In part she attributed this to poorly informed mothers whose "own complexes concerning menstruation hinder them from speaking freely about it" and even resulted in "sadistic manifestations of the woman in her treatment of the girl at her first menstrual period".⁴⁴⁷ Although there was an implicit recognition of possible social influences on the girl's and woman's menstrual experience, the primary constituent of this 'menstruation complex' was internal psychological processes. This was emphasised by attributing the other part of the girls' reactions to menstruation to unconscious early childhood phantasies and castration fears.

Therefore, Mary Chadwick painted a picture of female distress at a changing and bleeding body which brought girls no advantages but "many and painful humiliations and disadvantages."⁴⁴⁸ The adolescent girl was constituted in this discourse as intensely ashamed of her swelling breasts and growth of pubic hair; resentful of the loss of tom-boy habits; subjected to the sadistic manifestations of mothers' menstruation complex; hiding all signs of trouble rather than seeking information, advice, or assistance; suffering uncomfortable physical symptoms which limited her activities and uncomfortable feelings of inferiority; and as her first menstruation set "the seal of her

womanhood" having her cherished dreams of becoming a boy dealt a death-blow.⁴⁴⁹

For Karen Horney menstruation did not occupy such a distressing central role in girls' personality development during adolescence. Rather it was one factor in pubertal changes which could heighten neurotic troubles and character disturbances in personalities with an insecure foundation. For Horney puberty with its increasing sexual desires and libidinal tension was the stage at which childhood conflicts emerged as neurotic symptoms. The onset of these changes in females coincided "approximately with the beginning of menstruation." Although she wrote about "the psychic implications of menstruation",⁴⁵⁰ she did not elaborate on the impact for adolescent girls.⁴⁵¹ In her writing the onset of menstruation had more of the character of a marking event in female puberty rather than a dramatic discovery filled with shame and terror. However, she wrote of the "deeply barricaded infantile fears"⁴⁵² of menstruation in vulnerable girls with no mention of any positive counter balancing menstrual effects or commensurate processes in boys.

This was hardly a pretty picture of girls' development and their encounter with menstruation, and one more suited to a discourse of female inferiority than equality. Gone were any traces of women, or men, scientists' attempts to equate female and male sexual development: sexuality and reproduction were now firmly based on the biological 'differentness' of the sexes which as even Karen Horney argued supported the dominant position of men:

At any given time, the more powerful side will create an ideology suitable to help maintain its position and to make this position acceptable to the weaker one. In this ideology the differentness of the weaker one will be interpreted as inferiority, and it will be proven that these differences are unchangeable, basic, or God's will.⁴⁵³

This inter-war period saw the questions of menarche and menstruation taken up by the new psychology of the individual and its sub-discipline of child psychology, the developing practice of

psychoanalysis and the medical fields of preventive medicine and psychiatry. In the new psychology the questions about the onset of menstruation during puberty were concerned with normal and abnormal maturation, sexuality, femininity and social conformity. There was little discussion or comparison with boys whose sexual interest was constituted as of a different nature than girls and on the whole as less problematic. It was girls with their dramatically changing bodies and their procreative powers who held the attention of scientists. With the insertion of the biological concept of 'menarche' as a distinctive and therefore measurable event, the onset of menstruation - the menarche - became a biologically given *milestone* of female sexual maturity.

In general medical practice as well as adolescent obstetrics and gynaecology the questions about the onset of menstruation were concerned with physical habits, mental attitudes, general efficiency, and reproduction. There was little discussion of its debilitating effects, relationship to sexuality or 'heat', or male periodicity: these ideas were consigned to past history and lack of knowledge. It was no longer a matter of protecting girls from the rigours of mental or social over-stimulation but a matter of preventive medicine to lessen the physical disruption of menstruation and to increase young women's productivity as wives and mothers. The onset of menstruation and female puberty continued to be an important period in the sexual cycle of women and of momentous import to a patriarchal society. With the declining population and the concern with social welfare, the onset of menstruation continued to be a *critical* period which now required proper education in good physical and mental habits - it was a *hygiene* matter.

Concurrently, adult medicine and psychiatry were questioning the relationship of the menstrual cycle to women's pathology both functional and mental. With the discovery of hormones as well as the growing influence of a psychoanalysis fascinated with the relationship of the physical and psychic, a new space opened for a

specifically female physical process which manifests itself in women's psychological functions particularly the emotions and the family. With increasing evidence that the menstrual period itself had limited effects on the efficiency of a small number of women, a new psychic disease based on female sex hormones and incapacitating an increasingly 'large' number of women was described - *premenstrual tension*.

In the developing practice of psychoanalysis the questions about the onset of menstruation were concerned with its relationship to adult femininity, the ebb and flow of female sexual desire, unconscious processes, and neurotic symptoms. There was little discussion of social or cultural effects: the psychodynamics of the onset of menstruation were constituted as resulting from familial relationships particularly with the mother and deep infantile fears. It was girls with their suddenly bleeding bodies who experienced the fear of actual injury and damage, a loss of childhood and masculine possibilities, and the distress of the menstrual function. In the light of the physiological and medical research on sex hormones and sex differences, women's bodies and psyches were assumed to have an internally driven dynamic completely different from men. With the insertion of the anthropological concept of the universal menstrual taboo, the onset of menstruation became the *sign of womanhood* - associated with primitive and unconscious images of bleeding and birthing, terror and awe.

The inter-war years have been described by David Thomson as the "Age of Demolition".⁴⁵⁴ After the First World War in which a truly horrifying number of men were lost on the battlefield as well as through diseases of poverty and ill-health, there was a short "honeymoon" during which efforts were made to improve the health and welfare of men, women, and children. With the collapse of prosperity and the eclipse of democracy as well as the growing threat of fascism and war, the promise of a new world order must have looked increasingly hollow to an increasing number of people. In the human sciences, the

optimism of the new psychology and preventive medicine was juxtaposed with the declining birth rate, increasing concern with juvenile delinquency and maladjusted children, and psychoanalytic ideas of infantile terror and unconscious fears. In this space, the girl's sudden and bloody transformation from the innocence and promise of childhood to the problematic sexuality of adulthood became a symbol of the critical and important emergence of the procreative power of women. Menarche became for the scientist and the society the dramatic, critical but dreaded milestone and sign of womanhood: the girl's attainment of woman's sexuality, femininity and fertility.

THE POST-WAR YEARS: FAMILY IDEOLOGY, WELFARE FEMINISM, AND THE PSYCHOLOGY OF MENARCHE

With the end of the Second World War came a period of reconstruction. There was an attempt to build a better society on the ruins of the old through the planned economy, the welfare state, a growth in democracy and the rebuilding of 'traditional' family life. Although in Britain there was an increase in the birth rate by 1947, there was still concern that the population was too low to sustain the desired rate of economic growth and evolution. There was sufficient public concern for the government to set up a Royal Commission on Population which reported in 1949. Not only was there concern over the low birth rate, but also the "low levels of physical fitness in the population (and) a rising concern with psychological fitness."⁴⁵⁵

One solution adopted was to encourage women to have more children and to stay at home. In Britain this was done partly through improved welfare provision, but in addition various public bodies and figures stressed the importance of family life and motherhood. Beveridge spoke of the "vital work" performed by wives and mothers in "ensuring the adequate continuance of the British race and British ideals in the world."⁴⁵⁶ J.C. Spence, a leading paediatrician, wrote of the need to return to first principles in

family life stressing the importance of full-time motherhood.⁴⁵⁷ John Newsome advocated a separate school curriculum for girls based on domestic subjects.⁴⁵⁸ Academics as well as a range of medical and welfare workers condemned the effects on children of their mothers working. The British Ministry of Health actually closed day nurseries because they were 'bad' for children.

With the popularisation of Klein, Winnicott and Bowlby,⁴⁵⁹ there was a "remarkably pervasive climate of belief that well-adjusted people required to spend the bulk of their first five years in the company of their natural mothers."⁴⁶⁰ This belief was reflected in women's views on married women working. Government surveys in 1943 and 1947 indicated that the majority of women believed that women should not 'go out to work' (with or without children): in Britain 58% of women and in the United States 73%.⁴⁶¹ And after 1945 as women married, they left the labour market apparently "to start families."⁴⁶² In these post-war years the majority of women did marry and have children. They benefited from the public interest in a higher birth rate, increasing economic prosperity, more and better housing, and domestic technology. It was during this period that Western women escaped the "debilitating, physically heavy, drudgery that housework for centuries meant for women."⁴⁶³ Although older women had remained in the labour force, younger women only returned to work part-time as their children got older. The dominant cultural view of women was as carers and domestic labourers with men as the traditional economic providers. Even grand sociology theory⁴⁶⁴ was based on the family model with each sex by nature having its specialised role to play in society while psychology supported the ideal of 'creative, active motherhood'. Even through Margaret Mead warned against "this new and subtle form of anti-feminism",⁴⁶⁵ feminists largely concentrated on the private sphere and the needs of mothers: what has been called 'welfare feminism'.⁴⁶⁶ There was an assumed essential difference between men and women, as one feminist wrote: "reasonable modern feminism builds on the diversity of the

sexes, it is not crudely equalitarian."⁴⁶⁷

The 1950s saw a "reassertion of domesticity as never before"⁴⁶⁸ and the majority of women were relatively content with their new found prosperity. There were some grumbles about the isolation of new towns, housing estates, and suburbs but on the whole women were indifferent to feminism. There was a small but persistent number of women keeping alive some discontent about gender inequalities through a focus on equal opportunities and equal pay. British women campaigned for equal pay resulting in the limited victory of equal pay for women civil servants in 1955: however, the majority of working women both in part-time work and in the private sector were not included and did not press their case. Even the feminists Alva Myrdal and Viola Klein (1956),⁴⁶⁹ who reintroduced earlier feminist ideals of maternity leave, work training, day nurseries, and a shorter working week for men and women, did not challenge the conventional view of the family, the differences in the sexes, and the importance of motherhood. They confined their aim to "as wide a range of choices to women as possible" by suggesting that middle-class, professional women could both work and have a family, be career minded and feminine.⁴⁷⁰ The role for feminist organisations was very limited, even the politically aware were seduced by increasing prosperity and 'progress'. In the words of Marghanita Laski (1953): "I was born too late for the battle. Older and nobler women struggled that I should be free, and did their work so well that I've never even bothered about being bound. Rights for women, so far as my generation is concerned, is a dead issue."⁴⁷¹

In light of the post-war desire to build a more prosperous and democratic society, to rebuild the traditional family, and to consider 'The Woman Question' a dead issue, what concerns and questions were taken up in the psychology of menarche? Did the war years bring dramatic disruptions to previous psychological theories and practice, or were there continuities? What did the menarche come to symbolise for the scientists of the 1950s?

The immediate post-war period brought a dramatic and far reaching development in the psychology of menarche. With the publication of Dr. Helene Deutsch's (1944) The Psychology of Women, the onset of menstruation as *trauma*⁴⁷² was inserted into psychological discourse. A German physician and Freudian psychoanalyst who had been publishing on feminine psychology in the inter-war years, she had moved to the United States during the Nazi regime taking up posts as an Associate Psychiatrist in a Massachusetts hospital and a lecturer in the Boston Psychoanalytic Institute. Developing her earlier pre-war work on "the problems of feminine psychology" and "the Sexual Functions of Women", her focus in The Psychology of Women was "female instinctual development and its relation to the reproductive function."⁴⁷³ Although in her preface she acknowledged the criticisms of biological and anatomical explanations of psychological and behavioural sex differences,⁴⁷⁴ she held a basically essentialist and conservative view of women maintaining that:

the majority of women whom war has made more active than ever, will return as quickly and energetically as possible to the basically conservative because always dominant feminine experience, regardless of social and cultural upheavals...While we recognise the importance of social factors, we assume that certain feminine psychic manifestations are constant...The facade may change, but the feminine core remains unchanged throughout all storms.⁴⁷⁵

In The Psychology of Women, she argued that the most important event of puberty was menstruation attaching particular importance to the first menstruation. Using anthropological writings and Mary Chadwick's work, she constructed menstruation as an event of universal and essential psychological significance provoking deep anxieties of "being torn and dismembered internally" and "connected with ideas of horror, danger, shame, and sin" which were "impervious to the influence of civilisation."⁴⁷⁶ As the sign of female maturity it inevitably brought anxiety because "the approaching adulthood and sexuality are experienced as a threatening danger."⁴⁷⁷ Developing the concept of the 'female castration complex', she argued that puberty

reawakened the childhood 'genital trauma'⁴⁷⁸ bringing "anger, shame, depression, feelings of inferiority and guilt" to the fore. As menstruation in the girl's early childhood was associated with "cruelty, uncleanness, bad odours, and reactions of disgust", whatever the girl's preparation, the first menstruation was "experience as a trauma."⁴⁷⁹ This trauma then became a "decisive experience"⁴⁸⁰ in the process of a feminisation which was characterised by eroticism, passivity, and masochism. Its failure was associated with the 'active' woman suffering from the masculinity complex and/or homosexuality.

As well as echoing the traumas and horrors of the Second World War in a supposedly civilised Europe, these formulations of girlhood and womanhood found favour in societies constructing a 'traditional' family based on natural sex differences in which the female body and psyche were appropriately contained in the domestic sphere. In his forward to the book, Dr. Stanley Cobb, Professor of Neuropathology at Harvard University, praised Dr. Deutsch for the light she threw on "wayward schoolgirls" and "feminine psychology" especially the "role of emotion" and "intuition, 'the most striking characteristic of women.'" He described the book as "a great storehouse of knowledge" about women and important to "parents, teachers, authors, (and) psychiatrists."⁴⁸¹

Although the construction of menarche as trauma was a new development in post-war psychoanalytic theories of feminine psychological development, it was firmly based in inter-war psychological and medical concerns with female nature, sexuality and pathology as well as Victorian psychological questions about female puberty, femininity, periodicity and sexual desire. In an era of domestic reconstruction, Helene Deutsch's psychology of women and menstruation did not challenge early 20th century patriarchal discourses of the female body and nature. She re-produced menarche as a critical milestone and sign of womanhood, as a harbinger of

femininity, sexuality and fertility, adding menarche as universal *trauma* and *taboo*. (A grim addition to an already not very pretty picture.)

The 1950s saw no significant change in this basically conservative psychoanalytic theory of feminine psychology, menstruation and trauma. Phyllis Greenacre (1950)⁴⁸² developed the concept of prepuberty trauma as a "condensed form of acting out" in which a girl herself "became victimised by the trauma which she had precipitated" and then used as a defence against "the struggles of puberty" and adult sexuality.⁴⁸³ Therese Benedek (1952) researched women's "psychopathology related to the female reproductive functions." Her basic assumption was that "motivational forces originate in organic sources."⁴⁸⁴ Like Chadwick and Deutsch,⁴⁸⁵ she considered menarche to take "central place among all physiological events of puberty. It is as if menarche were a puberty-rite cast upon women by nature itself".⁴⁸⁶ Although she pointed out that menarche was not the literal sign of physiological sexual maturity,⁴⁸⁷ she considered it "the cornerstone of female development" which revealed "whether the adaptation to the sexual function will succeed or fail."⁴⁸⁸

It is interesting that Therese Benedek re-introduced ideas of periodicity and the sexual cycle. Using scientific research on hormones including Frank's (1931) and Israel's (1938) work on premenstrual tension, she proposed that "the gonadal cycle and the psychodynamic response pattern represent a psychosomatic unit - the sexual cycle."⁴⁸⁹ Arguing that "the gonadal hormones force the emotional processes of the adult women into regulated channels,"⁴⁹⁰ she constituted this female sexual cycle as "moods changes", "psychodynamic regression", "increased irritability", and "recurrent neuroses" from which "very few women are completely free".⁴⁹¹ It was as if the mysteries of women's psychology, behaviour, sexual desire, femininity, and fertility (and her position in the social world) could be discovered in the wonders of the ovum, progesterone (the

hormone of maturity), and oestrogen (the hormone of preparation). Women's psyche and position was once again firmly rooted in the body: a specifically female body liable to pathology, sexuality, and periodicity.

In child psychology there appeared to have been few influential developments or studies on girls and menstruation during the more immediate post-war years: 1945 to 1959. The only study from this period cited in later work⁴⁹² was one by Mary Jones and Paul Mussen (1958) on "Self-Conceptions, Motivations, and Inter-personal Attitudes of Early- and Late-Maturing Girls".⁴⁹³ This was a follow up study on girls replicating earlier research on boys,⁴⁹⁴ and was in the tradition of the work of Harold E. Jones (1940, 1943, 1949)⁴⁹⁵ and Calvin Stone and Roger Barker.⁴⁹⁶ I have traced two further articles on pre- and postmenarcheal girls: one by Helen Davidson and Lucille Gottlieb (1955)⁴⁹⁷ on emotional maturity and one by Wendell Smith and Elizabeth Powell (1956)⁴⁹⁸ on perceptual behaviour. All these articles were concerned about the effect of physical development on aspects of girls' social behaviour.

Davidson and Gottlieb were interested in "the relationship between sexual maturation and emotional maturity": the basic assumption was that physical development had a "direct bearing upon the adjustment of the individual."⁴⁹⁹ Menarche in itself was not an object of study: it was a convenient way of dividing girls into two categories of sexual maturation for comparison on scores for emotional maturity. Smith and Powell were interested in the "relationships between personality and perception": their basic assumption was that "heterosexual" drives and "body chemistry" would influence "his (*and her*) perceptions." Menarche was defined as "a sort of mid-point in the total pubertal phase of adolescent ... development"⁵⁰⁰ and again was a convenient way of dividing girls into categories. Jones and Mussen were interested in the effect of "the changing body" on "the changing self": their basic assumption was

that physical maturation directly effected adolescents self-concepts with early maturation carrying social "disadvantages for girls."⁵⁰¹ They did not even mention menarche or menstruation, but established physical maturity by X-rays of the wrists and hands.

These studies were not interested in menarche or menstruation as either an object of study or an effect on adolescent girls. The focus was on the effects of 'normal'⁵⁰² girls' physical development (and attractiveness) on their social adjustment and social acceptability. Menarche became a marker on a developmental scale, or even disappeared altogether. It is difficult to suggest why menstruation came to play so little part in child psychology of the 1950s without a more detailed study of material published, psychologists in post, and research funded at the time. The work of Paul Mussen and Mary Jones (1957) suggests that adolescent boys took precedence over girls. There appears to have been a growing concern about male sexuality and delinquency⁵⁰³ while girls were considered "the backbone of conservatism, a steadying influence, upholding the sameness of tradition".⁵⁰⁴ At the same time women's general turn to domesticity and procreation may have brought a decline in concern about and research funding in women's nature and role. With the decline in feminism and fewer women under-graduates and post-graduates than in the 1920s,⁵⁰⁵ there would have been fewer women scientists with an interest in feminist or women's issues including menstruation.

FROM THE 1960s: SECOND WAVE FEMINISM AND THE MENARCHEAL GIRL

It was not until the early 1960s that a glimmer of changes in the psychology of menarche began to appear in both psychoanalytic and adolescent psychology. By this time there had been a real increase in prosperity and the population in conjunction with what was seen as a rise of "mass culture and national homogenisation."⁵⁰⁶ Adults suddenly appeared to be faced with an 'explosive' mass of precocious, healthy and potentially dangerous (male) adolescents: there were no

longer too few but too many. The younger generation were viewed as obtaining "early...maturity as lovers, consumers, (and) committee-men" who were either blandly "pliable and adjusted" or "delinquent".⁵⁰⁷ In the face of McCarthyism and the very real danger of atomic annihilation as well as the memories of Fascism and the Holocaust, the post-war promise looked in danger if a "bureaucratic and equalitarian society" was producing a "peer-oriented culture" which made young men both "more vulnerable than their predecessors" and a "morally and culturally impoverished...*Lumpenproletariat*".⁵⁰⁸

This fear among Western particularly North American elites and public leaders of the growing mass of (male) youth was voiced in various ways. Academics and intellectuals decried adolescents' retreat into sexuality, consumerism, and conformity while politicians and public leaders warned of male juvenile homosexuality and delinquency. In a culture which increasingly turned to the human sciences and professions for practices to discipline and regulate the population, these fears opened the space for a psychoanalytic discourse and practice concerned with sexuality, adolescence, and ego psychology.

As adolescence was now being seen as "not simply a physical process (with) more to it than sexual maturation,"⁵⁰⁹ a purely biological explanation was no longer sufficient. Neither did the more 'scientific' sociology and traditional psychology theorise either the individual adolescent's sexuality or their unsocialised drives. With psychoanalysis's long standing interest in "the prominent periods in the development of sexuality, namely, early childhood and puberty" as well as their "physiological functions",⁵¹⁰ it was a discursive practice in which the sexual desire, instinctual drives and sensual body of the 'individual'⁵¹¹ adolescent could be discussed and treated. In addition psychoanalytic research and literature in the 1960s began to use the methods of traditional psychology by including normal subjects and survey methods. This enabled its practitioners to argue that "a much broader

conception...has become an important part of psychoanalytic thinking"⁵¹² so that it was applicable to 'normal' as well as problematic adolescents and, therefore, could claim public and institutional space for its work.

In this psychoanalytic literature, menarche reappeared as a subject of psychological discourse, but as a different object. In Peter Blos's widely read On Adolescence: A Psychoanalytic Interpretation, it was discussed briefly as part of girls' physical development which "signals that the maturation of the reproductive organs is underway but is by no means complete."⁵¹³ Otherwise, he focused on ego development, drive organisation, and sex appropriate identity with little reference to the menstrual cycle. Although girls' (and boys') sexuality was explicitly discussed with menarche being presented as the time when girls gave up "the manipulation of the clitoris" for phallic sexuality,⁵¹⁴ there was no reference to menarche as psychic trauma, universal taboo, or the sign of fertility. The primary concern appears to have been the regulation of adolescents' sexual and social behaviour rather than an understanding of its instinctual or unconscious aspects. In the case of boys, the goal was to prevent delinquency, arrested development, and homosexuality; and in girls, to prevent family breakdown, anti-social behaviour, and sexual 'waywardness'.

The fact that the majority of adults married and had children in conjunction with an increased scientific understanding of reproduction appears to have contributed to a shift in psychological interest from adolescent girls' sexual cycle and fertility to their sexual activity. With women's sexuality discursively positioned within heterosexual marriage and a "feminine passivity",⁵¹⁵ the problems for an ego oriented adolescent psychology would be inappropriate female sexual activity and male heterosexual failure rather than the unconscious trauma or universal taboo of the onset of menstruation and fertility. Within this largely male and individualistic discursive practice, the prevalence of a "devaluating

and defensively belittling attitude toward the female (which) often persists as a lifelong contemptuous attitude toward the female sex"⁵¹⁶ was attributed to women's lack of the highly valued penis rather than patriarchal social structures or fears surrounding feminine fertility.

It was this contradiction between these explicit 'devaluating', 'belittling' attitudes towards women and the post-war promise that domesticity and motherhood would give women an 'improved' social position that helped create the conditions for challenges to the dominant discursive practices of post-war femininity.⁵¹⁷ Although the increasing prosperity and democracy had improved material conditions and increased enfranchisement, it still had not guaranteed equality for women, the poor, and minorities⁵¹⁸ nor apparently had it brought a sense of social liberation or personal esteem to women.⁵¹⁹

Women's growing dissatisfaction with this devaluation of women was evident in two of the most influential studies on menarche and menstruation of this period. These studies written by women in psychoanalytic practice were driven by a dissatisfaction with dominant theories which devalued the female body: Judith Kestenberg (1964)⁵²⁰ argued against the negative effects of menstruation on female psychology and Natalie Shainess (1961)⁵²¹ challenged the view of the male body as the norm and the female body as lacking. The failure of post-war prosperity and domesticity to give women equal social power and value in conjunction with a renewed interest in sexuality and adolescents opened the door for a re-evaluation of the psychology of women and menstruation.

For Judith Kestenberg this re-evaluation did not take the form of a direct challenge to the underlying theories and practices of a psychoanalysis in which sexuality was biologically determined, femininity was associated with masochism, and menarche initiated a "critical period in the girl's life." Rather she specifically disagreed with the earlier psychoanalytic and anthropological casting of menarche as a "traumata within the female castration complex" or

"dangerous traumatic event".⁵²² On the basis of case studies, she argued that "menarche did not constitute...a traumatic event"⁵²³ but was a positive influence on girls' behaviour, communication, group identity, ego ideal of growing up, and identification with their mothers.

Comparing the effects of menstruation on girls with the effects of erections and ejaculations on boys, she even argued that the regularity of menstruation and specificity of menstrual pain meant that puberty had a greater stabilising benefit for girls than boys. Although her writing re-produced sex differences in which boys were superior in mathematics and science while girls were good in language skills and "fine feeling for literature and...art",⁵²⁴ her re-constitution of menarche and menstruation as positive factors in female psychology and behaviour raised questions about the pathological and traumatic nature of the female menstrual cycle.

In contrast Natalie Shainess's re-evaluation of femininity was a direct challenge to the phallo-centric concept of female sexuality which viewed "the male body as the prototype of humanity and considered the female as defective or lacking."⁵²⁵ Arguing that feminine penis envy, masculinity complexes, masochism, and passivity were the result of female underprivilege and dependency and not the lack of the masculine organ, she re-constituted feminine sexuality as the result of family interaction and culture.

Casting the onset of menstruation as an object which revealed women's "attitudes...to feminine sexuality,"⁵²⁶ she gathered information on women's menstrual attitudes and history using traditional psychological survey techniques with a large sample population. Her results showed that women had a range of experiences at menarche from very positive to very negative depending on their preparation and their mother's reaction. Using this data she was able to relate menarcheal experience to subsequent menstrual events and attitudes. She argued that negative menarcheal experiences contributed to subsequent menstrual distress: this potentially made

girls' menarcheal experience an important subject for study and intervention. With the continuing inability of medical science to adequately explain or treat menstrual distress particularly 'premenstrual tension', a gap was left for just such a non-biological explanation of menstrual problems. By conducting a 'scientific' study which showed women with positive menarcheal experiences and without menstrual symptoms, Shainess could argue for a social explanation of women's sexuality and menstrual pathology rather than an instinctual one based on "anxiety over infantile masturbation"⁵²⁷ or the lack of the penis. This use of traditional psychological methods by psychoanalysts had another effect: it opened the possibility of psychoanalytic knowledge being appropriated by child psychology.

Shainess's challenge to phallo-centric psychoanalytic concepts presented the following alternative views of feminine psychology:

- i) feminine development as the result of a complex interaction of the girl, significant others especially the mother, and the culture,
- ii) the onset of menstruation as a 'nodal' experience for self-concept, feminine self-acceptance, and menstrual affects, and
- iii) women's psyche as open to scientific enquiry. Although this discursive practice re-produced menarche as a sign of female fertility because it "heralds the possibility of motherhood",⁵²⁸ it became a different object. Menarche changed from being a psychic wound grounded in a biological defect and revealed through case material to an influential object for female self-concept, emotions, and menstrual experience shaped by culture and studied by scientific methods. It was now both important and possible to question women's and girls' menstrual knowledge, attitudes, and history using psychoanalytic theory and psychological methodology.

This possibility was taken up in 1975 by two assistant professors of clinical psychiatry, Lynn Whisnant and Leonard Zegans, who published an influential study on white American adolescent girls' attitudes to menarche. Presenting menarche as a "crucial time

in a girl's physiological, psychological, and social development,"⁵²⁹ they constituted it as an important topic for psychiatric theory and practice. In terms of theory, their enquiry was a continuation of psychoanalytic questions about the nature of feminine sexuality and experience: the questions of whether menarche was the traumatic event suggested by Deutsch, the positive organising event suggested by Kestenberg, or the attitude revealing event suggested by Shainess. Their conclusions that menarche was "an affectively charged event related to (girls') emerging identity as an adult woman" and "a disturbing event"⁵³⁰ did not challenge the dominant discourses of menarche as a sign of womanhood, a primarily negative experience, a crucial milestone in feminine development, and an important event for psychiatric practice.

However, they did not attribute the disturbance of menarche to either girls' lack of information or unconscious trauma, but to social responses to menarche. They claimed that the culture treated it as "hygienic crisis" and "sickness" rather than as a "maturational crisis", and ignored "the affective importance of menarche" with mothers not responding to daughters' "need for working through the experience". This presentation of menarcheal disturbance as due to inappropriate treatment of an emotional function re-formulated menarche as an event for deliberate psychological and social invention, and as an object of research. Through their use of interview techniques with a sample of normal girls, they demonstrated that "the significant emotional responses of girls to the experience of puberty are accessible for study...in a nonclinical setting."⁵³¹ They concluded their study with a call for "a data base of empirical observations in order to develop a rational basis for meeting the psychological needs of the young adolescent girl"⁵³² and educators and parents who "puzzle how best to help a girl deal with this happening".⁵³³

At this juncture, menarche re-emerged from psychoanalytic practice to become once again a psychological subject of research and

a psychiatric object of practice. It is interesting that menarche re-emerged in the psychological literature at this point: there had been a paucity of published studies and a hiatus in developments in the psychology of menarche in child psychology and psychoanalysis in particular but in other disciplines as well for over 10 years. This is intriguing especially considering the rise of the women's movement and the second wave of feminism from 1968.⁵³⁴

Once again as this part of my thesis is only a brief history of the psychology of menarche, I can only speculate on the reasons for this lack of publications and developments during this period. Perhaps in the 1960's as in the 1950s, there were few professional incentives for a largely male dominated psychology to research adolescent girls' menarche. Although boys' behaviour and sexuality had become a concern for the predominantly male policy makers, girls' behaviour and sexuality had not. Therefore, as neither girls' behaviour nor their fertility were socially problematic, they were not seen as subjects of research or regulation. So at its simplest, there just may not have been the research grants, professional appointments, academic status, or personal interest for men psychologists to research adolescent girls and menarche.

But women psychologists were not doing this research either, and as we have seen, it has often been women and feminist researchers and psychologists who have researched girls and the menstrual cycle. Like the men, it appears that women and feminist psychologists in this period did not have the professional positions, support, or interest necessary to do research on adolescent girls or to get it published⁵³⁵ - but for different reasons than men. Evidently, much of academic women's efforts were being expended in attempting to secure "rights equal to those of men in academic position and preferment"⁵³⁶ so that most women were engaged in the fight to gain admittance to the male dominated culture, not the fight to change patriarchal theories of the female body as inferior 'other'.⁵³⁷ The onset of menstruation was neither a pressing or prestigious social or academic

issue. There was no place for girls' experiences of menarche in male dominated disciplines or careers concerned with institutional position and status, and I suggest this was compounded by the low numbers of women and feminist psychologists in full-time or secure academic posts. There just were not sufficient psychologists with the position or interest to pursue what was a marginal, low status 'woman's' topic, even if it was a potentially feminist subject. The few women who might have been interested were drawn into a more pressing issue for professional women attempting to achieve equal opportunities - 'the premenstrual syndrome'. While interest in the onset of menstruation and adolescent girls languished in the 1960s, there was a resurgence of research publications on the pathology of the reproductive and menstrual cycle, in particular 'the premenstrual syndrome'.

Once again it was being proclaimed that women's minds, moods, and behaviour were negatively effected by their reproductive and menstrual cycle with numerous women 'proved' to be suffering from postnatal depression, menopausal deficiency, but especially premenstrual symptoms. For institutions attempting to hold off the demands of women for equal access, this was one answer to the women's movement: scientific proof that women's "raging hormonal cycles make them emotionally unstable and intellectually unreliable",⁵³⁸ even down right dangerous.⁵³⁹ In this way women's second-class status in a prosperous and democratic society could be attributed to their nature, not discrimination. And for psychiatry and medicine, there was the possibility of further practice. As 'premenstrual syndrome' and other disorders of the menstrual cycle were based on biology but affected moods and behaviour, there was increased scope for both medical and psychiatric treatment and research.

Unlike the onset of menstruation, the issue of 'premenstrual syndrome' was both a pressing and prestigious social and academic matter. There was space and support for research into women's menstrual and reproductive pathology in male dominated disciplines

and careers, especially in medicine and psychiatry. As the modern object *par excellence* of a female pathology which supported the subordination of women, 'the premenstrual syndrome' attracted the interest of men and women, including feminist critiques and research,⁵⁴⁰ both inside and outside of academic institutions in a way that adolescent girls' menarche did not.

THE RE-EMERGENCE OF THE MENARCHEAL GIRL: FEMINISM AND PSYCHOLOGY

So why did research on menarche begin to re-emerge in the psychology of the later 1970s? What was happening in psychology and the human sciences? What was the role of women and feminism in society and science?

In the mid-1970s there were a number of developments in the psychology of women and menstruation as a result of both the women's movement and the scientific interest in the female body which opened the space for the emergence of a psychology of menarche. On the one hand, the resurgence of scientific interest in women's menstrual cycle was productive of more than just 'the premenstrual syndrome': it had a contradictory effect. The dissemination of ideas about a medical condition with a psychological component peculiar to menstruating women re-produced women as inherently pathological beings and re-enforced their subordination. However, at the same time, it made possible non-biological and non-deterministic explanations of and research on women's menstrual experience. For although women's bodies were still viewed as given by nature and therefore unchangeable, alternative explanations of and possibilities for women's psychology were emerging.

In psychoanalytic theory, the effects of childhood experiences and conscious processes on adult psychology had come into the foreground. In child psychology, socialisation and learning had become at least as important as inherited characteristics in explaining human growth and development. In traditional psychology, there was an increasing interest in cognitive theories as well as a

turn to "new paradigm research"⁵⁴¹ and a more humanistic psychology.⁵⁴² The emergence of these alternative explanations of human mind and behaviour were as applicable to a psychology of women as to other psychological subjects. If a woman's childhood experiences, socialisation, learning, cognitions and self-concept could be changed, then her adult mind and behaviour would be different. In this case, girls' childhood experiences of and learning about menstruation could be construed as important determinants of adult women's menstrual experiences and self-concept, and as important research topics for psychological disciplines, particularly psychiatry with its interest in menstrual pathology and child psychology with its interest in the physical and psychological development of adolescents.

On the other hand, women's greater participation in public life and the growth of feminism resulted in an increasing interest in women and psychology. In the United States in 1975, the Annual Review of Psychology published its first chapter on "The Psychology of Women"⁵⁴³ and a division of the Psychology of Women was formed as a new subunit within the American Psychological Association. In the same year a number of new feminist journals appeared publishing material on psychology and menstruation.⁵⁴⁴ These developments lead one woman psychologist, Mary Brown Parlee, to write that: "Women, at least as a topic of research, are unlikely to ever again to be excluded with the same efficient thoroughness as they have in the past."⁵⁴⁵

Feeding into these developments of women's issues in academic and professional psychology were emerging radical feminist theories. In the late 1960s a radical strand of feminism had begun to emerge,⁵⁴⁶ with radical feminist issues including reproduction and sexuality becoming discernible by the mid-1970s.⁵⁴⁷ This was reflected in the publication of two radical feminist books on the menstrual cycle: Menstruation and Menopause: The Physiology and Psychology, The Myth and Reality⁵⁴⁸ (1975) and The Curse: A Cultural History of

Menstruation⁵⁴⁹ (1976). Although in many aspects these books uncritically re-produce dominant discourses of menstruation⁵⁵⁰ as 'universal taboo' and 'the sign and symbol of womanhood', the radical feminist focus on patriarchal "control over reproduction, sexuality and violence against women"⁵⁵¹ brought into the foreground the cultural devaluation of the menstrual process and the 'silence' about menstrual matters in the everyday discourse of women and men. As part of the women's movement, radical feminism was one aspect of the growing interest in women's politics, body and psychology: an interest described optimistically in 1975 by Jean Baker Miller as "a new spirit abroad among women today, a new kind of collective and co-operative devotion to each other and to the search for knowledge about important matters."⁵⁵²

This 'search for knowledge' was underpinned by a growing participation of women in the production of knowledge both inside and outside of formal institutions.⁵⁵³ Throughout the 1970s the women's movement created a forum and a market for knowledge about women and feminism through both the formation of formal associations and publications, and informal conferences and publishing groups. Women continued to enter the public domain so that by the 1980s significantly more women had entered the professions, even though they continued to be "excluded from higher earning occupations" and positions.⁵⁵⁴

I am not arguing that these conditions directly brought about the particular research that began on adolescent girls and menstruation in the later 1970s. But I am arguing that these historical developments were part of the conditions for making possible the re-emergence of psychological research on adolescent girls and menarche. Women's sexuality and reproductive cycle as well as their menstrual cycle and experiences became important issues for women (and men) inside and outside of institutions and academic disciplines. It was now possible and relevant to ask questions about

girl's psychological development, self-concepts and menstrual experiences.

As we have seen these questions first emerged in the psychiatric literature, in part because of its interest in the psychopathology of women's reproductive and menstrual cycle. However, psychiatry did not go on to be the discipline that discusses either normal girls' experiences of menarche or its effects on their self-concepts or even their subsequent menstrual events. Instead, psychiatry became the place where the psychopathology of menarche is discussed. Of the 34 journal articles on menarche published from 1990 to 1993, eleven (32%) were based in psychiatry and they were done on small clinical samples with menarche constituted as the trigger for girls' illnesses - it causes psychosis, bulimia, anorexia. Once again the onset of menstruation is a psychological wound grounded in the pathological female body, revealed through case studies and treated by psychiatry.

It was not inevitable that menarche should become such an object in psychiatry. Psychiatry has done more traditional psychological research into normal girls' emotional and social experiences as we have seen, and it has developed more critical and cultural analysis of personal disturbance and psyche formation. Although it is outside the scope of this study to determine why menarche is discussed in this specific way, the current literature on 'premenstrual syndrome' suggests that institutional psychiatry is a discursive practice dominated by patriarchal medical theories and by men. If this is the case, then there would be very little institutional space or support for critical, cultural or feminist conceptions of female psychology and menstrual experiences.

The other discipline in which research on menarche emerged was child psychology: this was marked by the publication of "Young Adolescents' Beliefs concerning Menstruation" by Anne Clarke and Diane Ruble (1978). As in psychiatry, this research arose in part because of the interest in women's menstrual pathology. Clarke and

Ruble's opening statement - "Girls' early experience of menstruation is assumed to have major implications for their adult experience of menstruation"⁵⁵⁵ - firmly placed their research within these debates. But it was the focus on the effects of puberty on the psychology and behaviour of 'normal' adolescent girls and the use of traditional psychological methodology by academic psychologists which positioned this research in the discipline of child psychology.

From its emergence as a discipline, child psychology has been formulated around: the relationship between the body, the mind and the behaviour of the 'normal' developing child; childhood experiences and adult personality; and academic research and professional practice.⁵⁵⁶ Although it claims to be a discipline distinct from sociology on the one hand and biology on the other, it is a discipline predicated on the nature-given body, locked into an organism/environment dependence, and formulated as a positivistic science. Girls, their bodies, and their sexuality have always been subjects of this research and practice, and women have been active in the field. It was in this discipline that the relationship between the onset of menstruation, the mental life and the behaviour of girls could be researched using traditional psychology theory and methods.

Another influence on the emergence of this psychological research on menarche was the women's movement. Women were increasingly seeking entry to the academy and professions, and they were increasingly drawn to women's and feminist issues for professional and political reasons. Girls' experiences of menstruation presented an opportunity for feminist psychologists to do current and relevant research on a relatively neglected area of women's psychology - the effects of girlhood experiences of menstruation on women's menstrual pathology. Although not stated as such I suggest that Anne Clarke and Diane Ruble's original research was just such a pro-feminist project: they argued that negative cultural beliefs about menstruation caused many of women's negative menstrual experiences, rather than women's inherently faulty bodies. And in their

subsequent influential 1980s research on the experience of menarche,⁵⁵⁷ Diane Ruble and Jeanne Brooks-Gunn challenged the more negative conceptions of menarche as a universal taboo and unconscious trauma associated with female secretiveness and mothers' menstrual complexes.

It was through the conjunction of these interests - those of traditional child psychology and the women's movement - that child psychology emerged as the modern discipline to discuss normal girls' psychological experiences of menarche. Of the 34 journal articles on menarche published from 1990 to 1993, thirteen (38%) were based in child psychology.⁵⁵⁸ However this originally feminist project (of challenging negative concepts of menstruation and by association of women) has become a psychological discourse which largely re-produces the dominant theories of menarche as a crucial event in girls' psychosexual development which causes pathology and requires intervention.

How has this come about especially considering the conclusions of the influential research of Anne Clarke, Diane Ruble, and Jeanne Brooks-Gunn? In their complex and large scale studies they concluded that: girls did not react strongly to menarche, they were not as secretive about menstruation as suggested, girls discussed menstruation with their mothers, and at least some girls even had positive feelings about menarche! It was on the basis of such research findings that feminists as psychologists could attribute women's menstrual (and by implication other) experiences to cultural and social factors which could be changed, rather than biological or instinctual drives which could not. As Clarke and Ruble commented: "In conclusion, these results suggest that physiological explanations of "menstrual distress" may be overemphasised".⁵⁵⁹ And Ruble and Brooks-Gunn wrote: "In summary, the development of menstrual attitudes and behaviour is a complex interplay of cultural beliefs, socialisation factors, and actual experience."⁵⁶⁰

I consider that this 1990's psychological re-production of menarche as 'taboo' and 'sign and symbol of womanhood' has been in part brought about by the deployment of traditional psychological theory and practice by feminist psychologists. It is not their intentions but their methodology that has been problematic. On the one hand, they have been trying as it were to clean up menstruation's image and lessen its negative impact on women's lives while at the same time trying to justify women's menstruation as an important object of research, funding and publication. They too have had professional careers to maintain and advance. The solution has been to constitute menarche as a "transition point...a change in self-identity...a concrete symbol of a shift from girl to woman"⁵⁶¹ which has important influences on women's menstrual pathology and therefore has implications for medical, psychological and educational practice. It has become a subject which can be researched by traditional psychological methods, and as there is no commensurate event in male development, girls are the research subjects. This approach brings a number of advantages for egalitarian feminists: girls move from the background of psychology to the foreground, an area of psychological research opens specifically for women academics, and applications can be made for research funds.

However, this approach has brought difficulties for feminists because it re-produces menarche as a critical event with pathological potential and girls as a problem about which male/s/cience have little to say and nothing to do. By the common research practice of referring to previous literature in this case going back to the 1930s and 1940s, menarche has been re-inscribed as a critical milestone, symbol of womanhood and fertility, universal taboo, and psychic trauma. And by doing the research primarily with girls, by default girls' beliefs and behaviours have become the problem to be solved, not the beliefs and behaviours of the culture, science, or men. It is girls who need help to "cope with menstruation,"⁵⁶² not the dominant practices which need to be changed.

In spite of the original feminist intentions, the psychology of menarche which has developed from the early 1980s has re-constituted the onset of menstruation as a primarily negative event in female development. It is a "landmark in sexual development of the female unmatched by a comparable event in the pubescent male..." "sign and symbol of womanhood"⁵⁶³, "menarche is unique"⁵⁶⁴, "taboos...this dramatic event"⁵⁶⁵ and "the signal event unique to female puberty...the symbolic meaning (being) reproductive capability and forthcoming adult female roles". Psychologists claim "there is very little substantive research about the actual impact of menarche on the psychological life of young girls,"⁵⁶⁶ and call for further research to "inform the work of health educators and practitioners as well as developmental psychologists and psychobiologists"⁵⁶⁷ and to assist "parents, teachers, guidance counsellors, nurses, psychologists and psychiatrists...to help girls through the normal developmental stresses of menarche."⁵⁶⁸

I am not claiming that this psychological research into girls' experiences of menarche does not produce significant findings or identify important practices, it does. But I am claiming that both traditional psychological theory and equalitarian or woman centred feminist psychological approaches are limited in their power to explain these findings and to challenge the dominant patriarchal/scientific practices surrounding menstruation.

Menarche *is* a landmark in the sexual development of the female unmatched by a comparable event in the pubescent male. But this is not because of the physiology of the female body unmediated by culture as assumed by traditional child psychology theory or essentialist feminist theory, or even because girls view it that way. It is an important developmental event because it has specifically and historically been constructed as such by patriarchal science. There is no comparable event in the literature of the pubescent male. But this is not because of the physiology of the male body or even the experiences of adolescent boys. This is because in the human

sciences, male sexual development and the pubertal experience has not been an object of interest, pathology, or professional practice. For example: In the human sciences literature, out of a large number of current articles on boys, there is only one on "Boys' experiences of pubertal change"⁵⁶⁹ and it is in the medical sciences. In the medical sciences there is a specialism in female reproductive functions, gynaecology, but there is no such specialism in male reproductive functions.⁵⁷⁰

This is not to say that menarche is not problematic for girls - it *is*. The findings in the psychology of menarche repeatedly reveal that many girls are still poorly prepared with some still unprepared for the onset of menstruation, most girls have negative attitudes about menstruation which increase with age, and the majority find menstruation embarrassing, but the reason for girls' difficulties is not just in their minds or their bodies. For although most psychologists especially feminists include the cultural and social aspects of girls' experience of menarche in their discussions, in practice their research is about what goes on 'inside' the minds of normal 'individual' girls - their knowledge, attitudes, beliefs, expectations, and reported responses - and what goes on in their bodies - the timing of menarche and menstrual symptomatology. As I have discussed in Part I, traditional psychological theory does not tell us about the specific social, cultural, or historical aspects of menarcheal practice or girls' subjectivity. It does not substantially explain girls' experience of menarche, or why their attitudes to menstruation are so negative, or why menstruation is so embarrassing for girls. At its simplest, there are no studies with fathers, teachers, psychologists or other powerful groups, and few with mothers or boys.

Psychologists and feminists often acknowledge the limitations of current literature both to address the social aspects of menstrual practices and to reveal girls' menarcheal experiences, for example, "There is very little substantive research about the actual impact of

menarche on the psychological life of young girls"⁵⁷¹ and "girls are...highly sensitive to body change, with its...interpersonal, and cultural meanings."⁵⁷² The solutions offered to these limitations tend to be two fold: One is to do more psychological research on girls and menstruation because it is argued little has been done. The other is to lift the veil of "silence about menstruation (which) has blurred communication between mother and daughter, teacher and pupil, sister and sister,"⁵⁷³ and it is argued made menstruation difficult to talk about and research.

These suggestions do touch on important issues: there is less published research on menarche than there is on menstrual pathology, and adolescents both girls and boys and their parents find it difficult and embarrassing to discuss menstruation. But I consider that just more research and discussion will not necessarily address the devaluation of menstruation or the 'silence' of women and men about menstruation in everyday life. What these suggestions do not address are the issues of social or power relations both scientific and patriarchal which regulate and discipline the bodies and experiences of both psychology's subjects and practitioners. Even more I suggest that science has not and does not ignore girls' menarche or women's menstruation but that it has talked endlessly about it. And women (and men) have not been and are not 'silent' about menstruation but that they are only able to talk about it in certain ways. It is not that there has been no talk and no interest, but that patriarchal and scientific discursive practices have regulated what can and cannot be said about menstruation and by whom and where in order to discipline the female body and psyche.

Let me illustrate what I mean by two examples: one from anthropology and one from medicine. In the Anthropology Department of the University of California there is a Folklore Archive with a file on American Menstruation Folkspeech in which a "total of 128 euphemisms" for menstruation were found for a study on "American Menstrual Expressions".⁵⁷⁴ On the basis of this study as well as

research done in 1948,⁵⁷⁵ 1954,⁵⁷⁶ and 1963,⁵⁷⁷ the author documented the "wide variety of euphemisms for menstruation". As she explained, the use of euphemisms especially negative ones is a way to maintain and reinforce cultural practices. In the case of women, such menstrual euphemisms, usually negative, reinforce women's "social inferiority."⁵⁷⁸ This is not silence about menstruation in everyday conversation, but patriarchal talk meant to put and keep women in their place. Neither is this science ignoring women's menstruation. Not only does the above study illustrate anthropologists continuing interest in menstruation, but they (mostly men) have discussed menstruation in their journals, conferences, lectures, and books since anthropology's formation as a discipline. And it is the discipline that made possible the concept of the universal menstrual taboo. It is not that anthropologists have ignored menstruation, but that they have talked about it as 'taboo', 'euphemisms', and 'pollution' and in places such as universities, conferences and journals. It is by this institutional practice shaped by a patriarchal society that: anthropologists have become experts in commonfolks' talk about menstruation, menstruation has become 'taboo' and 'pollution', and women have become 'other'.

In relation to medical science, I have often heard it said that medicine ignores women's health problems and menstrual cycle with even less attention being given to adolescent girls' and the onset of menstruation. I don't deny that this may be the experience of women at the hands of their doctors and that medical science may ignore aspects of women's health, but medicine as a science and profession has never ignored or been silent about women's bodies and menstruation. As we have seen, medical practitioners have repeatedly and continuously talked and written about the effects of menstruation on girls and women since at least the 1800s. And it has been this powerful patriarchal medical discourse that has to a large extent shaped what can and cannot be said about menstruation and by whom and where, largely to the advantage of men and the medical professional.

As a result of the dominance of medical discourse, it is the problems and difficulties of menstruation that can be talked about - not the advantages, pleasures, or even women's experiences of menstruation. It is to primarily male physicians that women as patients are to talk about menstruation, and in the clinic or surgery.⁵⁷⁹ Menstruation is not to be talked about in families or between friends at home, at leisure, or at work.

This patriarchal medical practice is made explicit in an article on the "Principals of Adolescent Gynaecology" in which the "psychologic stresses", the "menstrual dysfunctions", and the bodies of menarcheal girls are endlessly discussed, categorised, diagnosed, and treated.⁵⁸⁰ Here menstrual dysfunctions are presented as "by far the most common reasons for girls to visit physicians".⁵⁸¹ It is doctors who make recommendations about girls going swimming and using vaginal deodorant aerosol sprays. It is even doctors who "mothers frequently ask whether their adolescent daughters should use menstrual tampons" and who even "instruct her (the girl) how to (insert them)." And not even for her comfort or convenience but "because they dilate the hymenal orifice, making vaginal examination less uncomfortable!"⁵⁸² It is the doctor who discusses the workings of the female body, and it is the doctor who reveals the female body. It is not mothers or sisters who discuss the experiences of menstruation or who demonstrate the workings of the female body. It is as if women's knowledge, practice, and even their very bodies have been appropriated by medical science and its practitioners. Medicine has not ignored or been silent about girls' menarche: it has made the onset of menstruation into a medical condition, physicians into experts in menstrual dysfunctions, hygiene, and even education, and women's bodies into objects of medical science and practice. (See the photograph below from John W. Huffman (1975) "Principals of Adolescent Gynecology", p. 297.)



Fig. 6. The presence of normal secondary sexual characteristics and a feminine habitus give no hint that a patient such as the one shown here has agenesis of the vagina and uterus.

IN CONCLUSION

This analysis in Part II of my thesis has revealed that since its emergence as a discipline under the guiding hand of its 'father', G. Stanley Hall, child psychology has constituted the adolescent girl as subject to the sudden transformation of her body by the onset of puberty and menstruation. This dramatic onset of menstruation has been the biopsychic event in the young woman's life imbued with potential trauma and pathology, surrounded by cultural taboos and necessitating regulation and intervention. Since the insertion of menarche into psychological discourse in the 1930s, this object has played its part in the formulation of the female psyche as the biological milestone in feminine development, a hygiene crisis, the sign of womanhood, the symbol of fertility, a psychic trauma and the

signal event unmatched by any commensurate event in the adolescent male. The pre- and postmenarcheal girl has brought numerous pedagogic, medical and psychological problems to be solved by ever more research, education and intervention particularly focused on the 'individual' girl while boys and men escape attention. They are not seen as having similar problems. They are not even seen as being part of girls' problems.

I have learned through this analysis that the theories and research findings of the present psychology of menarche have not arisen from the transparent nature of girls' bodies or psyches. They have not even necessarily reflected girls' experiences. Rather they are the result of specific historic patriarchal and scientific discourses of the female body and menstruation. The present psychology of menarche even as a feminist project has been no exception. Although the intent has been progressive, its reliance on traditional psychological theory has implicated much of this psychological practice in the disciplining and regulation of the female adolescent, in particular her sexuality, femininity and fertility. Rather than theorising a girl's subjectivity as constituted in the social through discourses, practices and power relations, the 'secrets' of the girl's femininity and sexuality have been assumed to be 'inside' her mind and body.

My original questions in Part I about whether puberty and menarche result in girls having higher or lower self-esteem, how puberty and menarche affects girls' motivations and ambitions, whether they become more stereotypically feminine or not, and what girls' attitudes are pre- and postmenarche to menstruation are part of this traditional psychological discourse. This discourse (and my questions) constitutes the pre- and postmenarcheal girl as a unitary and autonomous individual whose truth is to be found inside her 'self' through the application of psychological technologies - the questionnaire, the inventory, the semantic differential and the interview. The way in which the girl's subjectivity is constituted

in the complex and contradictory social world through power relations is not theorised or addressed.

My change in Part II of this thesis to a poststructural discourse analysis allowed me to investigate the sources of adolescents' ideas about menstruation and the constituting of girls' subjectivity in relation to menstruation. I learned that our conceptions of the female body, menstruation and puberty have been constructed in specific ways by political, economic, cultural and scientific interests - most often the interests of privileged male elites. This analysis made it possible for me to 'see' different things and to ask 'new' questions. It made visible to me the otherwise 'hidden' assumptions about and constructions of the female body, menstruation and menarche - constructions of the female body as different even abnormal and through her procreative powers as 'always already' sexual and fascinating, menstruation as somehow disgusting even pathological and never a pleasure and menarche as a highly significant even traumatic event signalling girls' sexual maturity and fertility. And it made it possible for me to ask new questions about what menstruation means to adolescents and how girls' subjectivity is constituted - questions about what discourses and practices are available to young adolescents in relation to menstruation, what does menstruation come to mean to them, how is girls' subjectivity constituted in relation to learning about menstruation, and how do girls understand and explain the onset of menstruation? I could now analyse my group discussions and interviews with young British adolescents from a different perspective, using a different approach and asking different questions. I present this analysis in Part III of my thesis.

Notes for Part II

Chapter 4

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1. Henriques, Julian; Hollway, Wendy; Urwin, Cathy; Venn, Couze and Walkerdine, Valerie, (1984) Changing the Subject: Psychology, social regulation and subjectivity, Methuen: London and New York, p. 2.
 2. Bhavnani, Kum-Kum (1990) "WHAT'S POWER GOT TO DO WITH IT? EMPOWERMENT AND SOCIAL RESEARCH", p. 141, in Deconstructing Social Psychology by Ian Parker and John Shotter, (eds), Routledge: London, pp. 141 - 153.
 3. Bhavnani (1990) p. 141.
 4. Hollway (1989) discusses the difference in approach between the more language oriented discourse of Potter and Wetherell and a discourse analysis influenced by Foucault, (pp. 32-33). Although Potter and Wetherell's (1987) Discourse and Social Psychology: Beyond Attitudes and Behaviour is a useful introduction to discourse analysis in social psychology, their approach is not being taken in this thesis because as they say "Our focus is exclusively on discourse itself: how it is constructed, its functions and the consequence which arise from different discursive organisation", (p. 178).
 5. Parker, Ian (1992) Discourse Dynamics: Critical Analysis for Social and Individual Psychology, Routledge: London and New, p. 1.
 6. Cousins, Mark and Hussain, Athar (1984) Michel Foucault, MacMillan Education Ltd: London, p. 77.
 7. Kvale, Steinar (1992) (ed.) Psychology and Postmodernism, Sage: London, Newbury Park, New Delhi, p. 1. The possibilities of a postmodern psychology are the subject this book. As Kvale in the introduction considers that "no coherent school of postmodern psychology emerges from the following chapters: indeed, the very concept of a unitary discipline is at odds with postmodern thought" (p. 1), I will not engage with the debate about psychology and postmodernism in this study. I have found it challenging enough to move to poststructuralist psychological knowledge, research, and practice; therefore, I will leave postmodern psychology to more forward, energetic, or philosophically turned psychologists.
 8. Cousins and Hussain (1984) p. 87.

9. Cousins and Hussain (1984) p. 87.
10. Cousins and Hussain (1984) p. 88.
11. Jacobi, Mary Putnam (1878) The Question of Rest for Women During Menstruation, G.P. Putnam: New York, p. 101.
12. Bordo, Susan R. (1989) "The body and the reproduction of femininity: a feminist appropriation of Foucault", p. 13, in Gender/Body/Knowledge by Jaggar, Alison M. and Bordo, Susan R. (eds), Rutgers University Press: New Brunswick and London, pp. 13-33.
13. Bordo (1989) p.14.
14. Weedon (1987) p. 2.
15. Weedon (1987) p. 7.
16. Henriques et al. (1984) p. 111.
17. Bordo (1989) p.15.
18. Benedek, Therese (1952) Psychosexual Functions in Women, The Ronald Press Company: New York. See her preface for a statement that women's "social behavior" is influenced by her sexual cycle.
19. Henriques et al. (1984) p. 101.
20. Henriques et al. (1984) p. 101.
21. Philip, M. (1985) "Michel Foucault" in Skinner, Quentin (ed) The Return of Grand Theory in the Human Sciences, Cambridge University Press, pp. 65-83, p.69.
22. Henriques et al. (1984) p. 105.
23. Cousins and Hussain (1984) p. 77-80.
24. Henriques et al. (1984) p. 105.
25. Parker (1992) p. xi. This is a useful book written for psychologists and students of psychology new to discourse analysis. It sets out to present a clear and systematic introduction to discourse research and the essential theoretical debates in the area.
26. Parker (1992) p. ix.
27. When I discuss discourse or discourse analysis I will assume that the reader understands that this is a poststructuralist discourse

analysis.

28. Parker, Ian (1992) p. 5.

29. Cousins and Hussain (1984) discuss Foucault's use of the concept of 'discursive formations' stating that "Knowledges, discursive formations, may be considered to be a corpus of statements which relate to the existence of objects, mode of statement, concepts and thematic choices," p. 85. In this sense, I consider discursive formations as knowledges. This definition implies a definitely patterned order of discourse which is obtained by a particular practice. I found the following point helpful: Philip (1985) defines a discursive field as knowledge obtained by reason and argument rather than intuition, p. 69.

30. Cousins and Hussain (1984) p. 90.

31. Foucault, Michel (1972) The Archaeology of Knowledge, Pantheon Books: New York, p. 49.

32. Cousins and Hussain (1984) p. 92.

33. Foucault (1972) p. 98. I find this statement helpful in understanding why this literature was initially so difficult for me. Even when authors attempted to introduce unfamiliar concepts, I felt that I had come in half way through the conversation. If we are new to this approach, we must spend some time learning about the subjects, concepts, ideas, happenings, practices, language, debates, contradictions, and discourses that go to make up this continuing dialogue.

34. Cousins and Hussain (1984) p. 93.

35. Foucault, Michel (1972) p. 103.

36. See Jane Ussher (1989) for a discussion of this 'syndrome' and its relationship to history and culture.

37. Marshall, Francis H. A. (1910) The Physiology of Reproduction, Longmans, Green, and Co: London, New York, Bombay, and Calcutta, p. 67.

38. Henriques et al. (1984) p.111.

39. Heape, Walter (1900) "The "Sexual Season" of Mammals and the Relation of the "Pro-oestrus" to Menstruation", Quarterly Journal of the Microscopical Science, NS44, 2nd series, [173-176], November, pp. 1-70.

40. Heape, Walter (1913) Sexual Antagonism, Constable: London. In this book Heape argued against the feminist movement and female quality on the basis of biology.
41. Henriques et al. (1984) p. 105.
42. Cousins and Hussain (1984) p. 94.
43. See Henriques et al. (1984) pp. 105-6.
44. Henriques et al. (1984) p. 100.
45. Henriques et al. (1984) p. 106.
46. Subject is a philosophical term for what in lay terms would be the 'person', 'individual', 'human being', or in psychology 'the individual'. The use of this term problematises the nature of being a subject.
47. Weedon (1987) p. 32.
48. A poststructuralist approach needs to be differentiated from social constructionism which tends to assume that the individual is a pre-given subject which society then 'constructs'. As Couze Venn (1984) "The subject of psychology" in Henriques et al. states "This is not a position reducible to the 'social construction of reality' theses", because this approach does not problematise the subject, p. 150.
49. See Couze Venn (1984), pp. 119-152.
50. Weedon (1987) p. 33.
51. Hollway (1989) p. 25. In other words, it decentres the self.
52. Henriques et al. (1984) p.3.
53. Frosh, S. (1987) The Politics of Psychoanalysis, Macmillian: London, p. 11. He uses subjectivity synonymously with these terms thus referring to the person in ways which are inclusive and familiar.
54. Weedon (1987) p. 28.
55. Hollway (1989) p. 30.
56. Henriques et al. (1984) p. 115.
57. Bhavnani (1990) argues that "an analysis of power should be a

part of all research, even if such an analysis is not the primary focus of research", p. 151. With its interest in the relationship between power and knowledge, a poststructural discourse analysis can be useful for a feminist social psychology. This is not to say that this analysis is without its problems. As Janet Sayers (1990) comments in Ian Parker and John Shotter's Deconstructing Social Psychology: "In a sense, Foucault glosses over this problem (of the real inequalities of power by sex, race, and class) to the extent that he refuses any distinctions of power ...", p. 206.

58. Billig, M., Condor, S., Edwards, D., Gane, M., Middleton, D., and Radley, A. R. (1988) Ideological Dilemmas, Sage: London, p. 147.

59. Foucault, Michel (1982) "Afterword: The Subject and Power", in Dreyfus, Hubert L. and Rabinow, Paul Michel Foucault: Beyond Structuralism and Hermeneutics, The Harvester Press: Great Britain, p. 217.

60. Cousins and Hussain (1984) comment that: "The question 'what is power?' is easy to ask but difficult, or even impossible, to answer fully - like a number of other equally perplexing simple questions such as 'what is law?', 'what is meaning?' and 'what is sexually?', p. 227.

61. Foucault (1982) p. 208.

62. Foucault (1982) p. 217.

63. Henriques et al. (1984) p. 115.

64. Parker (1989) p. 65.

65. Weedon (1987) p. 113.

66. Henriques et al. (1984) p. 100.

67. Henriques et al. (1984) p. 101.

68. Henriques et al. (1984) p. 101.

Chapter 5

69. For much of the source material and references used in preparing this section is from Patricia Crawford's (1981) interesting article on "Attitudes to Menstruation in Seventeenth-Century England." Past and Present, 91, pp. 47-73. However, my approach to this particular

history is different from hers and the interpretations presented here are my responsibility.

70. A number of physicians' medical case-books from this era have survived. In these doctors recorded patients' symptoms, treatments, and progress as well as occasionally recording patients' actual words.

71. Crawford (1981) pp. 47-73.

72. Some examples from Patricia Crawford's (1981) article are: Nicholas Culpeper (1651) A Directory for Midwives; anon Aristotles' Complete and Experience'd Midwife; Jean Astruc (1743) A Treatise on All the Diseases Incident to Women. London, tr. J.R.; John Ball (1770) The Female Physician, or, Every Woman Her Own Doctress. London; Jane Sharp (1671) The Widwives Book. London. Jane Sharp was the only woman author of a 17th century medical handbook quoted.

73. Foucault, Michel (1984) The Use of Pleasure: The History of Sexuality, Volume 2, Penguin: London, p.129. See this work for further discussion of Greek conceptions of the body.

74. Laqueur, Thomas (1990) Making Sex: body and gender from the Greeks to Freud, Harvard University Press: London, p.62.

75. Laqueur (1990) p.62.

76. Laqueur (1990) p.4.

77. Menses is the 16th century Latin plural of mensis, month, and is another word for menstruation.

78. Sharp, (1671) pp. 83-4.

79. Sharp (1671) p. 288.

80. This comes through the medieval Arabic physician, Avicenna (ibn-Sina, 980-1037), 3.20.1.3.

81. Crawford (1981) pp. 51-52.

82. This is from the popular text, The Secrets of Women by Pseudo-Albertus Magnus 1.19, which was published throughout the 17th century.

83. Crawford (1981) p. 55.

84. Crawford (1981) p.54.

85. Crawford (1981) p.49.

86. Manning, Henry (1771) A Treatise on Female Diseases, n.p., London, p. 66. Catamenia was an 18th century word for menstruation from the Greek, katamenia, meaning menses.

87. Crawford (1981) p.49.

88. Crawford gave this text as Leviticus XX.18, (1981) p.62. However, the Oxford Leviticus 20.18 text of the King James' Version gives the penalty as being "and both of them shall be cut off from among their people" which indicates the possibility of different religious emphases being co-existent. This was from The Holy Bible, King James' Version, Oxford, printed at the University Press, Humphrey Milford: London. There is no publication date on this bible which was used in some British public schools in the 1950's. It would appear that different versions of the bible use different translations of this text. These different versions would be an interesting study, but as my project is only a brief history of menstruation, I will not follow this trace.

89. Defined here as supernaturally sanctioned law rather than socially forbidden or disapproved of.

90. See Buckley, Thomas and Gottlieb, Alma (1988) (eds) Blood Magic: An Anthropology of Menstruation, University of California Press: Berkeley, for a discussion of menstrual taboos.

91. Armstrong, Karen (1986) The Gospel According to Woman: Christianity's Creation of the Sex War in the West, Pan Books: London, pp. 35-36. The author claims that where sexuality is highly valued, there is no celibacy as in the world of Islam: "Mohammed certainly did not think that women were sexually disgusting" (p.2) even during their menstrual periods. She also points to Judaism where "The Chosen People have to propagate themselves and so women, as mothers, have a particularly important, even crucial religious role" (p.2). The fact that orthodox Judaism also maintains a number of menstrual taboos demonstrates that taboos can signify importance as well as fear or disgust.

92. Elyot, Sir Thomas (1610) The Castle of Health, London, S.T.C. 7657, p. 12.

93. Crawford. (1981) p.57.

94. Crawford (1981) p.57.

95. Crawford (1981) p.62.

96. Babington, Gervase (1604) Comfortable Notes upon the Bookes of Exodus and Leviticus, London, S.T.C. 1088, pp. 138-9.
97. Noonan, J.T. (1966) Contraception: A History of its Treatment by the Catholic Theologians and Canonists, Cambridge: Massachusetts, p. 282.
98. Crawford (1981) pp. 63-64.
99. Quillet, C. (1720) Callipaedia: or, The Art of Getting Beautiful Children. A Poem ... Made English by N. Rowe, n.p., London, pp. 53-54.
100. Pepys, Samuel (1970) The Diary of Samuel Pepys, edited by R. Latham and W. Matthews, London, v, pp. 9, 225-6; ix, pp. 265, 514. "Ellos" refers to "them", a word Pepys uses for menstruation.
101. Hooke, Robert (1935) The Diary of Robert Hooke, 1672-1680, edited by H.W. Robinson and W. Adam, London, p. 27 (9 Feb. 1673).
102. Crawford (1981) p. 58. She considered that nineteenth-century editing has obscured other observations.
103. Crawford (1981) p. 59, an example was Pepys who only mentioned his own bodily functions when they interfered with other activities, Diary, i, p. 287.
104. Barnes, Barnabe (1607) The Devil's Charter, London, S.T.C. 1466. See also Ben Jonson, The Alchemist, III. i. 33.
105. The ideas in these types of books were culled from traditional texts, popular customs, and folklore. A number of the books like this one were published anonymously, but were most likely compiled by men. They could have numerous editions over an extended period of time.
106. Agrippa, Henricus Cornelius (1651 or 1650) Three Books of Occult Philosophy, trans. J.F., London. There was a lengthy discussion of the superstitions associated with menstrual blood, pp. 81-2.
107. Pliny (1635) The Historie of the World, trans. P. Holland, London, S.T.C. 20030a, contained a discussion of Pliny's ideas on the effects of menstruation from the 2nd century A.D.
108. Pliny (1635) p.163.
109. Sharp (1671) p. 289.
110. Ross, Alexander (1651) Arcana microcosmi: or, The Hid Secrets of

Mans Body Disclosed, n.p., London, p. 137.

111. Drake, James (1707) Anthropologia nova, or, A New System of Anatomy, 2 Vols., London, pp. 321-2.

112. Crawford (1981) p. 70, commented that "Many of these have survived and, in addition to medical cures, contain cookery recipes and household hints".

113. A disorder, more commonly diagnosed in adolescent girls, characterised by pale greenish-yellow skin, weakness, and palpitations. One of the symptoms was an absence of menses. According to Loudon, I.S.L. (1980) "before 1750, it was described as the "disease of virgins", in "Chlorosis, anaemia, and anorexia nervosa", British Medical Journal, Vol. 281, 20-27 December, pp. 1669-75, p. 1669.

114. Mother-fits was the term for womb fits. Here was the presence of the later dominant Victorian medical discourse of female illnesses and weakness residing in disorders of the womb.

115. Crawford (1981) p. 70. Overflowing of the terms refers to menstrual periods that either were longer or had a heavier flow than usual. There was a concern about haemorrhage because there were no effective medical methods for dealing with it.

116. Sharp (1671) pp. 84, 288.

117. Crawford (1981) p. 69.

118. Wiggles, Sarah (1616) medical receipts: Royal College of Physicians, London, MS. 654, fo. 73.

119. "Book of Receipts Phisicall and Chirurgicall" (late 17th century): Wellcome Institute, MS. 1323, fo. 111.

120. Crawford (1981) p. 68.

121. Banister, John (1578) The Historie of Man (London, S.T.C. 1359), fos. 85, 88.

122. For example, J.H. Kellogg (1895) Ladies' Guide to Health and Disease: Childhood, Maidenhood, Wifehood, Motherhood. London.

123. Pierce, Robert (1697) Bath Memoirs, Bristol. pp. 190-1.

124. R.T. (1710 edition) De morbis foemineis; Anon aristotles Master-Piece, Preface, London, p. 4.

125. The Accomplisht Physician, the Honest Apothecary, and the Skilful Chyrurgeon, (1670), London. p.37.
126. A Rational Account of the Natural Weakness of Women, (1716) London. pp. 13-15.
127. Greene, J.P. (ed.) (1965) The Diary of Colonel Landon Carter of Sabine Hill, 1725-1778, Charlottesville, Va. pp. 320-3.
128. Crawford (1982) p.72.
129. Bulwer, John (1653) Anthropometamorphosis: Man Transform'd, London. p.404; Crooke, Helkiah (1603) Microcosmographia, London (S.T.C. 6063). p. 258; Purchas, Samuel (1619) Microcosmus: or, The Historie of Man, London (S.T.C. 20503) p. 257; Ross, Alexander (1651) Arcana microsmi: or, The Hid Secrets of Mans Body Disclosed, London. p. 86.
130. Foucault (1984) p. 155.
131. Purchas (1619) pp. 481-3.
132. Laqueur, Thomas (1990) Making Sex: body and gender from the Greeks to Freud, Harvard University Press: London. p. 5
133. Laqueur (1990) p. 150.
134. Laqueur (1990) p. 195.
135. Laqueur (1990) p. 194.
136. Jacobi, Mary Putnam (1878) The Question of Rest for Women During Menstruation, G.P. Putnam: New York. p.18.
137. Laqueur (1990) p. 194-5.
138. Barrow, Susanne (1981) Distorting Mirrors, New Haven: Yale University Press.
139. Rousseau, Book 5 as quoted in Laqueur (1990) p. 199.
140. Laqueur (1990) p. 281.
141. Jacobi (1878) p. 7.
142. Burdach (1835) Die Physiologie Erste Band, p. 241 as quoted in Jacobi (1878) p. 10.
143. Thompson, Allan (1836) Todd's Cyclopedia, Art. Generation.

144. Jacobi (1878) p. 12.
145. Wagner (1853) Handwörterbuch, Bd. 4, p. 879.
146. Jacobi (1878) pp. 5-6.
147. Jacobi (1878) on page 6, quotes this from Burdach (1835) p. 249.
148. Jacobi (1878) p. 7.
149. Tilt, R.J. (1851) On Diseases of Menstruation, n.p., London, p. 23.
150. Jacobi (1878) p. 13.
151. Jacobi (1878) p. 12.
152. Jacobi (1878) pp. 12-3.
153. Jacobi (1878) pp. 12-3.
154. Barnes, Barry (1985) "Thomas Kuhn" in Quentin Skinner (ed.), The Return of Grand Theory, Cambridge University Press: Cambridge, p. 86.
155. Landes, Joan B. (1988) Women and the Public Sphere, Cornell University Press: Ithaca, p. 11.
156. Thomson, David (1966) Europe Since Napoleon, Pelican: Great Britain, p. 198.
157. Laqueur (1990) p. 196-7.
158. Thomson (1966) p. 124.
159. Parker, Ian and Shotter, John (1990) (eds) Deconstructing Social Psychology, Routledge: London, p. 4.
160. Marshall, F.H.A. (1910) The Physiology of Reproduction, Longman and Co.: London, p. 670.
161. Mitchell, Silas Weir (1888) Doctor and Patient, J.B. Lippincott and Co.: Philadelphia, p. 13.
162. Marshall (1910) p. 67.
163. Hall, G. Stanley (1904) Adolescence, Its Psychology and Its Relations to Physiology, Anthropology, Sociology, Sex, Crime, Religions, and Education, 2 Vols., D. Appleton and Co.: New York, p. 503.

164. See Susan Sleeth Mosedale (1978) "The Woman Question", Journal of the History of Biology, Vol. 11, No. 1, Spring, pp. 1-55, for a further discussion of the cultural and economic pressure that contributed to women's demands for equal rights and men's efforts to maintain the female status quo.
165. Rowbotham, Sheila (1973) Hidden from History. 300 Years of Women's Oppression and the Fight Against It, Pluto Press: London, p. 47.
166. Rowbotham (1973) pages 51 to 53 discusses how as women did rescue work with prostitutes the conditions of women and children came to light: in the 1870's the age of consent was twelve. The implications of the double standard as well as male sexuality and abuse became obvious to middle-class women.
167. Rowbotham (1973) p. 47.
168. Mosedale (1978) p. 1.
169. Mosedale, Susan Sleeth (1978) p. 1.
170. Mosedale (1978) p. 1. See also Mary Roth Walsh (1982) "The Quirls of a Woman's Brain" in Ruth Hubbard, Mary Sue Henifin and Barbara Fried (eds) Biological Woman - The Convenient Myth, Schenkman: Cambridge, Mass. and Patricia A. Vertinsky (1990) The eternally wounded woman: women, doctors and exercise in the late nineteenth century, St. Martin's Press: New York and Manchester.
171. Walsh (1982)
172. L'Esperance, Jean (1977) "Doctors and Women in Nineteenth-Century Society: Sexuality and Role", in John Woodward and David Richards (eds) Health Care and Popular Medicine, pp. 105-127. L'Esperance considers the demand for access to medical education for women "aroused the medical establishment to heights of greater anger and disgust than any other aspect of the campaign for changes in society's attitudes towards women." p. 118.
173. See Walsh 1982 for a discussion of Storer's career.
174. Storer (1868) Criminal Abortion, Boston, p. 101.
175. Tilt (1875) "Address", British Medical Journal, January 16, as quoted in Jacobi (1878) p. 5.
176. Walkerdine, Valerie (1984) "Developmental Psychology and the child-centred pedagogy; the insertion of Piaget into early education", in Henriques et al., p. 173.

177. In this chapter, the discourses and debates discussed in Victorian Britain and America were primarily concerned with upper class women from white, North European 'races'. Although woman was constructed as the other to man, this was the upper class, white 'woman' so essential to the imperial 'race', not the women of colour or the lower classes. There is another story to be told here, but it is outside the scope this research.

178. Walkerdine (1984) p. 169.

179. Clarke, Edward H. (1874) Sex in Education: or, a Fair Chance for Girls, Boston. This book went through seventeen editions in thirteen years and was considered by Walsh (1982) p. 253 as the "single book on the limitations of the female system" which evoked an enormous wave of controversy.

180. Maudsley, Henry (1874) "Sex in Mind and Education", Fortnightly Review, XXI, 465-83.

181. Walsh (1982) p. 251.

182. Maudsley (1874) pp. 468, 480.

183. Jacobi (1878) p. 4.

184. As was pointed out by numerous women and feminists, a large number of women doing strenuous domestic and industrial labour were never expected to cease work during menstruation including these scientists' wives and servants.

185. Bassuk, Ellen L. (1985, 1986) "The Rest Cure: Repetition or Resolution of Victorian Women's Conflicts" in Suleiman, S. R. (ed.), p. 145.

186. The role of hormones in the regulation of the menstrual cycle was not established until the later 1920's, therefore, the mechanics of the menstrual cycle and the triggers for ovulation and menstruation were not understood until this time. This left a space for numerous theories and debates.

187. Marshall (1910) p. 83.

188. Jacobi (1878) p. 3.

189. Jacobi (1878) footnote p. 3. With Dr. Jacobi, I would argue that menstruation in Western culture has become the site of women's different and limiting (inferior) nature in comparison to men, because, although not all women give birth or breast feed, all women are viewed as subject to the menstrual cycle from puberty to

menopause.

190. Jacobi (1878) p. 3.

191. Clarke, (1873) p.83.

192. Romanes, George J. (1887) "Mental Differences Between Men and Women", THE NINETEENTH CENTURY, May, pp. 654-672.

193. Cope, Edward Drinker (1888) "The Relation of the Sexes to Government", The Popular Science Monthly, 33, October, pp. 727-30. He was an American zoologist, palaeontologist, and neo-Lamarckian evolutionist who had a great deal to say on the subject of feminism. See Mosedale (1978) pp. 24-32.

194. As quoted from the American Journal of Obstetrics, August and November, 1875 by Jacobi (1878) pp. 6-7.

195. Maudsley, Henry (1884) Sex in Mind and in Education, Syracuse: C.W. Bardeen, p. 14.

196. Landes, Joan B. (1988) Women and the Public Space, Cornell University Press: Ithaca, p. 11.

197. Elliotson, John (1840) fifth edition, Human Physiology, n.p., London, p. 770-1.

198. Showalter, Elaine and English (1972) "Victorian Women and Menstruation" in Martha Vicinus, (ed.) Suffer and Be Still: Women in the Victorian Age, Methuen & Co: London, p. 39.

199. It was still widely believed that conception was most likely to take place around the time of menstruation. Jacobi (1878) quotes Ponchet: "It is entirely at the end of the catamenial flow, that the follicles open and their ova are expelled," p. 74.

200. Power, John (1831) Essays on the Female Economy, London: Burgess and Hill.

201. In respect to the woman question, George Drysdale was a progressive. He advocated total equality in society for women, advocated birth control, and considered female and male natures to be based on the same model and to operate on the same laws. See Jean L'Esperance (1977) for further discussion of Drysdale's work and position.

202. Laqueur, (1990) p. 221.

203. Showalter (1972) p. 39.

204. Jacobi (1878) p. 81.
205. L'Esperance (1977).
206. Bullough, Vern and Voght, Martha (1973) "Women, Menstruation, and Nineteenth-Century Medicine", Bulletin Historical Medicine, XLVII, p. 67.
207. King, A.F.A. (1875-76) "A new basis for uterine pathology", American Journal of Obstetrics, 8, pp. 242-3 as quoted in Bullough and Voght (1973) p. 67.
208. Showalter (1972) p. 38.
209. Mosedale (1978) p. 1.
210. Anderson, Elisabeth Garrett (1874) "Sex in Mind and Education: A Reply" in Fortnightly Review, 15 (new series), p. 582.
211. Jacobi (1878) P. 24.
212. Anderson (1874) p. 582.
213. Anderson (1874) p. 585.
214. Anderson (1874) p. 585.
215. Anderson (1874) p. 586.
216. L'Esperance (1977) p. 107.
217. See Edward H. Clarke (1874), Henry Maudsley (1874), Elisabeth Garrett Anderson (1874) for their arguments concerning the effects of education of the reproductive functions.
218. The term menarche did not enter scientific discourse until the 20th century.
219. Anderson (1874) p. 586.
220. Anderson (1874) p. 586.
221. Showalter (1972) p. 41-2.
222. Walsh (1982) p. 255.
223. Walsh (1982) pp. 256-8.
224. Jacobi (1878) p. 1.

225. Jacobi (1878) p. 64.
226. Jacobi (1878) p. 97.
227. Jacobi (1878) p. 99
228. Jacobi (1878) p. 100.
229. Jacobi (1878) p. 91.
230. Jacobi (1878) p. 101.
231. Jacobi (1878) p. 64.
232. Jacobi (1878) p. 97.
233. Jacobi (1878) p. 97.
234. Jacobi (1878) p. 82.
235. Jacobi (1878) p. 99.
236. Blackwell, Elisabeth (1885) fifth edition, The Human Element in Sex. J. and A. Churchill: London.
237. Jacobi (1878) p.100.
238. Jacobi (1878) p. 98.
239. Jacobi (1878) p. 83.
240. Jacobi (1878) p. 101.
241. Jacobi (1878) p. 172.
242. Jacobi (1878) p. 227.
243. Rowbotham (1973) p. 50.
244. Rowbotham (1973) p. 50.
245. Rowbotham (1973) p. 82.
246. Mosedale (1978) p. 2.
247. Mosedale (1978) p. 17.
248. Romanes (1887).

249. Romanes (1887) p. 654.

250. Romanes (1887) p. 668.

251. See the work by Dr. Harry Campbell (1891) Differences in the Nervous Organisation of Man and Woman: Physiological and Pathological published by H.K. Lewis in London for a classical example of quoted facts which directly contradict the argument. He quoted figures that showed women having less mental illness and obtaining better education results than men, then proceeded to construct a tortuous argument supporting his contention that woman was an undeveloped man. He was an M.D., B.S., and physician and pathologist in a London Hospital. His work was quoted in Havelock Ellis (1925).

252. Romanes (1887) p. 663.

253. Simcox, Edith (1887) "The Capacity of Women", THE NINETEENTH CENTURY, September, pp. 391-402.

254. Simcox (1887) p. 393.

255. Mosedale (1978) p. 3.

256. Simcox (1887) p. 392-3.

257. Romanes (1887) p. 667.

258. Romanes (1887) p. 671.

259. Allen, Grant (1889) "Plain Words on the Women Question", FORTHNIGHTLY REVIEW, 46, October, pp. 448-58.

260. Allen (1889) p. 449.

261. Allen (1889) p. 457.

262. Allen (1889) p. 457.

263. Allen (1889) p. 458.

264. Allen (1889) p. 452.

265. According to Mosedale (1982) and Philip Boardman (1944) Patrick Geddes: Maker of the Future, University of North Carolina Press: Chapel Hill, the influence of this book was far-reaching. It was published in Britain, the United States, and France over a number of years with large sales. It was still being published in 1933. According to Mosedale (1982) "The book must have been persuasive when it appeared, for it marshals information on a wide range of

organisms, and is impressively illustrated with more than one hundred precise engravings," p. 32.

266. Mosedale (1982) p. 37.

267. Geddes, Patrick and Thomson, J. Arthur (1889) The Evolution of Sex. Walter Scott: London. p. 29.

268. Geddes and Thomson (1889) p. 109.

269. Rolph, W.H. (1884) Biologische Probleme. Leipzig: n.p.

270. Geddes and Thomson (1889) p. 117.

271. Geddes and Thomson (1889) p. 26.

272. Geddes and Thomson (1889) p. 109.

273. Geddes and Thomson (1889) p. 118-9.

274. Geddes and Thomson (1889) p. 270.

275. Geddes and Thomson (1889) pp. 241-2.

276. Kellogg, J.H. (1888) Plain Facts for Old and Young: embracing the natural history and hygiene of organic life. I.F.Segner & Co.: Burlington, Iowa. This was a new, revised and enlarged edition of a book first published in 1877 under the title: Plain facts about sexual life. Dr. Kellogg was a member of the British Association for the Advancement of Science as well as a practising physician in the United States.

277. Kellogg (1888) pp. 86-7.

278. Anderson (1874) p.585.

279. Kellogg (1888) p. 395.

280. Geddes and Thomson (1889) p. 244.

281. Geddes and Thomson (1889) p. 244.

282. Geddes and Thomson (1889) p. 245.

283. Geddes and Thomson (1889) p. 245.

284. Geddes and Thomson (1889) p. 244.

285. Geddes and Thomson (1889) p. 245.

286. Laqueur (1990) p. 227.

287. See Robert Thomson (1968) The Pelican History of Psychology, Penguin Books: Great Britain, and Jeffreys Weeks (1989) 2nd edition, Sex, Politics and Society: The regulation of sexuality since 1800, Longman: London and New York for comments on the importance of Ellis' work. Thomson stated that "Ellis's study still remains a source-book for any serious knowledge of sexual psychology" (p. 211) and Weeks considered the Studies in the Psychology of Sex to be a "still very valuable chronicle of sexual behaviour and beliefs" (p. 2).

288. See Sheila Jeffreys (1985) "Antifeminism and Sex Reform before the First World War", The spinster and her enemies: feminism and sexuality 1880-1930, Pandora: London, Boston and Henley, pp. 128-146, for a discussion of Havelock Ellis.

289. Thomson (1968) p. 210.

290. Ellis, Havelock (1925) 3rd edition, Studies in the Psychology of Sex. Volume 1. The Evolution of Modesty, The Phenomena of Sexual Periodicity, Auto-erotism, F.A. Davies: Philadelphia, U.S.A. This book was copyright in 1900 and first published in 1899. Although Havelock Ellis did revise this edition the chapters on periodicity do not appear to have been substantially changed.

291. Laqueur (1990) p. 221 quoted this from Ellis' 1904 edition of Studies in the Psychology of Sex, pages 284 and 293. I have not been able to obtain that edition or to trace that quote in later editions.

292. Ellis (1925) p. 296.

293. Ellis (1925) p. 90.

294. Ellis (1925) pp. xiii, 85-160.

295. Ellis (1925) p. 101.

296. Ellis (1925) pp. 85-6.

297. Ellis (1925) p. 106.

298. Ellis (1925) p. 97.

299. Heape's work was not only cited by Ellis, one of the founding 'fathers' of sexology, but by Stanley Hall, the American founding 'father' of adolescent psychology, and F.H.A. Marshall, the British founding 'father' of reproductive physiology.

300. Heape, Walter (1900) "The 'Sexual Season' of Mammals and the

Relation of the 'Pro-oestrus' to Menstruation, Quarterly Journal of Microscopical Science, NS 44, 2nd series, [173-176], November, pp. 1-70, p. 59. Although Heape made this statement a careful reading of his article shows that he contradicted himself. He was not sure whether the period of sexual desire was during or just after menstruation, but he did consider them to be related. He based all his comments on female sexual desire on his research with animals, not with women.

301. Ellis (1925) pp. 93. Walter Heape wrote a number of influential studies on menstruation including (1894) "The Menstruation of *Semnopithecus Entellus*," Philosophical Transactions; (1897) "Menstruation and Ovulation of *Macacus Rhesus*", Philosophical Transactions; (1900) "The 'Sexual Season' of Mammals and the Relation of the 'Pro-oestrus' to Menstruation, Quarterly Journal of Microscopical Science, NS 44, 2nd series, [173-176], November, pp. 1-70. In 1913 he wrote Sex Antagonism, Constable: London, in which he openly argued that "the Male and Female are complementary; they are in no sense the same and in no sense equal to one another...." p. 195.

302. Ellis (1925) p. 104. Ellis was obviously aware of Dr. Jacobi's and Dr. Blackwell's work and arguments as he cited them.

303. Ellis (1925) p. 104.

304. Ellis (1925) p. 101.

305. Ellis (1925) p. iii.

306. Ellis (1925) pp. 99-100.

307. Ellis referenced J. G. Frazer, Golden Bough, vol. ii, Chapter IV. He did not give the date or publisher. In the 1913, 3rd. edition, MacMillan: London, Part II is titled Taboo and the Perils of the Soul. In the preface to this edition, Frazer reported writing "an article on Taboo for the Ninth Edition of the *Encyclopaedia Britannica*" in 1886, p.v. The Golden Bough, first published in 1890, has run to many editions, the latest being 1990. Frazer made very few references to menstruation or menstrual taboos in his two volume work which was about "sacred personages, such as kings and priests," p. vi.

308. Ellis (1925) p. 287.

309. Ellis (1925) p. 238.

310. Ellis (1925) p. 289-90 cited E. Durkheim, "La Prohibition de l'Inceste et ses Origines," *L'Annee Sociologique*, Premiere Annee,

- 1898, esp. pp. 44, 46-7, 48, 50-57.
311. Ellis (1925) p. 290.
312. Ellis (1925) p. 290.
313. Ellis (1925) p. 284.
314. Rose (1985) p. 79.
315. Roosevelt, Theodore (1926) "Birth reform, from the positive, not the negative side", Complete Work of Theodore Roosevelt, Scribner: New York, Vol. 19, p. 161. For further discussion of the effects of the eugenics in America see Vertinsky (1990) and in England Anna Davin (1978) "Imperialism and motherhood", History Workshop, Vol. 5 (Spring), pp. 9-65; and Carol Dyhouse (1977) "Social Darwinistic ideas and the development of women's education in England, 1888-1920", History of Education, Vol. 5(1), pp. 41-58.
316. Pearson, Karl (1904) "On the laws of inheritance in man, II", Biometrika, 3, p. 159.
317. Haller, Mark H. (1963) Eugenics. Hereditarian Attitudes in American Thought, Rutgers University Press: New Jersey, p. 3.
318. Vertinsky (1990) p. 171.
319. Vertinsky (1990) p. 171.
320. Finot, Jean (1913) Problems of the Sexes, trans. Mary J. Safford, G.P. Putnam's Sons: New York, pp. 122-3. Jean Finot (1856-1922) was "an editor of French journals, and the author of other widely translated books on world peace, personal happiness, and race prejudice". Susan Mosedale considered his book "remarkable for its reasoned refutation of most of the 'scientific' misconceptions" on the inferiority of woman published late nineteenth and early twentieth century. Mosedale (1978) p. 41.
321. See Thomson (1968) pp. 125, 134-37 for a 'traditional' view of Hall's place in the history of psychology. Thomson considered G. Stanley Hall and William James as "unquestionably two of the father figures" of academic psychology in the U.S.A. Hall founded the American Psychology Association, the first psychology laboratory in the U.S.A., and the American Journal of Psychology as well as being the first president of Clark University and publishing the first work on adolescence, Adolescence: Its Psychology, in 1904. See Vertinsky (1990) "Escape from freedom: G. Stanley Hall's totalitarian views on female health and physical education", pp. 171-203, for a more critical analysis of his "aristocratic, racist and sexist social

philosophy", p. 174.

322. Vertinsky (1990) p. 172.

323. Thomson (1968) pp. 136-7.

324. Vertinsky (1990) p. 172.

325. Hall, G. Stanley (1904) Adolescence, Its Psychology and Its Relations to Physiology, Anthropology, Sociology, Sex, Crime, Religions, and Education, 2 Vols., D. Appleton and Co: New York, p. viii. This voluminous and ambitious work was the result of many years of research and is an excellent source of references.

326. Hall (1904) p. xiii.

327. Hall (1904) pp. viii-xiv.

328. Hall (1904) p. 506.

329. Hall (1904) p. xiv.

330. Hall (1904) p. 480.

331. Hall (1904) pp. 472-8.

332. Hall (1904) p. 482.

333. Hall (1904) p. 480.

334. This was a theory which had a number of advocates in the 1880's and 1890's. According to Marshall (1910) this "'Wellenbewegung" hypothesis [considered] the reproductive life of the human female [as consisting] of a succession of wave-like periods which follow the monthly cycle" with the menstrual period occurring as the vital processes fell "below the mean", p. 67. However, by 1910, "numerous experiments" had shown contrary and different results, p. 68.

335. Hall (1904) p. 486.

336. Hall (1904) p. 490-1. Hall quoted Ellis, Man and Woman, pp. 251, 247. No date or publisher was given.

337. Smith, Mary Roberts (1900-01) "Statistics of college and non-college women", Publications, American Statistical Association, 7, nos. 49-56, 1-26, as quoted in Bullough and Voght (1973) p. 76.

338. Bullough and Voght (1973) p. 76.

339. Mosher, Clelia Duel (1901) "Normal Menstruation and Some of the Factors Modifying It", John Hopkins Hospital Bulletin, 12, [Nos. 121-122-123], pp. 178-9. For further discussion of Clelia Mosher's career and research into menstruation (from the 1890's to 1920's) see Bullough and Voght (1973) and Vertinsky (1990) pp. 147-9.
340. Mosher (1901) p. 178.
341. Mosher (1901) p. 179.
342. Mosher (1901) p. 179.
343. Sayers, Janet (1982) Biological Politics. Feminist and Anti-Feminist Perspectives, Tavistock Publications: London and New York, p. 2.
344. Mosher (1901) p. 179.
345. Sayers (1982) p.2
346. Hall (1904) p. 486. He used Dr. Jacobi's statistics in conjunction with Dr. Stephenson's wave theory to support his own views. He obviously did not accept her conclusions or theory on the nutritive aspects of menstruation.
347. Bullough and Voght (1973) p. 77.
348. Hall (1904) p. 491.
349. Hall (1904) p. 492.
350. Hall (1904) p. 482.
351. Hall (1904) p. 503.
352. Hall (1904) p. 493.
353. Hall (1904) p. 512.
354. Hall (1904) p. 493.
355. Hall (1904) pp. 493-4.
356. Hall (1904) p. 504.
357. Hall (1904) p. 492.
358. Hall (1904) p. 499.

359. Hall (1904) p. 503.
360. Hall (1904) p. 492.
361. Hall (1904) p. 503.
362. Hall (1904) p. 511.
363. Hall (1904) pp. 502-3.
364. Hall (1904) pp. 479-80. The italics are mine.
365. Hollingworth, Leta Stetter (1914) Function Periodicity: An Experimental Study of the Mental and Motor Abilities of Women During Menstruation, Teacher's College, Columbia University Contributions to Education, No. 69, Columbia University Press: New York, p. 95. She was a doctor of psychology who did an experimental study of the motor and mental abilities of both men and women to ascertain menstrual effects. When she found no menstrual cycle effects, she commented that "it is difficult to understand such striking disparity between what has been accepted and the figures yielded by scientific method." p. 95.
366. Hollingworth (1914) p.99.
367. Bullough and Voght (1973) p. 78.
368. Hollingworth (1914) pp. 95-7.
369. Hall (1904) p. 509.

CHAPTER 7

370. Menarche is identified as emerging in German in 1895. It appeared in English in 1900 in the Dorland *Medical Dictionary*. See Simpson, J.A. and Weiner, E.S.C., The Oxford English Dictionary (1989) 2nd edition published by Clarendon Press: Oxford, p. 600.
371. See Nikolas Rose (1985) The Psychological Complex. Psychology, Politics, and Society in England 1869 - 1939, Routledge and Kegan Paul: London for an analysis of "the formation of psychology as a coherent and individuated scientific discourse" in Britain, Western Europe, and the United States, p. 3.
372. Humm, Maggie (1992) (ed.) "Preface", Feminisms. A Reader, Harvester Wheatsheaf: London, p. xi.

373. Rose (1985) p. 7.

374. Stone, Calvin P. and Barker, Roger G. (1939) "The Attitudes and Interests of Premenarcheal and Post Menarcheal Girls," The Journal of Genetic Psychology, 54, pp. 27-71.

375. I say the 1930s because although Dr. Deutsch's work on the psychology of girlhood was first published in English in the United States in 1944, The Psychology of Women, Vol. 1, Grune and Stratton: New York and in England in 1946, The Psychology of Women. A Psychoanalytic Interpretation. Vol. 1 Girlhood, Research Books Ltd.: London, her original work in German dates from the 1920s and 1930s. For example Mary Chadwick (1932) The Psychological Effects of Menstruation, Nervous and Mental Disease Publishing Company: New York and Washington references Dr. Helene Deutsch's "Psychoanalyse der Weiblichen Sexualfunktionen" (1922) and "Psychoanalyse der Neurosen" (1930) (there are no further details of publication). Also see Helene Deutsch (1946) "Bibliography", pages 305-6 for her own listings of her published work: eleven references to her work date from 1922 to 1939.

376. They were also repeatedly cited. For example: Stone and Barker (1939) were cited in Paul Mussen and Mary Jones (1957) Child Development, Vol. 28, No. 2, pp. 3243-56, in Margaret S. Faust (1960) "Developmental Maturity as a Determinant in Prestige of Adolescent Girls," Child Development, 31, pp. 173-84, and in S. Gray Garwood and Laurel Allen (1979) "Self-Concept and Identified Problem Differences between Pre- and Postmenarcheal Adolescents", Journal of Clinical Psychology, Vol.35, No 3, pp 528-37. Deutsch (1944) was cited in Phyllis Greenacre (1950) "The Prepuberty Trauma in Girls," The Psychoanalytic Quarterly, 19, pp. 298-317, in Natalie Shainess (1961) "A Re-evaluation of Some Aspects of Femininity through a Study of Menstruation: A Preliminary Report," Comparative Psychiatry, Vol. 2, pp. 20-6, and in Arlene McGrory (1990) "Menarche: Responses of Early Adolescent Females," Adolescence, Vol. 25, No. 98, pp. 265-70.

377. The other starting point in this research was the most frequently cited articles in this field. In a citation search in 1994 the following articles listed chronologically were the most often cited in the literature of adolescents girls and menarche. Whisnant, Lynn and Zegans, Leonard (1975) "A Study of Attitudes Toward Menarche in White Middle-Class American Adolescent Girls", American Journal of Psychiatry, 132, pp. 809-814.

Clarke, Anne E. and Ruble, Diane N. (1978) "Young Adolescents' Beliefs concerning Menstruation", Child Development, 49(1), pp. 231-234.

Ruble, Diane N. and Brooks-Gunn, Jeanne (1982a) "The Experience of Menarche", Child Development, 53, pp. 1557-1566.

Brooks-Gunn, Jeanne and Ruble, Diane N. (1982b) "The Development of

Menstrual-related Beliefs and Behaviors during Early Adolescents", Child Development, 53, pp. 1567-1577.

378. Calvin Stone and Roger Barker published a number of articles on menarche from 1936 to 1939. I am going to discuss the two which have continued to be cited in the later psychological literature: Their (1937a) "Aspects of Personality and Intelligence in Post Menarcheal and Premenarcheal Girls of the Same Chronological Ages", Journal of Comparative Psychology, Vol. 23, pp. 439-455 and the (1939) article, "The Attitudes and Interests of Premenarcheal and Post Menarcheal Girls." As well as the two articles discussed here, they published the following two articles: Barker, R.G. and Stone, C.P. (1936) "Physical development in relation to menarcheal age in university women," Human Biology, 8, pp. 198-222 and Stone, C.P. and Barker, R.G. (1937b) "On the relationship between menarcheal age and certain measurements of physique in girls of the ages 9 to 16 years," Human Biology, 9, pp. 1-28.

379. Marshall, F.H.A. (1937) "Sexual periodicity and the causes which determine it," Phil. Trans. Roy. Soc. London, Series B, 226, pp. 423-56.

380. Stone and Barker (1937a) p. 439.

381. I shall use the term child psychology to include child development, human growth and development, and adolescent psychology. In child psychology I include those studies done with adolescents including those on menarche and menstruation which used survey techniques and quantitative analysis on normal subjects. This research tended to be done by psychologists in universities or research institutes attached to universities, but they could be done by a range of interested academics and researchers including biologists, physicians, statisticians, youth workers, etc. They tended to publish either within their own sub-discipline, i.e. Journal of Genetic Psychology or Perceptual and Motor Skills or in one of the journals concerned with adolescence or child development, i.e. Child Development.

382. Stone and Barker (1939) pp. 61-2.

383. Marshall, F.H.A. (1937) The first edition of his seminal book, The Physiology of Reproduction, was published in 1910 by Longman and Co: London.

384. Marshall (1910) p. 67.

385. Marshall (1910) p. 670. See the previous chapter for further discussion to these various authors and their ideas.

386. Hall (1904).

387. For example the Adolescent Growth Study by psychologists at the Institute of Child Welfare, University of California discussed in the work of Harold E. Jones (1940) "Observational methods in the study of individual development", Journal of Consulting Psychology, 4, pp. 234-8, and (1943) Development in adolescence, Appleton-Century: New York.

388. Bowditch, H.P. (1872) "Comparative rate of growth in the two sexes," Boston Medical and Surgical Journal, 10, 434, 35. New Series.

389. Shuttleworth, Frank K. (1937) Sexual Maturation and the Physical Growth of Girls Age Six to Nineteen, Monographs of the Society for Research in Child Development, Vol. II, No. 5, (Serial No. 12), published by Society for Research in Child Development, National Research Council: Washington, D.C., p. 1. Further examples were cited by Shuttleworth including these specifically on menstruation: Engle, E.T. and Shelesnyak, M.C. (1934) "First menstruation and subsequent menstrual cycles of pubertal girls", Human Biology, 6, pp. 431-53 and Shuttleworth, Frank K. (1934) "Van Dyke's data on the relation of menstruation to the growth of girls", School Review, 42, pp. 210-12.

390. The issues of social class and race were variously addressed. In some studies, i.e. Stone and Barker (1937, 1939), social class formed part of the analysis but subjects from any racial or ethnic group not defined as middle and north European 'stock' were eliminated. In others, i.e. Shuttleworth (1937), 'racial stock' was a category of comparison. The tendency in this body of work was for social class to yield no differences and for middle and north European racial groups to be the norm.

391. Rose (1985) p. 3

392. Rose (1985) p. 69.

393. Horney, Karen (1930) "The Distrust between the Sexes", in Feminine Psychology, published (1967) W.W. Norton and Co.: New York and London, p. 116.

394. Stone and Barker (1939) p. 28.

395. Stone and Barker (1939) p. 60.

396. Shuttleworth (1937) p. 204.

397. Humm (1992) p. 42.

398. See Nicolas Rose (1985) for a discussion of hygiene and welfare as a social issue.
399. Rose (1985) p. 147.
400. Rose (1985) p. 174
401. Thane, Pat (1991) "Towards Equal Opportunities? Women in Britain since 1945", in Gourvish, Terry and O'Day, Alan, Britain Since 1945, Macmillan: London, p. 192.
402. For example, in Patricia Graham's 1970 article, "Women in Academe", Science, Vol. 169, No. 3952, pp. 1284-90, she commented that in the 1920s in the U.S.A. there were more women undergraduates and Ph.D.'s than there has been since the Second World War.
403. Rowbotham (1973) p. 125.
404. Rowbotham (1973) p. 121.
405. Calvin Stone and Roger Barker's 1937a and 1939 studies of pre- and postmenarcheal girls were funded by a government grant from the Committee for Research on Problems of Sex, National Research Council.
406. The above quotes are taken from Harold E. Jones (1940) p. 235-8.
407. The above quotes are taken from Harold E. Jones (1940) p. 235-8.
408. Johnstone, R.W. (1927) "Developmental Changes During Adolescence", The British Medical Journal, Sept. 10, pp. 442-4. R.W. Johnstone was Professor of Widwifery and the Diseases of Women at the University of Edinburgh. This was a report from a DISCUSSION ON THE HYGIENE OF MENSTRUATION IN ADOLESCENTS at the Section of Obstetrics and Gynaecology.
409. Clow, Alice E. Sanderson (1924) "Discussion on Dysmenorrhoea in Young Women: Its Incidence, Prevention, and Treatment", The British Medical Journal, Sept. 27, p. 558.
410. Johnstone (1927) p. 442.
411. Clow (1924) p. 559.
412. Johnstone (1927) p. 443.
413. Rose (1985) p. 169.
414. Johnstone (1927) p. 443.

415. Johnstone (1927) p. 443.
416. Horney (1930) p. 114. This was part of a talk given to a branch of the German Women's Medical Association in 1930.
417. Clow (1924) p. 559.
418. Frank, Robert T. (1931) "The Hormonal Causes of Premenstrual Tension", ARCH. NEUROL. & PSYCHIAT., 26, p. 1054.
419. Frank (1931) p. 1056.
420. Frank (1931) p. 1053.
421. Whitehead, R.E. (1934) "Women Pilots", Journal of Aviation Medicine, 5, pp. 47-9.
422. Ussher (1989) p. 45.
423. Sayers (1982) p. 117.
424. Whitehead (1934).
425. Ussher (1989) p. 62.
426. This was said by Edgar Berman, physician to Hubert Humphrey who was running for president of the United States at the time. New York Times, July 26, 1970; Los Angeles Times, February 21, 1972.
427. See Jane Ussher (1989) for further discussion of premenstrual syndrome.
428. See Janet Sayers (1982).
429. In 1931 there was special issue published in German on "Menstruation" of Psychoanalytische Padagogik, May-June, with articles by Karen Horney, Heinrich Meng, Karl Landauer, M. Schmideberg, Mary Chadwick, Karl Pipal, and E. Pfeffer.
430. Chadwick (1932)
431. Horney, Karen (1926) "Flight from womanhood", International Journal of Psycho-analysis., Vol. 7, p. 324.
432. Chadwick (1932) p. 3.
433. Freud, Sigmund, "The Taboo of Virginity", Col. Papers, Vol. IV, p. 221, as quoted in Chadwick (1932) p. 6.

434. Horney, Karen (1931) "Die pramenstruellen Verstimmungen", Zeitschr. f. Psychoanalytische Padagogik, Vol. 5, No. 5/6, pp. 1-7. Reprinted in Horney, Karen (1967) p. 99.

435. Janet Sayers (1982) among others argues that Freud did not consider femininity and masculinity to result from biological essentialism. However, in an attempt to avoid Freud's phallocentrism, another view of sex differences emerged with Ernest Jones and Karen Horney. They argued that "female and male psychology have distinct and independent biological determinants from birth", p. 130. These differences in psychoanalytical concepts of femininity and women's psychological development are complex. For instance, although Mary Chadwick, Helene Deutsch and Karen Horney could be said to share a biological essentialist theory of feminine psychology, there were strong differences in their views. A more detailed history of menstruation would be necessary in order to elaborate the developments and differences in psychoanalytic concepts of the feminine psyche and menstruation.

436. Chadwick (1932) p. 25.

437. Chadwick (1932) p. 8.

438. Mary Chadwick quoted Helene Deutsch's 1922 book, Psychoanalyse der Weiblichen Sexualfunctionen, as the source for this concept. No publisher was given. The same title was referenced by Deutsch as published in 1925.

439. Mary Chadwick quoted Helene Deutsch's 1930 book, Psychoanalyse der Neurosen, as the source of a particular case study in support of this point. No published was given.

440. Chadwick (1932) p. 50.

441. Horney (1967) p. 106.

442. Horney (1967) p. 99.

443. Horney (1967) p. 106.

444. Horney (1967) p. 99.

445. Chadwick (1932) p. 33.

446. As early as 1851 Tilt was advocating better preparation of girls for the onset of menstruation.

447. Chadwick (1932) p. 34.

448. Chadwick (1932) p. 37.
449. Chadwick (1932) p. 35.
450. Horney, Karen (1934) article on "Personality Changes in Adolescent Females" pp. 234-44 in Horney (1967).
451. I refer here to her articles in Feminine Psychology (1967) particularly her (1934) article on "Personality Changes in Adolescent Females" as well as her books, Neurosis and Human Growth (1950) and The Neurotic Personality of Our Time (1937).
452. Horney (1934) p. 234-44.
453. Horney (1967) p. 116. In her 1930 article on "The Distrust between the Sexes."
454. Thomson (1966) "Contents".
455. Thane (1991) p. 192.
456. Cmd. 6404, p. 53 as quoted by Pat Thane (1991).
457. Spence, J.C. (1946) "The Purpose of the Family", Convocation Lecture for the National Children's Home.
458. Newsome, John (1948) The Education of Girls, Faber and Faber: London.
459. John Bowlby's (1951) Maternal Care and Mental Health, WHO: Geneva, was the perfect 'scientific' support for those advocating the 'traditional' family.
460. Thane (1991) p. 192.
461. Thomas, Geoffrey (1944) Women at Work, p. 27.
462. Thane (1991) p. 192. There are different views of women's return to domestic life after the war. There is an argument that women did not voluntarily leave but were in fact forced out by the returning men and the closure of the nurseries. Another argument considers that women were forced out but only of the higher paid and skilled jobs so that the government campaign that was attempting to get women to return to work only wanted them for the lower paid and unskilled jobs. And when they wouldn't or couldn't work because of poor pay, poor conditions, and child care problems the British government was then forced to actively recruit immigrant labour to fill those jobs.

463. Thane (1991) p. 198.

464. These ideas were being developed by Talcott Parsons. See Talcott Parsons and Robert R. Bales (1955) Family Socialization and Interaction Process, Free Press: Glencoe, Ill.

465. Myrdal, Alva and Klein, Viola (1956) Women's Two Roles, Home and Work, Routledge and Kegan Paul: London, note 1, p. 108.

466. Humm, Maggie (1992) "History of feminism in Britain and America", pp. 1-7.

467. Hubback, Judith (1957) Wives who went to College, Heinemann: London, note 12, p. 83.

468. Pugh, Martin (1990) "Domesticity and the decline of feminism, 1930-1950", in Harold Smith (ed.), p. 162.

469. This was in their book (1956) Women's Two Roles. Home and Work.

470. Lewis, Jane (1990) "Myrdal, Klein, Women's Two Roles and Postwar Feminism 1945 - 1960" in Harold Smith (ed.), p. 173.

471. Brittain, Vera (1953) Lady into Woman, Andrew Dakers: London, p. 77.

472. Deutsch (1946) p. 124.

473. Deutsch (1946) p. vii.

474. In her references she cites Karen Horney, Margaret Mead, and Clara Thompson all of whom emphasised the effect of culture on women's psychology. Clara Thompson (1942) went on to develop a feminist critique of Freudian psychoanalytical ideas of a feminine nature declaring that "the basic nature of woman is still unknown." p. 339. Deutsch cites Thompson's (1941) "The role of women in this culture", Journal of Biol. & Path. Interpersonal Relations, Vol. 4, No. 1. Karen Horney (1937) argued that neurotic tactics found more commonly in women than men were the "result of the conditions under which women have lived" for centuries, not female nature. Later she specifically disagreed with Deutsch's formulation of women as basically masochistic: "For example we cannot, with H. Deutsch, interpret the fact that in our culture women have pains in childbirth as a proof that women secretly enjoy these pains masochistically", p. 261.

475. Deutsch (1946) p. 304. These were her conclusions to her book.

476. Deutsch (1946) p. 119-120.

477. Deutsch (1946) p. 123.
478. Deutsch (1946) decided to "replace the term "female castration complex" by "genital trauma," which more exactly expresses our own view of the process referred to", p. 119, note 2.
479. Deutsch (1946) p. 124.
480. Deutsch (1946) p. 135-6.
481. Cobb, Stanley (1946) "Forward", p. vi, in Helen Deutsch.
482. Greenacre, Phyllis (1950) "The Prepuberty Trauma in Girls", Psychoanalytic Quarterly, 19, pp. 298-317.
483. Greenacre (1950) p. 299.
484. Benedek, Therese F. (1959) "Sexual Functions in Women and their Disturbance", in Arieti, Silvano (ed.) American Handbook of Psychiatry, Basic Books: New York, p. 729.
485. Deutsch (1944) referenced Chadwick (1932) and Deutsch (1925).
486. Benedek, Therese (1952) Psychosexual Functions in Women, The Ronald Press: New York, pp. 329-330.
487. Benedek (1959) subscribed to the view that there was often a period of adolescent sterility after the onset of menstruation, p. 731.
488. Benedek (1959) p. 731.
489. Benedek (1959) p. 731.
490. Benedek (1959) p. 733.
491. Benedek (1959) p. 732.
492. This is cited by Margaret Faust (1960); Elissa Koff, Jill Rierdan, and Stacey Jacobson (1981) "Personal and Interpersonal Significance of Menarche", Journal of the American Academy of Child Psychiatry, Vol. 20, pp. 148-58; and Diane Ruble and Jeanne Brooks-Gunn (1982a).
493. Jones, Mary and Mussen, Paul (1958) "Self-Conceptions, Motivations, and Inter-personal Attitudes of Early- and Late-Maturing Girls", Child Development, Vol. 29, pp. 491-501.
494. Mussen, Paul and Jones, Mary (1957) "Self-Conceptions,

Motivations, and Inter-personal Attitudes of Early- and Late-Maturing Boys", Child Development, Vol. 28, pp. 243-56.

495. In Jones and Mussen (1958) they cite H.E. Jones (1940), (1943) and (1949), see references for details of publications. In addition they actually used some of the data "obtained by Harold E. Jones in connection with a test program at the Institute of Child Welfare." See Jones and Mussen (1958) and Mussen and Jones (1957), note 1, first page of each article.

496. In Mussen and Jones (1957) they cite Stone and Barker (1939). It is interesting that they only cite this article in their article on boys and not the one on girls.

497. Davidson, Helen H. and Gottlieb, Lucille S. (1955) "The Emotional Maturity of Pre- and Post-Menarcheal Girls", The Journal of Genetic Psychology, 86, pp. 261-6.

498. Smith, Wendell and Powell, Elizabeth K. (1956) "Responses to Projective Material by Pre- and Post-Menarcheal Subjects", Perceptual and Motor Skills, 6, pp. 155-8.

499. Davidson and Gottlieb (1955) p. 261.

500. Smith and Powell (1956) p. 155.

501. Jones and Mussen (1958) p. 491.

502. Although race, class, sexual orientation, and dis/ability are outside the scope of this thesis, I do want to remind readers that these 'normal' subjects of child psychology were a rather specific group of girls. They were from the United States, assumed to have heterosexual and feminine interests, their social class was either 'insignificant' or higher status, and their ethnic/racial background and dis/ability were not specified indicating they were primarily North European and not disabled; thereby, positioning any girl outside of this rather narrow category as 'abnormal'.

503. Riesman, David (1959) commented on adolescent males 'early' sexual experience, a growing blandness or delinquency, and a social concern over, and fear of, homosexuality, in the "Introduction" to Friedenberg, Edgar Z. The Vanishing Adolescent, Dell Publishing Co.: New York, pp. 7-18. Peter Blos (1962) in On Adolescence: A Psycholoanalytic Interpretation, The Free Press: New York, "Chronological Bibliography of the Psychoanalytic Literature on Adolescence", pp. 245-252, recorded a growth in studies on juvenile delinquency in the post-war period.

504. Kestenberg, Judith S. (1964) "Menarche", in S. Lorand and H.I.

Schneer (eds) Adolescents: psychoanalytic approach to problems and therapy, Harper and Row: New York, p. 36.

505. See Patricia Graham (1970) for a discussion of the numbers of women in higher education.

506. Riesman (1959) p. 15.

507. Riesman (1959) p. 11. When the generic 'adolescents' were discussed, not only was 'he' always used in this literature but normally the subjects under discussions were in fact literally boys, not girls.

508. Riesman (1959) pp. 8-10.

509. Friedenbergr (1959) p. 17.

510. Blos (1962) p. 3.

511. Although psychoanalytic theory disrupts the unitary, autonomous, and rational subject of Western social science, in the 1960s literature I discuss here it tended not to challenge an essentially biological and conservative concept of human sexuality and sex differences.

512. Blos (1962) p. viii.

513. Blos (1962) p. 8. This book was cited in a number of later works on menarche including Whisnant and Zegan (1975) and Koff, Rierdan, and Jacobson (1982).

514. Blos (1962) p. 165.

515. Blos (1962) p. 28.

516. Blos (1962) p. 25.

517. Sheila Rowbotham (1973) argues that the women's movement came out of women's dissatisfaction with the domestic sphere, as she said "the social expectation had changed" and "significant numbers of women felt entitled to a destiny which was not simply domestic", p. 7.

518. Riesman (1959) acknowledged the inequality of "women, the poor, even the Negro", p. 9, but considered their position to be improving so that the adolescent became "the favourite rebel without a cause".

519. This is perhaps most clearly encapsulated in the United States by the publication and popularity of Betty Friedan's (1963) The

Feminine Mystique, Norton: New York. In Europe, Pat Thane (1991) comments on the "immense impact" of Simone de Beauvoir's (1953) English translation of The Second Sex and Doris Lessing's (1962) Golden Notebooks, p. 199.

520. Kestenberq (1964) pp. 19-50.

521. Shainess (1961).

522. Kestenberq (1964) p. 19.

523. Kestenberq (1964) p. 20.

524. Kestenberq (1964) pp. 36-7.

525. Shainess (1961) p. 20.

526. Shainess (1961) p. 22.

527. Shainess (1961) p. 24.

528. Shainess (1961) p. 25.

529. Whisnant and Zegans (1975) p. 809.

530. Whisnant and Zegans (1975) p. 813.

531. Whisnant and Zegans (1975) p. 813.

532. Whisnant and Zegans (1975) p. 814.

533. Whisnant and Zegans (1975) p. 809.

534. Rowbotham (1973) p. 168. See Sheila Rowbotham (1973), Pat Thane (1991), Elizabeth Meehan (1990), Maggie Humm (1992), Naomi Weisstein (1993) for discussions of the Women's Movement and the Second Wave of Feminisms in Britain and the United States. See references for details of publications.

535. From conversations with women psychology lecturers, menstruation and menarche are topics of great interest to undergraduate and postgraduate women students. I have found a number of doctorate dissertations which have never been published. This informal information could indicate that menstruation and menarche may have been researched more than published or at the very least would be researched far more than it has been if the opportunities were available.

536. Graham (1970) p. 1284. See Patricia Graham (1970) for a general

discussion of women's position within the academy in the United States up to 1970 and Celia Kitzinger (1993) p. 190 for a comment on the academic position of women psychology lecturers in the late 1960s. These authors comments were specifically related to the United States, but I am sure the position was no better in the United Kingdom. Certainly in Great Britain in 1972, only 10% of all university full-time teaching and research staff were women. These are the earliest statistics available on the number of women in academic posts from the Statistic of Education, D.E.S. Universities Grants Committee, Vol. 6, Table 30.

537. In conversation about this point with a senior woman academic who was in Higher Education in Britain during this period, she considered that the male hegemony was so dominant as to be invisible and that the few women in academic life worked within these dominant theories and interests. Also she pointed out that most of these women were from privileged backgrounds so that they had never experienced the harsher realities of discrimination. In her words, "we were very naive and only thought we had to gain entry to be equal." This point is supported by the comments of Meg Stacey of the University of Warwick in the "Foreword" to Sophie Laws (1990) p. x.

538. Paige, Karen E. (1973) "Women Learn to Sing the Menstrual Blues", Psychology Today, 7(4), p. 41.

539. A well known example of this approach is the work of Katharina Dalton during the 1960s. See Jane Ussher (1989) for specific references.

540. Some of the earliest second wave feminist critiques of menstrual cycle research was on premenstrual syndrome and symptoms, for example, Mary Brown Parlee (1973) "The premenstrual syndrome," Karen Paige (1973) "Women learn to sign the menstrual blues", Randi Koeske and Gary Koeske (1975) "An Attributional Approach to Moods and the Menstrual Cycle".

541. Reason, Peter and Rowan, John (1981) (eds) Human Inquiry. A Sourcebook of New Paradigm Research, John Wiley & Sons: Chichester, New York, Brisbane, Toronto, p. xi. Social psychology was considered in crisis and in need of reconstruction, see N. Armistead (1974) (ed.) Reconstructing Social Psychology, Harmondsworth: Penguin.

542. See Corinne Squire (1989) for a discussion of cognitive theories and humanistic psychological theory, particularly as it relates to feminist interest, pages 70-4.

543. Mednick, M.T.S. and Weissman, H.J. (1975) "The Psychology of Women - Selected Topics", Annual Review of Psychology, 26, pp. 1-18.

544. These included articles by Mary Brown Parlee (1975) "Psychology", Signs: Journal of Women in Culture and Society, Vol. 1, No. 1, pp. 119-38 and Virginia L. Ernster (1975) "American Menstrual Expressions", Sex Roles, Vol. 1, No. 1, pp. 3-13.

545. Parlee (1975) p. 119.

546. Thane (1991) p. 204.

547. Meehan, Elizabeth (1990) "British Feminism from the 1960s to the 1980s", in Harold Smith (1990) (ed.), p. 194.

548. This book has run to a number of reprintings. I quote from the (1976) edition by Paula Weideger, Menstruation and Menopause: The Physiology and Psychology, The Myth and Reality, Alfred A. Knopf: New York.

549. Delaney, Janice; Lupton, Mary Jane; and Toth, Emily (1976) (eds) The Curse: A Cultural History of Menstruation, E.P. Dutton: New York.

550. See Sophie Laws (1990) for a critique of what she called "the psychoanalytic/matriarchalist and the essentialist radical feminist schools of thought" in which she included these two authors, p. 15.

551. Meehan (1990) p. 194.

552. Miller, Jean Baker (1975) "Foreword" in her (1976) Toward a New Psychology of Women, Penguin: England, p. ix.

553. Weedon (1987) commented that "the last fifteen years have seen the beginnings of a radical shift in the degree to which women are represented in knowledge production and the production of theory both inside and outside official education and research", pp. 13-4.

554. Thane (1991) p. 206. The situation for women in academic posts in Great Britain had only marginally improved by 1982 to 12%; however, by 1992, women academics in full time posts had increased to 25%.

555. Clarke and Ruble (1978) p. 231.

556. As I write this I have opened on my desk one of my university psychology textbooks by L. Joseph Stone and Joseph Church (1967) Childhood and Adolescence. A Psychology of the Growing Person, Random House: New York with a foreword by Otto Klineberg, Professor of Social Psychology, University of Paris. This book was copyright in 1957 and was in its seventeenth printing by May 1967. Not only does the "Table of Contents" support this point with its headings for "Trends in Child Care", "Psychosexual Development", "Sex Roles and

Sex Differences", "Adolescent Sexuality", "Helping the Adolescent into Adulthood", "Parents", "School and Society", and "Disturbances in Development" but in the foreword Otto Klineberg wrote of the book as required reading for child psychologists, educational psychologists, teachers and school administrators, social workers, paediatricians, and not least fathers and mothers.

557. See Ruble and Brooks-Gunn (1982a) and Brooks-Gunn and Ruble (1982b).

558. Again I have included adolescent and developmental psychology in the category of child psychology. The other ten articles were spread among the following disciplines: primatology (1), anthropology (1), medicine (2), psychoanalysis (2), neuroscience (1), educational psychology (1), sport psychology (1), social psychology (1).

559. Clarke and Ruble (1978) p. 234.

560. Brooks-Gunn and Ruble (1982b) p. 1576.

561. Ruble and Brooks-Gunn (1982a) p. 1557.

562. Brooks-Gunn and Ruble (1982b) p. 1568.

563. Logan, Deana D. (1980) "The Menarche Experience in Twenty-Three Foreign Countries", Adolescence, Vol. 15, No. 58, Summer, p. 287.

564. Rierdan, Jill; Koff, Elissa; and Stubbs, Margaret L. (1989) "Timing of Menarche, Preparation, and Initial Menstrual Experience: Replication and Further Analyses in a Prospective Study", Journal of Young and Adolescence, Vol. 18, No. 5, p. 414.

565. Scott, Clarissa S; Authur, Danette; Owen, Roger; and Panizo, Maria Isabel (1989) "Black Adolescents' Emotional Response to Menarche" Journal of the National Medical Association, Vol. 81, No. 3, p. 289.

566. McGory, Arlene (1990) "Menarche: Responses of Early Adolescent Females", Adolescence, Vol. 25, No. 98, Summer, p. 265.

567. Rierdan et al. (1989) p. 413.

568. McGrory (1990) p. 265.

569. Flaming, Don and Maise, Janice M. (1991) "Boys' experiences of pubertal change", Issues in Comprehensive Paediatric Nursing, Vol. 14(4), pp. 211-30. A brief search of articles on boys showed the primary concerns are with juvenile delinquency, drugs, psychopathology, adjustment issues, and sexual practice -

masturbation, heterosexual practice, and homosexual contacts. When seminal emissions was searched as a possible commensurate physical event for boys to menarche for girls, seven articles appeared - all on male rats.

570. See Sophie Laws (1990).

571. McGory (1990) p. 265.

572. Rierdan et al. (1989) p. 413.

573. Weideger (1976) p. 3.

574. Ernster (1975).

575. Joffe, N.F. (1948) "Vernacular of menstruation", Word, 4, pp. 181-6.

576. Boone, L.P. (1954) "Vernacular of menstruation", American Speech, 29, pp. 297-8.

577. Larsen, V.L. (1963) "Psychological study of colloquial menstrual expressions", Northwest Medicine, 62, pp. 874-77.

578. Ernster (1975) p. 4. For her analysis she drew on the file on American Menstruation Folkspeech from the Folklore Archives of the Anthropology Department of the University of California, Berkeley.

579. Foucault (1976) discusses how there emerged a technology of sex which expanded along three axes one of which was "medicine, whose objective was the sexual physiology peculiar to women" (p. 116) and whose practice required symptoms to be "spoken in time, to the proper party, and by the person who was both the bearer of it and the one responsible for it" (p. 67), in this case the menstruating woman.

580. Huffman, John W. (1975) "Principles of Adolescent Gynaecology", Obstet. Gynecol. Annual, 4, p. 287.

581. Huffman (1975) p. 287.

582. Huffman (1975) p. 306.

PART III

BRITISH ADOLESCENTS

AND

DISCOURSES OF MENSTRUATION

INTRODUCTION

Having established the status of the menarcheal girl in psychology and related human sciences in Part II of this thesis, I now go on in Part III to analyse the status of the menarcheal girl in contemporary British culture and the effects of that status on pre- and postmenarcheal girls' subjectivity. I do this by returning to the group discussions and interviews discussed in Part I in order to present a feminist poststructural discourse analysis of the inscription of young British adolescents into menstrual discourse.

What we shall see in these young adolescents' talk is the dominance of patriarchal scientific discourses of the female body and menstruation - discourses in which the female body is constituted as incommensurately different from male body, the male body is constituted as superior through its normality to the female body, and the female body is constituted as the always already sexual and reproductive body fascinating yet somehow embarrassing and shameful. Menstruation is seen as an essentially female and extra-ordinary process. When it is understood at all by adolescents, it is usually understood within the scientific discourse of the reproductive cycle linking menstruation to fertility. Although there are some traces of older discourses of menstruation as a healthy nutritive or plethoric process, the scientific and medical discourses of menstruation as failed reproduction associated with pathology are dominant.

There is less evidence of the insertion of these adolescents into the 20th century psychological and human sciences discourses of the onset of menstruation as either a trauma, a developmental milestone, or a symbol of womanhood and femininity. If menarche has any significance for these adolescents, it is as a sign of growing up and fertility. What this research into the status of the menarcheal girl shows is not so much the particular significance of psychological discourses of menarche and its effects on girls' subjectivity, but the dominance of sexist discursive practices of

refusing the female body and functions a place in the everyday and normal social world. The dominance of scientific and medical discourses of menstruation and menarche make it a biological, pedagogical and pathological object removed from everyday practice and conversation. This has left adolescents with limited and I would claim largely sexist knowledge and experience of menstruation. And it is from this limited and sexist knowledge and experience that girls take the meaning of their menstrual expectations and experiences.

It is the inscription of young adolescents into these dominant scientific and patriarchal discourses and practices of the female body and menstruation and their effects on girls' subjectivity which are the focus of this analysis in Part III of my thesis. Although Part II is essential to this thesis and links between the two parts are made, my purpose here is not to draw the reader's attention directly to the continuities and discontinuities of previous and present psychological and related human sciences discourses to those of adolescents. Rather in Chapter 8, I want to discuss the discourses and practices available to young adolescents in relation to menstruation and, therefore, what menstruation has come to mean for them and how these discourses, practices and meanings constitute girls' subjectivity. And in Chapter 9, I want to go on to discuss the discourses available to girls to understand their changing body, how their subjectivity is constituted in relation to learning about menstruation and, subsequently, how girls understand and explain menarche and menstruation.

CHAPTER 8

GIRLS AND BOYS TALKING (bleeding) BODIES:

young adolescents and discourses of menstruation

Which do you think is easier, being a girl or boy?
I think it is easier to be a boy because you don't have to go through periods and things like that.

Do they teach you about physical development in school?
They [school teachers] don't talk about the boys very much, only the girls = yes = yes.
It doesn't seem fair. They are laughing at us. Not much seems to happen to the boys.

What did you think when you first learned about menstruation?
It is like they are talking about something else, really far fetched. It is like a movie.
So we didn't understand it at all.

Quotes from Group Discussions

In this chapter I analyse the status of the menarcheal girl in contemporary British culture and explore its effects on young adolescent girls' subjectivity. This is done through a discourse analysis of group discussions with young adolescents. These discussions were held in a secondary school in the South West of Britain with 3 groups of girls and 3 groups of boys aged 11 to 12 years old.

AIMS

Asking new questions

As a consequence of my move from a more traditional psychological theory and methodology to a 'new' and different poststructural discourse analysis the aims of this part of my research changed from investigating "The experience of menarche: effects of physical development and sexual maturity on girls' self-regard and possible selves" (my original title) to questions of:

- 1) What discourses and practices are available to young adolescent girls and boys in relation to menstruation; and therefore,
- 2) What does menstruation come to mean to them; and

3) How do these discourses, practices, and meanings constitute girls' subjectivity.

METHODOLOGY

Doing a 'new' analysis

I now went back to the series of group discussions that I had held with young adolescents on "Growing up" to do a feminist poststructuralist discourse analysis of the inscription of young adolescents into menstrual discourse. And although the detailed information on the participants and methods of gathering are presented in Part I of this thesis, I want to remind the reader about the group discussions and explain the methods I used to do this part of the research.

GROUP DISCUSSION PARTICIPANTS

Talking about 'Growing up'

These group discussions with young adolescents were done at the very beginning of my research. The purpose was to encourage them to talk about different aspects of being a girl or boy 'growing up', including puberty and menstruation. The discussions were held with single sex groups using an informal format in order to encourage a "diversity of participants' accounting practices".¹ I thought informal groups would produce a wider range of material than the more traditional formal interview with a set of specific questions. There were 6 discussion groups with consisted of

<u>Ban</u>	<u>Girls</u>	<u>Boys</u>
Low	Group 1, 5 girls	Group 2, 9 boys
Middle	Group 6, 7 girls	Group 5, 4 boys
High	Group 3, <u>6 girls</u>	Group 4, <u>2 boys</u>
	TOTAL 18 girls	TOTAL 15 boys

The groups are numbered in the order in which I saw them.

(See Chapter 1, PHASE ONE, for details of the participants and their recruitment.)

Although problems and 'mistakes' in research are often smoothed over in accounts, I want to remind the reader that these group discussions were done before I had adopted my present theoretical position. When I planned them I thought of them as either focus groups or a pilot study, but as soon as they started I realised they would be invaluable as a study in themselves. Even though I was undecided on my exact approach, I knew I was not attempting to test attitudes or beliefs, nor trying to obtain representative, significant, or normative data.

METHODS

data collection - having and recording discussions

For the discussions, I used a semi-structured guide (see Appendix D). Although I wanted the adolescents to "elaborate on their views in a relatively naturalistic conversational exchange",² I needed the discussions to cover the same topics more or less systematically. I used the guide as a prompt sheet for myself referring to it more or less depending on how the discussions developed. The groups meet in empty offices or classrooms. I audio-recorded them using a standard portable cassette recorder with a small high quality microphone.

data processing - making notes, doing transcriptions, using

ETHNOGRAPH

As soon as possible after each discussion group, I took structured process notes (see Appendix E). These notes proved invaluable to me in two ways: First, doing them made me reflect on and record my own reactions to and handling of the discussions; in a sense a form of supervision. Second, I have a reflective record to use as part of any subsequent analysis (see last section of this chapter).

I personally transcribed the discussion groups on to a word processor using a consistent orthographic system which I developed. Although at the time of the original transcription I did not have an exact analysis, I did know it would be more content oriented than language oriented. I was interested in adolescents' comments on puberty, bodies, and menstruation: what they would actually say and not say.

For this discourse analysis, I decided to use THE ETHNOGRAPH,³ a programme for computer assisted analysis of text based data. I had to change the formatting conventions in my transcripts, but none of the text. At the same time I adopted the more standardised form of notation developed by Gail Jefferson⁴ (see Appendix L). Fortunately, it was remarkably like the one I put together myself so very few changes were needed. I did not use notations indicating the timing of pauses as these were not part of my analysis.

These changes in transcription conventions were not ideal and were time consuming. If I had been doing a more language based analysis, I am sure they would have far more problematic. As it was I had several printed transcripts to which I could refer if questions arose about the data or original notations: there were the original ones, the one with the more standardised form of notation, and the printed ones from THE ETHNOGRAPH.

My use of THE ETHNOGRAPH in the data analysis was useful for what could be called the mechanical part of qualitative data analysis. It does not take over the interpretive or 'thinking' part of the work, but it does take over the cutting and pasting activities. It enabled me to code, recode, and sort my data files into analytic categories and discourses. With THE ETHNOGRAPH, I could review text, mark segments, and then display, sort, and print segments in any order or sequence I desired and identify as well as cross reference text. Furthermore, I could revise my coding scheme as I went along. I found it particularly useful to print out all the text in a particular category, for example: constructions of the

body. Then using these print outs, I could cross reference segments with complete transcripts for analysis.

initial content analysis - becoming intimately familiar

I read (and re-read) the transcripts in order to do an initial content analysis as well as to thoroughly familiarise myself with the text.⁵ It is important to emphasise that this analysis was not an inductive context analysis in which I assumed that if I read the girls and boys' 'authentic voices' carefully enough that I would begin to discern the 'unheard' and 'unimagined'. My analysis was done in the light of my discursive history of the cultural and psychological construction of the female body, sexuality, and menstruation. It was this research that ~~gave me a position outside~~ **enabled me to be self-reflective about th** present dominant discourses, ~~from which~~ **and therefore** to identify present discursive practices. Without this critical position, I could only reproduce the dominant discourses because my subjectivity has been produced within the same culture and by the same power relations as the adolescents I am researching.

category sorting - being overwhelmed

Having become intimately familiar with the content of the transcripts, I sorted the text into categories using THE ETHNOGRAPH. Some text was used in more than one category because it has multiple meanings and references. Then I printed the sorted output. This generated an enormous amount of information and paper: I had created over 50 categories. I ended up literally with about two inches of printed sheets, about 250 pages of categories. I realised that THE ETHNOGRAPH programme could only assist my analysis, not do it. I needed a focus for the research otherwise I would be overwhelmed by data.

analysis - (re)finding a focus

At this point, I returned to the three aims of my research to structure my analysis. Under each question, I printed the relevant sorted categories cross referencing them with the complete transcripts. Using these categories and transcripts, the knowledge

gained from my historical and cultural analysis, my own experiences as an adolescent and woman, my own experiences of conducting the research and my own intuition,⁶ I prepared the following analysis.

ANALYSIS, FINDINGS, AND DISCUSSION

1) What discourses and practices are available to young adolescent girls and boys in relation to menstruation?

I began the analysis by considering what social discourses and practices adolescents might have available to them to make sense of menstruation. As young adolescents none of the boys and few of the girls in their first year of secondary school would have had personal or direct experience of menstruation; therefore, I assume that both the content and context of their learning about menstruation and the things with which it is connected will constitute its meaning for them.

First I discuss the adolescents' discussions of "growing up". I started each group discussion with this topic, in part because I had assumed that it be a context in which adolescents' could talk about the body, gender, and menstruation. The analysis reveals that there are similarities in the boys' and girls' conversations and experiences of growing up. Most looked forward to less school work and the ending of examinations. The first comment in one girls' groups was typical.

Girls Group 3

Q: Tell me a really good thing about growing up []

A: Your exams go past.

The tests easier.

Both boys and girls expressed the desire for having a "girlfriend" or "boyfriend":

Girls Group 1

And getting a boyfriend.

Boys Group 2

Get a girlfriend []

Yes, have a girlfriend on the back of a motor-bike.

But a number of adolescents talked about not wanting to grow up because "being young" was more pleasurable: there were less worries and responsibilities.

Girls Group 1

A: I would like to stay younger.

You have to get money out and worry about a house and a car. Cheques and children.

Boys Group 4

A: The same [], I don't want to grow up []

You don't get what you want so much.

However, the boys' and girls' discussions were more marked by the differences in their conversations with me than by the similarities. Although these adolescents could be seen to inhabit the same physical and cultural world, their social and subjective world was, and is, different. The girls talked about their desire for more independence and less adult concern and control with a number wanting to leave home. There was an eagerness to escape the confines of the female adolescent "moment" in which people "worry" about them; yet their futures appeared vague, unplanned and unknown, and full of responsibilities. The comments of the girls capture this female adolescent world:

Girls Group 6

When you get older then you have to think about what you are going to do with your future and that's worrying.

I don't know. I want to grow up quicker. At the moment we have to stay at home and if you want to go out then you have to get your parents to take you out whereas when you get older then you just do what ever you want =

Be more independent =

yes = yes = yes

I don't know. I'm looking forward to it but its not going to be any better than now because there is still going to be trouble but they will just be different. It won't be childish trouble but grown up trouble.

Girls Group 1

They worry about you if you drink or smoke or *something*⁷.

People worry more about you when you are a teenager.

[]

When you grow up and go out then your parents want to know where you are going and like that. They kind of stop you and then you feel upset about it when you grow up.

In marked contrast to the girls, the boys talked about getting married and the jobs they desired. They did not appear constrained or confined by adult concern about them, rather their difficulties were about their misbehaviour, "getting into trouble". When they talked about their growing up, they talked about a 'male' future of freedom from school and having jobs (and a wife); not freedom from their parents.

Boys Group 2

Good thing [about growing up] .drive a motor-bike.

Get girlfriends.[]

Have a family.

Finish exams.

Getting married, getting a job.

Boys Group 5

I look forward to being about 20 because I can get a job then.

Looking forward to getting out of school.

[]

I get into trouble alot of the time.

I'm looking forward to it because when you get out of school you can do what you want. I want to be a chef but I don't know now.

I want to be an architect =

= Fly a helicopter. Be in the Air Force.

In these adolescents' conversations, the more difficult aspects of adult responsibilities and "grown up trouble" features in the futures of girls rather than boys, and it is based on the body. Because although adolescents know from their own lives that women can work and men can stay at home, it is the grown up female body which 'bleeds', 'births', and has 'breasts'. As the boys in group 5 said:

Boys Group 5

I think it is easier to be a boy because you don't have to go through periods and things like that.

And you don't have to have children.

And you get to get out of the house.

We have to do the jobs more.

Men can stay at home and not go out to work.

My dad stays home in the afternoon [] and my mum goes out to work in the afternoons. They both work.

My mum is a hairdresser [] and my dad is a teacher.

It was the bodily aspect of growing up that girls found the most problematic. In the group discussions they would allude to the body by talking about "When you are growing and *everything* ... well getting taller, I don't like it" ; or when I asked a group of girls "What is it that you don't like about growing up then?", there was a long pause with this evasive description of getting "moody":

Girls Group 6

A: [long pause]

When you get adolescent then people say that you get really moody. Everybody thinks that adolescents are really moody and get into tempers and lock themselves into their bedrooms and *everything* and starve themselves and all sort of stupid things.

When I followed this comment with another question about being an adolescent, the girls referred again to this "moody" discourse:

Girls Group 6

Q: What does that mean to you to be an adolescent?

A: That you are moody.

I had to ask direct questions about physical aspects of growing up or the differences in boys and girls in order to open a discursive space about the body, and even then the girls found this talk difficult and embarrassing.

Girls Group 3

Q: What are the big differences in being a boy growing up versus a girl?

A: GGGGGGGGGGGGGGG [giggling]

Q: What's that then?

A: GGGGG [pause] GGGGG

You shouldn't say that ... [a girl said something inaudible] she [the interviewer] is the one who speaks.

Q: Is it all really embarrassing about growing up?

A: Yes [yes [yes GGGGG

In part their difficulty and embarrassment was the function of British culture's regulation of the body and sexual relations between adults and adolescents. Such bodily matters are not openly or easily discussed in public or across age or gender. This difficulty with an authoritative adult was explicitly acknowledged by the above girl in

her comment to another girl, "You shouldn't say that [] she is the one who speaks". Even though the girls and I are of the same gender, the dominant practice is that such matters are not talked in the presence of adults or in public. They are at best "private", confined to talk in the toilets, "we talked about it in our loo"; and at worst not spoken about even between mothers and daughters, as one girl said; "My mum isn't [able to talk about it]".

Even as a researcher I was caught by this dominant discursive practice, my first comment in my process notes from the first group discussion was

Process notes from girls group 1

I felt very unsure and a bit embarrassed to start.

And even though with experience this feeling changed,

Process notes from boys group 2

With the boys the embarrassment I had felt with the girls passed. But with nine of them who varied tremendously in sizes, I felt anxious.

the interviews with the boys were always influenced by their maleness and my femaleness. One example of this influence is that at no point in my discussions with the boys was seminal emissions or "wet dreams" broached,⁸ although it was raised in the girls' discussion groups.

Girls Group 3

Mrs. [teacher's name] did [talk about boys], she said about wet dreams and stuff. []

Within the public domain, 'intimate' bodily matters belong within what I call the 'private' discourse, not so much unseen and unspoken as covered up and hushed up. As one girl so explicitly explained,

Girls Group 6

[Buying sanitary products are] not like buying a toothbrush, because you don't go showing your underneaths. It is all very private. Because if it was all supposed to be shown then you won't wear clothes.

But more than this, I argue that the female body is culturally constructed as extra-ordinary and somehow embarrassing and shameful

whereas the male body is ordinary - neither the focus of attention or of oppression to the same extent as the female body. First consider three lines of text from girls' group 3. I had been asking them about their 'sex' education. They had commented that they had had to have it with the boys in their class at school. So I asked them

Girls Group 1

Q: Didn't you like that?

A: They showed women's GGGGG

Q: Which bits?

A: GGGGG

They could not openly discuss the female body, they just giggled.

It would be possible to read several meanings from this text. It could be argued that the girls were ignorant of the names for "women's bits". Or their giggling could be interpreted as laughter caused by the programme they were shown or the teaching - perhaps the teacher had made a joke - perhaps something humorous happened during the discussion group. But on the basis of my own experience of the groups discussions and my intuition, I argue that the female body is experience by these girls as embarrassing and somehow shameful. Here it is what is absent from the text rather than what is present which identifies the implicit theme⁹ of shamefulness. The girls cannot bring themselves to even name the parts of a woman's body. The girls' embarrassment was demonstrated by their repeated giggling, as indeed the girls above went on to confirm in their next statement: "It was really embarrassing".

The girls in the text above did not mention showing boys' or men's bodies. As developmental literature suggests that adolescents are generally very self-conscious and self-centred,¹⁰ then it could be argued that the girls' were only aware of references to females. However, other text from the group discussions supports my argument that the female body is culturally constructed as extra-ordinary whereas the male body is ordinary. In the discussion groups when

boys' physical development was discussed, there were no giggles or talk of embarrassment by either boys or girls:

Boys Group 4

Q: So no one has told you about the growth spurt, hair on your chest, the hormones going round?

A: In science we did some measuring the boys and girls like that [].

Boys Group 5

Q: What did they tell you about in the video [about puberty] then?

A: Just what you go through the stages.

My voice is breaking. []

Girls Group 6

Q: Do you think it is easier for boys [growing up physically] than girls then?

A: Yes = yes = yes =

because all they have is wet dreams.

The boys' body was talked about in the context of "videos", "stages", and "science". It was not talked about as embarrassing nor the object of ridicule or oppression. There was a different response when the boys talked about girls' physical development:

Boys Group 4

Q: Have they told you about what happens to girls when they grow up then?

A: GGGGG

They separate the girls in primary school to talk to them. But we don't know what it is about.

Boys Group 2

In the first year () oh yeah, if you laughed at it then you were sent out.

Yeah, if you laughed you were sent out.

Once again there was giggling about the somehow embarrassing and shameful female body. And even more there was a separation of the girl's body from science and the linking of it with sexuality which boys "don't (shouldn't) know" about.

As I have discussed in Part II, with the construction of female and male body as essentially different, the female body has become the reproductive and sexual body; and the object of both fascination and regulation. This fascination with 'women's' (not men's or girls') reproductive power has resulted in a focus on what is seen as

girls' sudden and problematic physical/sexual development, particularly their menstrual cycle. In contrast boys' development is constructed as a gradual growing up marked by largely unproblematic changes in size with only the "breaking voice" and "wet dreams" causing comment. The girls' comments demonstrate their acute awareness of this:

Girls Group 3

They [school teachers] don't talk about the boys very much, only the girls = yes = yes.

It doesn't seem fair. They are laughing at us. Not much seems to happen to the boys.

Girls all go funny shapes, yes, like that, yes.

[]

Because the boys, they don't really like change very much. They just get a little bit bigger.

[]

It feels like the girls go through all the changes because we are not taught anything about the boys *really*.

Girls do have more physical changes anyway. The boys don't grow up as fast the girls anyway.

Girls Group 6

Yes = yes = yes (it is easier for boys) because all they have is wet dreams. []

It must be easier for them. I doubt that (), I think that they might go through a bit of upsettedness but (not much).

[]

I don't know why it just happens so suddenly [she was talking about menstruation] like I don't know why it just likes starts so suddenly - at a certain age - just suddenly.

These discourses of the female and male body as essentially different, always already sexed, and private, regulate the knowledge that females and males have of the body. This is particularly true of the menstrual cycle with its association with female sexuality and fertility. As a result men's and boys' knowledge of and involvement with menstrual practices is strictly limited. This was clearly reflected in the text of this study. When I directly asked the boys about girls' physical development or menstruation, they were either silent or showed little understanding of any aspect of it.

Boys Group 2

Q: Have they [] taught you about what happens to girls []?

A: [silence]

Boys Group 5

Q: [] Have you heard of girls having periods? []
Did you understand at that stage?

A: No, not really

[]

So we didn't understand it at all.

Boys Group 4

Q: What do you think periods actually are?

A: [long pause]

Something about a release of tension.

No, I don't have any idea.

Not only was the boys' knowledge limited but they do not mention talking to their fathers about menstruation. If the boys discussed menstruation or asked questions, it was with their sisters or mothers. When I asked girls specifically if they talked to their fathers about menstruation, they overwhelmingly said no:

Girls Group 1

Q: Do any of your Dads talk to you about any of these things?

A: No.

Girls Group 3

Q: What about your Dads?

A: Well, my dad knows because my mum talks to my dad about it but I wouldn't talk to my dad about it.

No, I won't talk to my dad.[]

My dad's a doctor so when is he on call (...) So he can talk to ladies about it.

I think it is easier to talk to your mum because she is a woman = Yes.

I would argue that this circumscription of male knowledge and involvement in the menstrual cycle is not a deliberate policy of exclusion by authorities or a conspiracy by females. From the evidence of this study, boys as often as girls were given 'sex' education in schools. Women did talk to men and boys about menstruation particularly if asked or living together. And a number of both boys and girls considered that boys' should know about menstruation so that they would understand women's experience:

Boys Group 2

Q: Do you think boys should know about [periods]?

A: [] I think they should because they don't know what it is like for girls.

Girls Group 3

[We had been discussing education about menstruation and growing up. I asked the girls whether they thought girls and boys should be taught together or separately]

A: Girls alone.

No, I think that it should be together because then boys know.

Well, I think the boys should know but they shouldn't laugh at it.

And although the female body and menstruation was constantly referred to as a source of oppression and ridicule, as in the last line of text above, it was not always an embarrassing topic. As the above girl said about her "doctor" father, "he can talk to ladies about it" and another girl described her 'sex' education with boys and girls as:

Girls Group 3

[] it really wasn't that embarrassing. I think that the boys, if you do have it together, then the boys learn about it too.

Rather I would argue that boys' and men's knowledge of and involvement with menstruation is limited because it is constituted as a female and feminine subject whereas 'maleness' is constituted by its essential difference from females and separation from the feminine. Therefore, it can be argued that their masculinity is formulated in part by not being cyclical, not bleeding and not becoming pregnant. In a sense the masculine comes into being through absence (a Lacanian lack) of cycles and wombs. And consequently because adolescent boys don't bleed or become pregnant unlike adolescent girls, their bodies do not have to be regulated to the same extent as the menstrual and hence fertile female body.

Not only is male knowledge and involvement circumscribed but so is children's. With menstruation constituted as a sign of femaleness and fertility associated with sexuality as well as belonging to the "private" parts of the body, menstrual knowledge and practice becomes adult and female. As the dominant practice is for women to conceal their menstruation and conduct their menstrual

hygiene behind closed doors, this means that children normally have little direct contact with menstruation. The boys and girls in this study gave few indications of ever seeing anything to do with it or hearing it discussed openly either socially or at home. Even when they did learn about it through educational lessons or books, it was hard for them to comprehend. For the boys it seemed like some kind of amazing but "far fetched" female science fiction:

Boys Group 2

Q: Did you understand at that stage?

A: No, not really =

= because we were about 9 or 10.

It is like they are talking about *something else*, really *far fetched*.

It is like a *movie*.

So we didn't understand it at all.

Whereas for the girls it was more like a fascinating but frightening gothic horror story:

Girls Group 3

We had a book in our school .and, everybody when we had reading time, used to try to read it. The boys didn't know what it meant and none of us really did so we didn't understand it and thought it was funny =
= about getting pains and suddenly start bleeding, so that we got really worried = []
= so you make jokes about it and things.

As these girls grew older, they were exposed to more about the menstrual cycle both through education at home and school as well as females sharing their menstrual experience; however, this exposure was rarely progressive. Often it appeared that it was either so minimal and vague that it did not allay the girls' fears or answer their questions or the talk was grounded in the menstrual pathology discourse. The following extracts from the girls' discussions illustrate this:

Girls Group 1

Q: So did they tell you about girls having their periods and that?

A: Yes [] The boys had to go to a different lesson and *the girls didn't have to do anything*. []

No, I didn't have a class, my mum just told me about it.
 My mum's told me *a bit about it but not much*. []

Q: Have any of your periods started yet?

A: No, I get regular *headaches and stomach aches*, so I think my periods will start soon.
 I'm getting *pains* but that is all.
 My sister *got pains*, up here in her breasts. []

Q: [When I asked this group of girls why they thought women have periods, the response was:]

A: When you get pregnant you don't [have periods] because the baby needs to keep warm.
 [the other four girls were silent]

Girls Group 3

Q: Is there anything that you need to know more about?

A: No = no =
 = yes, about what sort of towel you use =
 = *and how it works*, it is too embarrassing.
 [] I knew a girl who had started and she said that it was like a *red hot poker stuck in her side* and that made me *really worried* []
 You hear some really funny stories and then you *really worry*.

Q: So you don't hear many good things about it do you?

A: No NO NO!!

On the basis of this analysis of these group discussions, I would argue that girls indeed do not experience or hear "many good things" about the female body or menstruation. This culture constructs the body as always sexed and problematic with the male body the normal body of hu/man science and activity. Boys' physical development becomes for adolescents a relatively straightforward process of just "getting bigger". It is as if the body is in the background of establishing masculinity - a masculinity which is acted out in the world and defined by its distance from the female body rather than being defined by the body. Boys' bodies although a potential source of regulation and embarrassment are not a focus of attention or oppression.

In contrast, the female body is constructed as extra-ordinary and almost abnormal - the body of sexuality, procreation, and menstruation both fascinating and frightening, of public interest yet "private" and "secret". Girls' physical development becomes for

adolescents a sudden and dramatic transformation from girl to sexual, fertile, and bleeding woman. It is as if the body is in the foreground of establishing femininity - a femininity defined by the female body itself rather than what girls might do out in the world. Girls' bodies through their developing sexuality and fertility become a source of adult concern and control, of male attention and oppression, and with menstruation of pain, moods, and hygiene problems.

It is these discourses and practices of the body, gender, and menstruation that are available to adolescents for making sense of menstruation.

2) What does menstruation come to mean to adolescents?

As a product of the female body connected to fertility and sexuality as well as a private bodily function, menstruation remains an extremely problematic subject for young adolescents, and researchers in the psychology of the menstrual cycle. Circumscribed by the various social taboos and etiquette of the body, sexuality and intimate bodily functions discussed above and lacking direct experience of the menstrual cycle, young adolescents' ability to articulate the place of menstruation in their lives is limited. But this limitation does not signify that menstruation is without meaning or significance for young adolescents: rather its meanings are not straightforwardly revealed through any texts or tests generated by research.

Menstruation is so problematic and often so undesirable a subject that adolescents do not even use the word menstruation; they say things like "*it* gets really embarrassing". As a result of this research I argue that to understand of what menstruation means to adolescents, it is necessary to investigate: what is not said as well as what is said, the social practices of the body and menstruation that adolescents experience, and signification.¹¹ As one girl said: "So you usually find out what it means from other people".

The problematic and undesirable nature of menstruation was demonstrated again and again in the text by the reluctance of the adolescents, and the significant adults in their lives, to open up the subject. No adolescent in these discussion groups directly talked about menstruation without me first explicitly opening that discursive space. It could be argued that with young adolescents and especially as boys, menstruation was not of interest or relevance to them. It was not, so to speak, on their minds. But the previous texts describing the girls and boys' interest in the books on the female body and the text below does not support this. As the following extract illustrates, when discussing 'growing up' the girls did allude to menstruation revealing its relevance to them, but their reluctance to directly name it also reveals its problematic meanings for them.

Girls Group 3

[We had been discussing growing up and the differences in boys and girls. I asked them if they had been told much in school.]

A: Yes = yes = yes

In our school, it was done in front of the boys and it was really embarrassing.

(several girls spoke at once)

They don't talk about the boys very much, only the girls.

Yes = yes

It doesn't seem fair. They are laughing at us. Not much seems to happen to the boys.

Girls all go funny shapes, yes, and *like that*, yes.

And it gets really embarrassing and she said things like (pause) *I've started*.

Girls Group 1

[We had been talking about aspects of growing up. Again these girls never directly talked about menstruation. Even when I asked them]

Q: Would you rather be a boy or a girl growing up? [They just responded with "a boy [a girl". When I asked the girls why they wanted to be boys, the response was:]

A: I don't know really I would just like to be a boy. They have more attention.

It was not until later in the discussion group, after we had discussed their 'sex' education in school, starting their periods and

worries about menstrual pain and discomfort that one of the above girls said why she wanted to be a boy.

Girls Group 1

Q: Do any of your Dads talk to you about any of these things?

A: No.

That's why I want to be a boy, because then you don't have to worry about all that stuff.

Although in part what is said about menstruation gives it its meaning, menstrual practices brings their own meanings both social and subjective, shared and personal. There are implicit messages about menstruation and the female body in where, from whom, and how children learn about them - and the reactions of those around them. Consider the following girls' talk:

Girls Group 1

Q: So did they tell you about girls having their periods and that?

A: Yes, there was this special teacher in our school. She teaches the girls. The boys had to go to a different lesson []. There was a T.V. programme in our other school and the boys had to work all the way through the lessons. [indicating they were separated from the girls]

No, I didn't have a class. My mum just told me about it.

My mum told me a bit.

My mum's told me a bit about it but not much.

Yes, and about babies.

This text captures much of adolescents' experience of menstrual discursive practices. Menstruation is often constituted as a "special" subject by being taught outside normal classroom curriculum and/or routine. Or it is experience by adults as so inappropriate or difficult for children that it is not taught at all or so minimally that the pupils either miss it or don't remember it, especially in primary school.

Girls Group 6

No they didn't teach us anything at school []

No, not at my school either.

When it is taught in schools, the girls and boys are separated with women having responsibility for the imparting of information. As

discussed above, males are rarely if ever involved. It becomes an overwhelmingly female subject, inappropriate for boys.

Girls Group 6

All the other years [have menstrual teaching] in a double games lesson. All the girls get a video and a talk and I think the boys have one of their own. [This is in their secondary school]

I won't tell a man [about her period]

[] My teacher is a woman so I would tell her.

Certainly mothers and less often other female relatives are an important source of knowledge. But even here within the private, intimate, and domestic sphere, the influence of the dominant discursive practices on women can be seen. Mothers will tell girls "a bit about it but not much" or they will be "embarrassed" with some mothers finding it so problematic that they do not discuss it at all.

Girls Group 3

My mum doesn't she is embarrassed.

My mum doesn't.

My mum doesn't but she would if I asked her.

Girls Group 6

My mum didn't [tell her about menstruation].

Boys Group 2

Q: Does your mum or your sisters say anything about it [periods].

A: No = no

Nor my mum.

My mum is too embarrassed to say anything.

It becomes like a secret, a family secret, in that everyone 'knows' about it but no one talks about it; therefore, the implicit message is of something shameful. Even when it is not a secret, it is a potential source of discomfort and embarrassment.

Boys Group 4

I asked my mum about it once, and she told me. She only tells me if I ask and I don't ask much because she sorts of laughs and I think, oh, what have I done?

In addition for girls menstruation and the female body is a source of oppression. Boys are described as pulling bra straps and ridiculing

the girls. Even younger girls are a source of embarrassment and exposure. The girls below describe these experiences:

Girls Group 3

Q: So they don't teach you about the changes the boys go through?

A: No, it doesn't seem fair because afterwards the boys tease you all about it. And they say things about your bras and they come along and tang it, pull your bra straps.[]

Q: So when the teachers talk about that, then the boys use that as a chance to tease you?

A: (A chorus of yeses)

They think it is funny when girls grow up. They laugh.

It is horrible and there are boys in our class that are particularly loud. Four of them sit in a corner.

It makes you feel really self-conscious and it makes you not want to talk about anything.

Yea = yea.[]

I just can't stand it when the boys laugh.

You don't just try to think about it then but you just laugh it off or try to pretend that it doesn't bother you.

Girls Group 6

With my little sister, she goes a bit far sometimes. She embarrasses me [] she just thinks that it is hysterical. She laughs at me.

I keep my [sanitary] towels in my drawer and last night, she got them out of the drawer and lobbed them into the lounge and says let me introduce you to Mr. White.

The body can be a potential source of embarrassment for boys as well as for girls as one boy describes:

Boys Group 4

Q: So was it [life skills which includes sex education] a little bit embarrassing?

A: Yes = yes

Because *if* you ask any questions then everybody has a look.

[] *If* the girls are with us and they are told what is happening to us and start pointing at us, then that wouldn't be alright.

Also during my data collection for this study, I witnessed three girls in an otherwise empty classroom teasing one boy (who had lost something) about losing "his balls".

It is as if society does have a fundamental problem with what Kristeva calls the *abject*: an irrational sense of disgust traced to the body and that of its mother.¹² But I would argue that if there is this pervasive and irrational disgust with the body in Western society, it does not affect boys and girls equally, but is acted out on the female body. If we compare the two extracts above, the boys in group 4 and the girls in group 3, the difference in the discursive practices between the two sexes stand out in sharp relief. These particular boys and girls are in the same class at school. The boys talk about "if you ask any questions" and "if the girls are with us". The boys in this group and the other boys' groups did not talk about having items of clothes pulled, loud groups of girls, laughing at books of the male body, talking only about changes in the boys, or being asked if you had "started". For boys their bodies are only a potential source of embarrassment, for girls their bodies are a source of oppression.

However, this is not an inevitable outcome of the physical actualities of the female body and menstruation even in our present society: The one boy did think boys "should" know. The one father "can talk" about it. One girl "wasn't that embarrass[ed]". Another girl openly "talked about it" and her mother was described as "[she] always talks to me [] always tries to make [me] feel at ease to talk to her about anything". Even taking part in the group discussions opened a different discursive practice. As participants said:

Girls Group 3

I think it is good to do things like this because you feel at ease to talk.

It was embarrassing at the beginning to have the discussion but not once you got started.

Boys Group 5

We haven't found this embarrassing.

This would be useful to have discussions like this, if we were like split up in class and told about it.

In their everyday life a number of girls did discuss menstruation with their friends and classmates even if they did not

discuss it with their mother. This appeared to ease their worries through sharing their concerns and occasionally their information, both helpful and unhelpful. However, for other girls menstruation was a taboo subject not discussed at school, at home, or even with their peers. They wondered and worried in silence. In addition, any information and stories that came their way were about menstrual "pains", "moods", "blood", or forbidden sexuality and fertility. There were few references in the girls' text to anything positive or advantageous about menstruating. The following exemplifies this aspect of menstrual discursive practice.

Girls Group 1

Q: Do you ever talk about having periods [] ?

A: No = no =

= I just worry about it when it comes.

I will worry about it when it comes.

I'm worried about it because my cousin who has already started. She said that you get alot of pain very often, and that is what got me worried because I started getting pains.

I'm worried if something goes wrong with your insides and that when you are starting. When you get it and get started then you get your blood pressure up.

Girls Group 3

All the pains you get before it and stuff - makes you all moody.

It appears when menstrual experiences are discussed, it is within the pathology discourse. If a woman's menstrual period is pain free, she just does not mention it.¹³

Girls Group 3

My headmistress said that when she started that she got stomach (pains) []

Girls Group 6

I knew I would [have pain] because my mother does, she has a lot of trouble.

Yes, so does mine.

Yes, so does mine.

No, *she doesn't because she doesn't talk about it.*

If the menstrual cycle brings women any pleasures or heightens any desires, this is apparently not discussed either openly and/or with

children or adolescents. No discourse of menstrual pleasures and desires appears.

The only positive meanings of menstruation for these girls was "growing up", "having babies", or not having to "worry" about when or where they might have their first period; but even these advantages were often considered a mixed blessing. First as I discussed above, many girls do not want to grow up seeing it as bringing unwanted control and responsibility. Second, with the start of menstruation they considered there will be hygiene problems¹⁴ and pain to contend with. As girls said:

Girls Group 3

[Starting your periods] will be nice because it is like you are grownup, but not the pain or the cotton wool stuck up your _____.

The benefits of "starting" their periods were couched in the dubious relief from "worry" about failing the cardinal rule of menstrual etiquette: all evidence of menstruation must be concealed. Without any direct experience of menstruation or any previous cycles to indicate when their next period might be expected, girls become extremely concerned about the "first" menstruation.

Girls Group 3

I think that it will be a relief when you start because then you won't have to like worry about starting in the middle of a French exam or something.
(Sighs and yeses all round)

Girls Group 6

I'm looking forward to getting it over and done with.
For the first =
yes = yea.

In the absence of experience of either their own or another's menstruation and not having graphic, specific information about starting their periods, pre-menarcheal girls can be frightened of this unknown but unavoidable event entailing "blood". In our society, blood signifies injury and/or attack,¹⁵ it is not connected with health or safety. When we are safe and healthy, our blood is inside our body both out of sight and out of mind. To bleed is to be

injured, to be attacked, or to be unhealthy or diseased. So when a young adolescent is told about a process in which the female body "bleeds", this idea must carry numerous culture and personal meanings - from the technicoloured media images of ritualised violence to childhood accidents. However, it is difficult for adolescents, or even adults, to articulate clearly this connection between menstruation - blood - injury - danger. Because we are taught the scientific discourse that menstruation is a "normal" and "healthy" sign of the fertile female body, its connection with injury or attack is suppressed.¹⁶ The boys never mentioned it. The girls only talked about it indirectly or fleetingly, but its associations with injury and danger are very clear.

Girls Group 3

About getting pains and suddenly start bleeding so that we got really worried.

Girls Group 6

[] we used to get really scared about aspects of growing up.

[] her mum just freaked out because I had nose bleed, right. She came rushing up to me panicking like hell, GGGGG [other girls], woke me up and just like said, Are you alright? Are you alright?

In addition as most adults are caught up in the 'correctness' of biological/scientific explanation of menstruation and are unpractised in discussing the details of female reproductive processes, few pre-menarcheal girls are given what might be called a phenomenology of menstruation¹⁷ and they find it extremely difficult to ask.

Girls Group 1

Q: So do you think that you get told enough about your periods in school.

A: No = no

Q: What would you like to know?

A: [silence]

Girls Group 3

Q: Is there anything that you need to know more about?

A: No = no

Yes, about what sort of towel you use.

And how it works. It is too embarrassing =

= so embarrassing because it is like you private parts.

Girls Group 6

[] I didn't actually know if it was my periods or not because it was just like a light brown stain.¹⁸

When pre-menarcheal girls say they do not know enough or ask "how it works", I would argue that they do not want a medical or biological explanation involving wombs, ovaries, eggs, fertility or failed reproduction. They want to know exactly and graphically what happens physically and what they should do about it.

As for the blessing of "having babies", even when this may be desired, the prospect of fertility and sexuality is very problematic for girls of 12 to 14 years old. Not only does it lead to the greater control and supervision which the girls discussed above, but they do not desire fertility at this age.

Girls Group 3

Q: What do you think will be good about it?

A: Growing up, that's the only good thing. And having babies.

But you don't want them now.

No, but it means that you can have babies if you do want them.

Girls Group 6

[] you shouldn't be able to have a baby for a while.

You shouldn't have a baby at [this] age anyway.

GGGGG

This link between menstruation and fertility is a dominant one in menstrual discursive practice. When adolescents are told about menstruation, it is explained as enabling women to "have babies". At the beginning of this study, I had placed menstruation within a health education or human biology discourse to be talked about in the context of physical maturation, physiological processes, and care of the body. However, in questioning the adolescents about 'growing up' or what I had constituted as 'health' education, they responded with 'sex' education. For all these adolescents, physical development and menstrual knowledge was linked with fertility, and hence sexuality.

Girls Group 1

Q: What about general information about growing and having your periods and having babies¹⁹ and things like that?

A: Yes, we had sex education at my old school.

Boys Group 2

Q: So did they tell you things about like when you have a growth spurt, about when you start to grow really tall [] and things like that? did they teach you about that?

A: We had sex education at school.

With the dominant discursive practices of menstruation, it comes to signify for adolescents the intimate, private, and always sexual female body. With its links to adult sexuality and female fertility as well as blood, it is both fascinating and horrifying, an ever present potential but largely unseen and unspoken practice. For boys, its essential femaleness and circumscribed practice constitutes it as a subject which males may exploit to construct masculinity and power, but not understanding or empathy. For girls, its construction within the scientific discourse of reproduction constitutes as a sign of desirable, if inappropriate, fertility. The medical discourse of pathology constitutes it as females' "raging hormones", pre-menstrual tensions, and painful periods. For adolescent girls, menstruation and the female body means undesirable attention, undesired fertility, restriction, and male oppression. And it is these discursive practices and meanings that constitute girls' subjectivity.

3) How do these meanings, discourses, and practices constitute girls' subjectivity?

In order to discuss the ways in which discursive practices and meanings constitute girls' subjectivity, I want to begin with an example from girls group 1. The girls had been discussing their 'sex' education which they had with the boys. This led to one girl describing an incident with a male teacher in her last year at primary school. This particular incident illustrates how the discursive practices of the female body and gendered power relations constitute female subjectivity.

Girls Group 1

[They had been giggling so I asked them:]

Q: [] Did you think that was really embarrassing?

A: He asked one girl to stand on the table and like turn around and like all this stuff and it was horrible. It was really embarrassing for the girl.

Q: What did he say about the girls standing on the table?

A: He said that as you can tell like I stood up and he said that she was a bit thin and I was a bit chubby and then she

turned around and he said look at the difference in these two backs and sorts of things like that.

In this situation institutional power, that of a teacher over a pupil, had been exercised in such a way that it re-produced the patriarchal practice of subjecting the female body to the male and public gaze. This is a painful scene to imagine. This was a primary school classroom of perhaps 25 to 30 children sitting at low tables. At this age some of the girls are developing into young women while most of the boys and many of the girls are still childlike. This age group can be very silly and prone to crude jokes and fits of giggles. Then one girl found herself instructed by a male authority to stand on a table in front of all the class so that her body could be looked at. And the result for this girl was "horrible".

It is not that this practice "affects" the girl's "attitude" to herself or her body as if these attitudes were some stable, pre-given, unified object to be influenced by events in the society. Her identity and subjectivity are constituted by the social so that a practice such as the one described above becomes part of the girl's subjectivity. And this girl's subjective experience of her body was transformed by gendered power relations into something "horrible".

Another text from the group discussions illustrates this transformation of the girls' body into a source of oppression and distress. Girls from group 3 were talking about the affects of boys teasing them as a result of the school 'sex' lessons:

Girls Group 3

Q: So when the teachers talk about that, then the boys use that as a chance to tease you?

A: [] It makes you feel really self-conscious and it makes you not want to talk about anything. []
I just can't stand it when the boys laugh.
You don't just try to think about it but you just laugh it off or try to pretend that it doesn't bother you. []
[boys] shouldn't laugh at it.
Because it puts us off and makes us hide it all inside.

These girls spoke of their distress when the female body and menstruation were the subject of laughter by boys, and their words captured how their subjectivity was constituted. It made girls "really self-conscious" about their body and constructed it as a source of discomfort. This practice may make some girls angry with boys: there was a hint of this in the girl's statement that she "just can't stand it when the boys laugh." At other times girls tried to deny or resist any affects by not "think[ing] about it" or "laugh[ing] it off". And as discussed earlier some girls given the opportunity will turn the tables on boys by teasing them about their bodies and/or sexuality. But the pervasiveness and power of this "patriarchal sexist discourse"²⁰ was indicated from the way the girls' qualified their statements with "you just *try* [not] to think about it" or "*try* to pretend that it doesn't bother you". Even when they resisted the boys' sexist practice by stating that "they shouldn't laugh at it", these social events were experienced subjectively. At the very least, girls' are "put [] off" their bodies and (potential) menstrual experience, and learn to "hide it all inside" - to keep their bodies and their experiences as unspoken and unseen as possible.

The dominance of this patriarchal sexist discourse and its effects on females' subjectivity is further illustrated by a reflexive analysis of one of my experiences as a female researcher. During the discussion groups, the boys in group 2 used this discursive practice with me: the effects on me were similar to the ones the girls described. The following extract with commentary is

of this incident. The text in [] is both from my process notes and my subsequent analysis.

Boys Group 2

[We had been discussing growing up and although the boys had been giggling alot causing me some concern about the progress of the discussion, I had continued with my questions, in effect, I was pretending that their behaviour didn't bother me.]

Q: Do any of you know why girls have those (periods)?

[The discussion quickly became chaotic and difficult for me both as a researcher and a woman. As a researcher I was supposed to control the conditions of the study. As a woman I found myself 'on my own' with a large group of young 'men'.]

A: I don't know.

GGGG giggling (not clear)

Q: Quit whispering. (boys whispering exaggeratedly)

A: GGGG giggling (not clear)

What did he say.

Tell us (-) come on tell us.

I'll tell it (not clear)

Come on tell me

(several boys start talking loudly all at once).

[A disjointed discussion about menstruation and sex education followed. Again I decided to ignore the boys' behaviour and continue to ask questions.]

Q: What do you think is good about being a boy as opposed to being a girl?

A: (Loud exaggerated COUGH COUGH loud talking)

You don't have to have billiards (breasts)

GGGG giggling

You don't have to have tits

GGGG giggling (loud talking)

They call them bosoms [they are called bosoms ()

Mam, mam, they knock you out

GGGG giggling

Well you say that (not clear)

No [no

[By this time, I was experiencing the boys' behaviour as smutty, sexist, and oppressive. I got angry with them, feeling like the girls that they shouldn't ridicule the female body. My next intervention was intended to shame them into better behaviour.]

Q: I can see why the girls wouldn't want to have sex education with the boys.

[However, my comment only confirmed their power and this encouraged them to exploit the power of this discourse further.]

A: GGGG giggling HaHaHa loud laughing (loud talking)
Oh don't be so disgusting
(loud talking) GGGG giggling
The boys don't have to have fannies (female genitalia -
or put more crudely, a cunt)

Once I understood what the boys meant by "fannies", I straightforwardly exercised the institutional power of the teacher and told them to be quiet; however, all I wanted to do was get out of the room as fast as I could. As I did not consider I could abandon this group in the deputy headmistress's office, I exercised what control I could and ended the discussion group as soon as possible. Once again like the girls caught in situations from which they cannot easily escape, I adopted the position of ignoring the boys' sexist behaviour as far as possible and attempting to conceal from them and to some extent to deny to myself the full effects of their behaviour.

It could be argued that this event was an empirical problem in that I did not handle the discussion correctly. Certainly, it is tempting to leave such an incident out of any analysis: the researcher is supposed to exercise control and power over the subject(s) - not the other way round. When I gave a paper at a research seminar which included this text, a (feminist) post-graduate student asked me, "Well, if you had been a man couldn't the same thing have happened?", implying that in some way I was to blame for this course of events. As women we often experience this patriarchal discourse of female guilt for inviting male oppression by our own behaviour. This was just the sort of reaction that had made me cautious about using a feminist reflective analysis, especially of this event. Fortunately, after a pause, she said "Of course, even it had, it would have been a different experience for a man because he would not have been the object of the discourse."

However, I argue that it was not my inexperience or mismanagement that led to this event. I was an experienced 40 year old secondary school teacher, youth worker, educational psychologist and researcher when this discussion took place. It was not my behaviour which led to this event, but my femaleness. In this context I became a woman in the company of a group of young men using a patriarchal sexist discourse. As Valerie Walkerdine discussed, these boys' behaviour can be understood as "their seizing of power through constituting her (the teacher or the interviewer) as the powerless object of sexist discourse";²¹ and I experienced it as oppressive and distressing.

IN CONCLUSION

I am not arguing that parents', educators' or adolescents' discourses of the female body and menstruation are necessarily or deliberately intended to be sexist or oppressive. Nor am I arguing that women's and girls' subjectivity is universal or unified. Women and girls will feel differently about their bodies and menstrual cycle in different social situations and with different personal experiences. There are a range of positions open to us but girls do come to learn what is socially expected of them in relation to their menstrual discourse and practice. Girls may accept these as the natural order of being feminine, or they may deny or avoid their maturing bodies for as long as possible by whatever means at their disposal, or they may offer resistance while complying to the expected menstrual practice. Yet, even when girls resist the dominant discursive practices of menstruation and the female body, and the:

subjectivity which it brings with it, we do so from the position of an alternative social definition of femininity. In patriarchal societies we cannot escape the implications of femininity. Everything we do signifies compliance or resistance to dominant norms of what it is to be a woman.²²

CHAPTER 9

GIRLS' TALK ABOUT MENARCHE AND MENSTRUATION:

discourses of menstruation and girls' subjectivity

What was your first period actually like, can you remember?

...Not very like everybody talks about it being, really like different from then on, but it wasn't really.

What would you say you dislike about having your periods?

Oh ... [] just having to keep yourself to yourself.

Why should (boys learn about menstruation) with girls?

[] it's a subject that's always like been 'they shouldn't talk about it in front of people', (but) I think you should get it out in the open a bit more.

Quotes from Girls' Interviews

In this chapter I discuss the effects of the status of the menarcheal girl and the experience of the onset of menstruation on young girls' subjectivity. This is done through a discourse analysis of interviews with 30 young adolescent girls attending a secondary school in the South West of Britain. These girls were interviewed twice over two years and between the first interview and the second interview 16 girls began to menstruate.

AIMS

Asking new questions

As a consequence of my move from a contextual analysis to a feminist poststructural discourse analysis the aims of this part of my research changed from an investigation of "adolescents girls' expectations and experiences of menarche" to questions of:

- 1) What discourses are available to adolescent girls to understand their changing body; and
- 2) How is their subjectivity constituted in relation to learning about menstruation; and subsequently
- 3) What are premenarcheal girls' expectations and explanations of menarche and menstruation; and
- 4) How do postmenarcheal girls understand and explain the onset of menstruation?

METHODOLOGY

Doing a different analysis

I now went back to the series of individual interviews that I had done with young adolescent girls. Here I refer the reader to Chapter 3 in which I presented the detailed information about the participants, procedure, recruitment, interviewing and semi-structured interview schedule. The methods used for this analysis are the same in nearly all respects to those used for the discourse analysis of the group interviews in Chapter 8, where there are differences I will discuss them below. In the following section, I want to discuss the 30 cases analysed for this part of the study as well as comment on the interviews and methods used in this analysis.

INTERVIEW PARTICIPANTS

Interviews on 'Growing up'

These interviews with young adolescent girls were done in the early phases of my research. The purpose at that point was to explore: first, premenarcheal girls' information about menstruation and their expectations of the onset of menstruation; second, the effects of beginning menstruation on aspects of girls' self-concept and knowledge about menstruation; and third, girls' experiences of menarche and menstruation especially as compared to their premenarcheal expectations. In order to do this I held confidential, individual interviews with 46 girls. The interviews were done twice: once when the girls were 11 to 12 years old and a year later when they were 12 to 13 years old. For the interviews I used a semi-structured interview guide. Although I wanted to encourage girls to talk freely about their ideas, feelings, and experiences in relation to growing up, being a girl, developing physically, and menstruation, I also wanted relatively systematic accounts so that I could both compare girls with each other and compare girls' pre- and postmenarcheal knowledge and experiences.

It is important to stress that from the outset of this research these girls were never intended to constitute a representative sample of girls across the United Kingdom (see Chapter 3 for further details about the girl participants.) For the purposes of this analysis, the interviews of 30 girls have been used.²³ These 30 girls from South West Britain were predominantly white European and drawn from across the academic ability range and social classes.²⁴ In terms of their menarcheal status, at the first interview 28 girls were premenarcheal and 2 girls were postmenarcheal. At the second interview 12 girls were premenarcheal and 18 girls were postmenarcheal. I relied on the girls' self-report of menstrual status for these figures and I have no reason to believe that any of these girls gave inaccurate reports about their menstrual status.²⁵

METHODS

data collection - interviewing

For the interviews, I used a semi-structured interview schedule more or less systematically depending on how the interview developed (see Chapter 3 and Appendix K for details of the interview schedule and procedure.) The interviews were held in empty offices or quiet rooms that were available for that day. Each interview was audio-recorded using a standard portable cassette recorder with a small high quality microphone.

data processing - doing transcriptions and using ETHNOGRAPH

Unlike the group discussions, I did not take structured process notes for the interviews.²⁶ The interviews were transcribed by two support staff in the psychology department of my university and myself on to a word processor using a consistent orthographic system which I developed. They were printed as they were transcribed. I read and corrected all the transcriptions as they were done. As the analysis was intended to be more content oriented than language oriented, there were no difficulties with this procedure.

The difficulties came when I decided to use THE ETHNOGRAPH for the discourse analysis of the interviews. First, the original transcriptions had been done on three different word processing packages which created problems in transferring a number of them on to one system.²⁷ Second, I had to change the formatting conventions in the transcriptions. At this time I adopted a more standardised form of notation (see Appendix L). Although these difficulties were overcome for the purposes of this analysis, the solutions were not ideal and were time consuming. As it was I had transcripts in two printed versions: there were the original ones and the ones printed from THE ETHNOGRAPH.

analysis

At this point, I follow the same procedure as the one used with the discussion groups (see Chapter 8, METHODS). I did an initial content analysis, sorted the text into categories, and using the aims of my research as a focus analysed the interviews. Using these categories and transcripts, the knowledge gained from the historical analysis and the analysis of the discussion groups, and my own experience and my own intuition, I prepared the following analysis.

ANALYSIS, FINDINGS, AND DISCUSSION

1) Girls talk about growing up: "it's nice but it's difficult".

I began the interviews with the girls by discussing how they were finding being a young adolescent and what they thought would be "the best age" for them. In the first set of interviews when the girls were aged 11 to 12, there was a marked lack of enthusiasm about being 11 or 12 years old with most girls finding this age: "Alright", "It's not bad", "It's okay", or as one girl put it, "Well, it's a bit kind of iffy....". It appears that girls can feel the loss of a kind of childhood freedom as they mature and demands are made of them: demands to be responsible, be sensible, and work at school. A number of these girls expressed a desire for the pleasures of being younger:

"I like being younger [] 7 [] you can go down the beach and run around and you don't have to do very hard work cause you're like an infant", "Everybody's always sensible and I don't like it, I like being silly", and a girl who would be "about 6, cause then you're really spoilt by your parents and that".

In other ways these girls thought being 11 or 12 was better than being younger: they said secondary school was more "exciting" than primary school and "it feels as if you're growing up a bit more." This was a recurring theme in these interviews - the importance of "growing up". When later in each interview I asked girls to think back over the last year or so to identify the most important thing that had happened to them, the most frequently chosen event was the move to secondary school because it signified that they were growing up. These were the replies of four different girls to the question:

Q: *When you think back over the last couple of years, what was the most important thing that has happened to you?*

A: When I first came here [] Well, it made me feel older.²⁸

A: Er important, oh dear, coming to secondary school [] Well, it really makes you feel older, and more superior.

A: I think um coming up to this school [] I can tell I'm growing up.

A: Well, I felt more grown up once I was up here.

However, for these girls the best age to be was "older" with greater years offering even more possibilities and pleasures than their present age or being younger. When I asked the girls what would be their "best age", they overwhelmingly chose a desired "older" whether it was 13 which meant being a "teenager" and getting "more privileges", or the magical age of 18 which meant *being* grown up - an adult - when "I'd have lots of freedom, when I've left school I think and left home" and "I'm an adult and then I can go and travel the world".

Whereas becoming 11 or 12 had on the whole only turned out to be "alright", girls hoped that becoming 13, a "teenager", would be a more significant change. As one girl said: "Well, I think being the step from going 11 to 12 probably isn't so big as going from 12 to 13 because you're turning into a teenager when you're going into 13" or as another girl said about her approaching 13th birthday, "I feel great. I mean I'm growing up." But when I did the second set of interviews by which time most of the girls were 13 (23 out of 30), this step to being a teenager had not brought the desired change to better times. The girl just quoted who felt "great" about turning 13 by the next year considered 13 to be "nice but it's difficult." When I asked her what was difficult about it, she said "The growing up..." Another two girls had retreated to a "best age" of 11. This included the girl quoted above who wanted to be older so she could "have lots of freedom". Now she said, "No, I don't like (getting older) much." There had turned out to be another aspect to growing up that these girls had neither discussed nor reckoned with - their developing bodies and starting to menstruate.

It was this "growing up" and physical development which had turned out to be more problematic and difficult than these girls had anticipated or acknowledged. In the first set of interviews, I raised the topic of 'our developing and changing bodies'²⁹ asking: "Are you looking forward to these changes?" At best these girls expressed a resigned acceptance of the inevitable, "Well, yes, I suppose so", with some pleasure in the physical evidence of growing up. One girl thought the changes would be "quite" nice "just to (make her) feel grown up" with another girl talking about them as "I just think that it's a way to show that we're growing older [] it's just the way into adulthood." Other girls indicated the difficulties of developing a woman's body by either saying they were not looking forward to their bodies changing - "No really no" - or by avoiding the issue - "Don't know (I) haven't thought about it." These would be common and persistent responses to the questions about the body:

"I don't know" and "Haven't really thought about it." As if somehow if they didn't think about *it*, *it* wouldn't happen to them. Or the changes would just happen out of sight and out of mind. Other girls were more explicit about their desires, "Yes (to the changes) because you can have babies", but less explicit about the rejected, "and No (to the changes) because...don't know really."

It appears that what girls really didn't anticipate or care to acknowledge was menstruation. This was rarely or spontaneously spoken about as in the comment above: "Yes because you can have babies and No because...don't know really" or "sometimes I wish I was a boy like because they don't have all *these things* that we do."³⁰ One girl did put *it* into words: she said, "Don't really mind the part of growing up but I don't like periods because I found them messy [] incredibly messy." By this she meant she had found what she has been told about them "messy" because she had not started menstruating at this point. It was not that other aspects of physical development were not problematic: some girls were "not exactly looking forward to growing breasts because of all the bras because my mum's always moaning they dig into you," but others longed for this aspect of femininity as "I haven't got a very big bust at the moment and I don't really like that." Other girls wanted to be taller or shorter with a number wanting to be slimmer.³¹ In essence, they were concerned about their appearance, about their desirability and femininity, about being: "Prettier, every girl's dream, really I think."

Although being desirable and being feminine could be problematic, the most consistently difficult aspect of the developing female body for these girls was reproduction and menstruation. There were several aspects of this difficulty. One aspect was the patriarchal construction of the female body as extra-ordinary and fascinating - the object of the male gaze and commentary as discussed in previous chapters. The following extract illustrated this:

Q: How do you feel about growing up and generally developing?

A: I don't know but the boys like they're always teasing you and everything.

Q: I must admit that's not much fun. Do the girls tease the boys in the same way?

A: No. We were in science doing the video and they just always tease us and everything. []

Q: What's the video on at the moment?

A: We're just doing about human bodies and producing babies.

It was these girls' experience that whenever reproduction or menstruation was mentioned in school when boys and girls were together, the boys would tease and make fun of the "girls more than they tease themselves." Girls described the boys as: "mucking around about it" when I did the questionnaires in the mixed groups; running "round going have you had your period yet" when they first learned about it in primary school; "when we are taught together it's like boys sort of like snigger and laugh about it"; when "we did it in Science and they acted really stupid because there were girls there"; and teasing "my friend, Joanne, cause she's older than us and they think we should have a period now."

The other aspect is the way the regulation of sexuality and the disciplining of the body results in young adolescents having restricted access to knowledge about and an understanding of their own or the opposite sex's body. The actual body and sexuality of adults and children in the everyday life of schools and streets are primarily covered up. In homes they are commonly confined to the privacy of bathrooms and bedrooms. Most young adolescents do not see naked female or male bodies, babies born or breastfeeding, men's semen or women's menstruation, or a couple's lovemaking. Neither are any of these topics openly and explicitly discussed. The covert and overt message to young adolescents is that the 'real' body is *abject* in some way and neither to be uncovered or spoken.

This became painfully obvious to me as I questioned these girls about their bodies. In the first set of interviews there were two

examples which illustrate this: First, I found questions about the body the most problematic because as I asked these questions, the girls became so uncomfortable it was palpable. Many girls retreated into minimal answers or even silence. And, although the answers and the silence were revealing, their unease was so uncomfortable for me that I did not include these questions in the second set of interviews. In the second example when I asked one girl how she felt about the changes, she launched into the following statement about the onset of her first menstruation which had happened literally "a few days ago":

Well, I sort of on the start of my period but I've not ... I haven't lost exactly blood but its been this browny stuff so I've nearly started. (It's) Weird.

She was really worried because she had expected blood not "this browny stuff" and she didn't know whether this period would stop or continue, get light or heavier, stay as browny stuff or turn to blood. She was worried "in case when you've got P.E. you don't know if its come on or not and it would be a bit embarrassing (if you weren't prepared)." At the time, this felt like the most important thing that had happened to her because "my body's changing and everything", yet she had only told her mother and sister, and then of course me because I had asked.

This regulation of and silence about the reproductive and sexual body in general and the female menstrual experience in particular leaves young people poorly informed about the realities of the menstrual cycle. This girl did not know whether she had actually started menstruating or not, nor did she feel able to ask her peers or women for their experience because, according to her, they never talked about it. In her experience and the experience of the others girls in this study, women and girls concealed and were silent about their menstruation. It was this aspect of menstrual discourse and practice to which a few girls objected: "Oh ... [the worst thing is] just having to keep yourself to yourself" and "it's a subject that's

always like been 'they shouldn't talk about it in front of people', (but) I think you should get it out in the open a bit more." There were girls who wanted this process to be more open, in part so that they would not have to be so guarded and careful themselves, in part so that the males in their lives would tease them less and be more understanding. As girls said: "Well, it bothers me, it's just that they [males] don't know what we have to put up with, they don't know" and:

some people don't understand why you can't go in the water and they keep asking you questions and because I'm shy and when the boys are around it's really horrible. [] So that's why the boys should know [about menstruation] so they know to keep their mouths shut.

This is a major contradiction in the inscription of young adolescents into the discourses and practices of menstruation. On the one hand, the menstrual period is constituted as a private, female hygiene matter concealed in public and confined to bathrooms and surgeries. It is neither to be revealed or allowed to disrupt the patriarchal order. On the other hand adolescent girls need to know enough about menstruation to learn to hide it and adolescent boys to keep quiet about it. The silence has to be broken, the reproductive body has to be uncovered, and menstruation has to be revealed. But when and how and by whom, and to what effect? It appears that boys hear enough to tease, taunt, and join in the sexist patriarchal discourse, but they don't learn to respect or understand what girls 'have to put up with'. And girls, what do they hear? This is question I want to discuss in the next section on girls' learning about menstruation.

2) Learning about menstruation: "I thought, Oh, No!"

When I asked girls about when and how they had heard of menstruation,³² they most frequently described hearing about it at school or from their mothers primarily when they were around 9 to 10

years old. Although they may have been aware of sanitary products earlier,³³ it was at this age that menstruation, or "periods" as they were more usually referred to, began to be discussed among or with young people. Typically, girls either heard something about "periods" being alluded to at school so asked their mothers or their mothers decided it was time to tell them about it. A few read something or saw something on television. The following two girls' accounts of learning about menstruation and their reactions were fairly typical:

First Girl

Q: How did you first find out about it.

A: My Mum told me.

Q: How did you feel when you first found out.

A: Um...just I knew when I was younger cause all the boys used to say when girls were off school.

Q: Right, so that's how you heard about it. Can you remember what you thought when you first heard?

A: Didn't believe it at first.

Q: Thought they were just making jokes, did you?

A: Yes.

Q: And a little bit later...

A: I asked my Mum if it was true.

Second Girl

Q: How did you find out about it?

A: I think my mum told me.

Q: Can you remember how old you were?

A: I was 8 or 9 I think.

Q: Can you remember how you felt about it?

A: I suppose then I kind of almost didn't believe her and I was a little bit scared but I don't feel scared about it anymore.

As we can see from these girls accounts, they remembered both learning about menstruation and being "told" about it. The dominant discourse and practice of the concealment of and silence about women's menstruation in everyday life had been so successful that the majority of these girls knew little about it before they were told. Most girls appeared to have never seen any concrete evidence of women's bleeding, not even their mothers with whom they lived day in and day out, nor to have heard any explicit talk about it. Then one

day they heard something from friends or school or they read something in a magazine or book. A few girls were prompted by what they heard or saw to ask their mothers questions. If they never asked, their mothers eventually took them aside to "tell" them about it. And most "didn't believe it." Indeed, it must be hard to believe. One day more or less out of the blue having seen and heard next to nothing, girls get "told" that women "bleed" from "down there".

This was the frequent reaction as girls initially were told about menstruation: they expressed disbelief and shock.³⁴ Having had no idea that such a thing happened, these girls had difficulty believing that women in general have periods or that they in particular would. When I asked them what they had first thought when they were told girls said: "I was shocked, I didn't know anything about it." "Um...that I don't really want to have these, it doesn't sound very nice". "I thought, Oh, No!" "I thought yuk!" Not one girl in this study expressed any positive reactions to learning about menstruation. At best two girls commented that "I already had an idea" and "I didn't feel *too bad*." Otherwise menstruation appeared as an unpleasant "messy" "yuk" at best and an frightening occurrence at worst. A number worried about this sudden and unexpected bleeding - "Um...I wasn't very happy, I don't know [] thought it would hurt or something", "Don't know, a bit nervous when I would start", or "No, scared".

To some extent girls appeared to adjust to the idea of menstruation given a bit of time and perhaps a bit more information. But there was frequently an element of forgetting about it or just not thinking about it, as the following extract illustrated:

Q: How did you feel when you found out about it?

A: Well, first of all I thought, ooh god, what will happen sort of thing? But just to get used to it I asked mum what it was like and she just said you usually just get a pain in your stomach [] and then after she explained to me and everything I just didn't think of it anymore.

This was a typical account. A girl would be initially shocked and feel certain amount of dismay - "ooh god" - on learning about periods from her mother. She would be concerned about exactly "what will happen" while trying to adjust - to "get used to" - the idea. Some may have sought further information from books or mother. In this case, she went back to her mother to ask enough questions to get it "explained". Then girls would "just [not] think of it anymore". This was a common response - just not thinking about it or not wanting to think about it. Although most girls could describe their experience of learning about menstruation, there were girls who just said that they could not remember or that they had thought "Nothing". This featured in girls' responses even as they answered my question "Do you remember how you felt?" when they would say: "Don't know, a bit nervous when I would start" or "No [meaning no she didn't remember, but she then went on to say] scared."

One girl went so far as to refuse to know about menstruation at all. This was the exchange we had:

The Girl Who Said No!

Q: Have you actually heard of this thing called menstruation or having periods?

A: No.

Q: You haven't heard about that?

A: No.

Q: Right, is that something that they teach you about at school, at primary school?

A: No.

Q: They didn't and your mum hasn't told you anything about it?

A: No. []

Q: No, would you like me to...would you like to ask me any questions about it?

A: No.

Q: No, you won't want to. Would you like anybody at school to tell you about it?

A: No.³⁵

How is such a refusal to be explained? Why did girls say "No, scared" and "Don't know, a bit nervous...."? How can these responses of not thinking, not remembering, thinking nothing, and even refusing

to know be accounted for? One approach could be to place the girls' responses into categories such as "don't know" or "silence" - a woman centred, humanistic approach. Another approach could be to utilise the concept of denial or repression - a psychoanalytic approach as suggested by Helene Deutsch.³⁶ The difficulty with either of these approaches is their failure to address the impact of the social on the subjective. Girls' responses to menstruation are not *just* a reflection of their unmediated 'real' experiences or their psychic processes. Girls responses to menstruation are a reflection of present patriarchal menstrual discourses and practices which I suggest are about the contradictory processes of concealing menstruation, constructing it as an abnormal pathological female process, and refusing it a place in everyday life while at the same time wanting women to desire femininity, maternity, and normality.

This places girls in the contradictory position of needing to know about something that people don't talk about, women don't appear to do, society doesn't value and doesn't even sound very nice. Placed in this position, it is hardly surprising that these girls did not think much about menstruation or refused to be bothered with it. Although it is possible as research in the psychology of menarche has discussed for menstruation to be 'traumatic' event, mothers to inadequately prepare daughters, or schools to fail to teach menstruation properly, I am suggesting that these girls responses to menstruation were the result of more than any of these factors. These girls did not remember about menstruation, show much interest in menstruation, or have many positive responses to menstruation because they were not encouraged or indeed incited to remember it, be interested in it, or feel positive about it. This was reflected in the contradictions of girls' comments about their education and knowledge about menstruation.

In the course of the interviews, I asked the girls if they had been taught about menstruation at school. In the first set of interviews, ten girls said it had been taught during that year at

school with comments about "We have just done about it in science" and "When I came up here (to the school) they talked about it, talked to all the girls", but twenty girls answered "No". These girls were all at the same school, as far as I was aware they had all begun at the same time, and according to the Senior Mistress who also taught biology were specifically taught about menstruation in their first year in the school. How was it that only a third of the girls reported being taught about it at school? Perhaps some missed the lessons, but it was unlikely that two thirds of the girls had been absent at the crucial time. I wonder if I had interviewed girls before the teaching had taken place in school that year as one girl had said "we haven't had anything yet", but in the second set of interviews the number of girls responding "Yes" had only increased by four to fourteen. What was going on? How was it that the school and a number of girls thought menstruation was being taught while a substantial number of girls did not think it was being taught?

As I neither observed the lessons on menstruation nor took a register of girls in attendance, I cannot say what actually happened in the classroom. But a number of comments by girls give some clue to these girls' experience of learning about menstruation in school. They talked about learning "a bit" in "science" and about the boys' "teasing":

Q: What about school, have they taught you anything in school?

A: Not a lot at school but like we talked a bit on it at science. Just like we talk about one thing and then she would say about it.

A: Yeah just a tiny little bit, hardly anything really.

A: Yeah, they taught us in the first a bit but we had a male science teacher and he was kind of getting all embarrassed and everything.

A: Well in the first year we did about it, we did a bit about it in science, but not much about (it).

Q: About periods and stuff?

A: No.

Q: Just about the kinda reproductive system.

A: Yeah.

Q: *Do the girls tease the boys in the same way?*

A: No - we were in science doing the video and they're just always teasing us and everything. []

Q: What's the video on at the moment?

A: We're just doing about human bodies and producing babies.

Q: *Why do you think boys should learn about menstruation separately from girls?*

A: Well, they'll probably you know start laughing and make fun of you.

There are several points I want to make about these comments. First, whatever it was that was being taught about menstruation in science, it did not appear to be relevant enough to girls for them to consider that they had been taught either very much or indeed anything at all about menstruation. The scientific discourse of menstruation, even when taught by a woman, was for these girls about school, reproduction, human bodies and producing babies, not about their potential or actual menstrual experience.

Second, when menstruation was taught to girls either by men or with boys, there was always the potential for or the reality of the teasing, sniggering and embarrassment about the female body and menstruation. To some extent it didn't matter who did the teasing or who was embarrassed, menstruation was constituted as an extra-ordinary, almost abnormal, female process linked to sexuality and fertility. At this age and in this public space, this was not a process that girls even wanted to know about - let alone learn about or ask questions about. As one girl responded to my challenge: "Q: Well, if you don't know very much why do you think you know enough about it then? A: I don't really want to know anything about it." For most of these young adolescent girls their response to the teaching and learning about menstruation in school could be summed by the response, "No, I don't think so, not as far as I can remember"

with even the girls who remembered considering "I learnt more from my Mum."

This leads me to the next contradiction. The majority of girls considered that they had learned the most from their mothers and that their mothers were the most appropriate source of information. When I asked the girls "Who do you think should actually tell girls?", mothers were the most frequently and consistently named person with teachers, female relatives like sisters or aunts, and friends only being mentioned by a few girls. Girls considered mothers were best because:

I think your mums are the best people to tell you because they know what happens [].

Their mum is someone they should be able to confide in.

From their mum, like [] you can ask more about it from your mum than from like a teacher in school because the teacher doesn't really know you and your mum does and you're not quite so embarrassed about it.

Girls wanted the safety of talking to someone who knew them well and would be sensitive to their worries and concerns. They were confident that their mother would know from personal experience about menstruation and their conversation would be relatively private away from the scrutiny and comments of peers and males. However, these girls recognised that there were difficulties in this reliance on any particular mother/daughter pair. They were not confident about mothers' reactions or explanations. Mothers could be just as embarrassed as the girls, find it just as difficult as the girls to raise the topic and give no more helpful a explanation of menstruation than school or literature. The girls' comments illustrated this:

Q: Has the school taught you anything about it?

A: A little more than what my mum told me.

Q: Who do you think should tell girls about menstruation?

A: From their mother mostly, but if they find out from comics it's not so bad because they might go and ask their mum what it is and then she'd explain.

A: I think their mum should, my mum would get all embarrassed so my sister told me.

A: Mum, but I find it too embarrassing to ask her.

Q: Did you (ask her)?

A: I haven't asked her yet about it.

Q: She hasn't brought it up yet.

A: No.

A: I suppose their mums really but I mean.....

The dominant discursive practices of menstruation have not encouraged or incited women even if they are mothers of daughters to discuss, be interested in or feel positive about the onset of menstruation or their own everyday menstrual experience. If a woman considers her menstruation as relatively 'normal' and relatively pain free what is there for her say. Menstruation is not a normal topic of conversation. As I have said before women are to conceal and be silent about menstruation, not to reveal or to talk about it. Then as suddenly as girls are to learn about menstruation, mothers are to teach about it. And all of this is to be done within an idealised mother/daughter relationship: an mother/daughter pair that even girls realised have difficulties and limitations. As the girls pointed out: Girls "*should* be able to confide" in their mothers, but of course not all girls can. Mothers should be able to comfortably tell their daughter, but of course not all mothers can.

3) Girls' expectations and explanations of menarche and menstruation: "Scary."

Considering the dominance of scientific discourses and patriarchal practices of menstruation culture and consequently the way in which these girls learned about menstruation, what had these girls made of the explanations and descriptions of menstruation they encountered before they began menstruation? Had these girls learned the scientific explanation of menstruation, and how far did they link

it with pathology or fertility? What did the onset of menstruation mean do them - was it a symbol of fertility or sign of womanhood as suggested by child psychology? What did girls expect the onset of menstruation to actually be like and to what extent had they incorporated the imperative of concealment and silence? Were they looking forward to it? These are the questions I want to discuss in this section on girls' expectations of menstruation.

To draw out these girls' understanding of menstruation, I had asked them first to "Explain to me what you think happens when you menstruate" and then "Why do you think women menstruate?" The most frequent explanations of menstruation drew on two related but different discourses. One was the discourse of blood loss. Here the girls described menstruation as:

Just blood that's left over in your body....

I lose all the blood.

Well, isn't it when you got too much blood in your body and it's not being used up and then it comes out.

Blood passes through your body when you go to the toilet. You have to change sanitary towels.

For some girls especially initially this idea of losing blood was frightening. As I have discussed previously, in our culture blood is associated with injury and illness so that learning that you will bleed can be shocking and scary as girls had said. Aside from mentioning blood in descriptions of menstruation, the only other reference to blood in these interviews was in an account of an accident in which a girl talked about being frightened by the "blood all over her arm, it looked horrible". There must always be this potential for blood to be associated with the frightening and horrible. However, blood is also associated with life and vitality so there are alternative³⁷ and older theories about the menstrual flow available to make sense of menstruation. Some of these were

discussed in Part II. These ideas were hinted at in these girls explanations of menstruation as "Just blood that's left over...." or "too much blood (that's) not being used up...." In these theories the menstrual flow is a sign of health: it is excess to a woman's requirements and a cleansing process. Here menstruation is constituted as a normal, healthy process neither pathological nor frightening.

The other discourse was the more scientific discourse of the reproductive cycle in which menstruation is caused by failed reproduction - it is a sort of waste product. Few girls were able to fully relate this explanation so they tended to use parts of it. Some girls emphasised ovulation without any reference to blood loss as in these descriptions:

Well, the eggs flush out your body.

I know that you're losing eggs or something like that. Sperms don't get (to fertilise the eggs) cause my Mum told me that.

It's the eggs in the ovaries, once a month they disperse some of the fluids from inside them, and you've got various things...you've got towels or tampons. I understand about them, you have adverts in magazines for them.

Other combined a reproductive explanation with the discourse of blood loss as in following explanations:

An ovum moves round your body for a month and then you...it gets rid of all your blood. [] When they get pregnant, the ova gets fertilised but then you have a baby but if it don't get fertilised you just get rid of all your blood and boys don't get pregnant so they don't.

Yeah, well, inside you, you develop an egg and then it breaks and all the blood comes.

Well, the womb, well, the womb is all bloody and every month it sort of flows and to show that the eggs are producing.

Although a biology teacher or scientist might despair at the sketchy and selective nature of these explanations of reproduction, ovulation

and menstruation, this scientific discourse was the one most frequently employed by these girls to explain menstruation. It was the dominant discourse.³⁸ Around forty percent of girls used some aspect of the scientific discourse to explain menstruation with over 50 percent linking menstruation with fertility. When asked to explain why women menstruate, typical responses were:

Q: Why does this (menstruation) happen to women?

A: So that they that they can have children.

A: Well, the eggs aren't fertilised then you don't need them any more.

A: Cause when they get older men fertilise it and then they can have babies.

A: Well they have children so that if they are pregnant the blood would be used to supply the child with it in the stomach.

To this extent menstruation is linked to fertility through a scientific explanation. But interestingly there was little mention of pathology with only 3 explanations including any mention of pain, moods, or menstrual symptoms. It appears that most teachers and many mothers excluded the medical discourse of menstruation-as-pathology from any explanations of menstruation to young adolescents. In part I would guess they did not want to make menstruation sound any more shocking or unpleasant than it already did, and in part they did not want to encourage menstrual distress through either 'bad' attitudes or expectations. This may be a contradictory effect of the current debates about pre-menstrual syndrome, negative attitudes causing negative symptoms and 'raging' hormones. We will see how this exclusion of possible menstrual symptoms effected these post-menarcheal girls later in this chapter.

There was another, and to me more surprising and intriguing, exclusion from these girls' explanations of menstruation: over half made no reference to blood. Although I have not interviewed mothers or teachers or observed their explanations of menstruation, I would

imagine any preparation for menarche would mention blood at the very least as it is *the* sign of menstruation for women. It is just possible that a pre-menarcheal girl who had received the minimum instruction about menstruation in school and no information from her mother might be unaware that menstruation involved some loss of blood. However, the fact that half the post-menarcheal girls in the second set of interviews did not include any mention of blood in their explanations or descriptions of menstruation makes ignorance unlikely. It is more likely that this 'bleeding' from 'down there' was so problematic and/or unpleasant for girls that they 'forgot' or 'avoided' this aspect of menstrual experience. For example, in their descriptions of what they disliked about menstruation a number of postmenarcheal girls said: "I just don't like them because they are Yuk!" "Well, the mess in your pants." "When you need to like change [] the pads." "Eer hum making a mess, they catch you unaware". They never mentioned blood, but it was the 'disgusting' and 'bloody' menstrual flow to which they were alluding. In addition, a number of postmenarcheal girls in the second set of interviews retreated to silence when asked to explain menstruation:

Q: *Explain to me what you think happens when you have a period.*³⁹

A: (silence)

Q: Can't remember? [] Why do you think this actually happens to us? []

A: Don't know.

A: Umm

Q: What you understand of it?

A: Um can't think, not sure.

A: Well I don't know much.

Q: Why do you think it happens?

A: Pardon?

A: You had to ask (laughs).

Q: Just whatever you think [].

A: I don't have to answer that, do I?⁴⁰

Our social silence about intimate bodily matters especially any associated with the genital area and eliminatory functions make it problematic to talk about what is considered a rather disgusting, bloody "mess" down there. In conjunction with this silence is the scientific discourse of menstruation-as-waste-product of a failed reproduction which constitutes the menstrual flow as a discharge not unlike urine or faeces. I suggest it is the co-existence of this social silence about bodily matters, the constitution of menstruation as a form of elimination and therefore disgusting and the association of blood with injury not a normal, healthy process that leads these girls to refuse to talk about blood-and-menstruation.

In terms of its meaning, the onset of menstruation had obviously been understood by the majority of these girls to signal the possibility of procreation. However, this was not a possibility they necessarily welcomed at this age. In their explanations of why women menstruate quoted above, girls talked about "when *they* get older men fertilise it" and "*they* have children": they tended to distance themselves from fertility and its association with sexuality. When asked what they thought they would like about the onset of menstruation, only two girls chose procreation: "Probably knowing that I can have children" and "That I can have a baby when I'm older". Certainly menstruation was a sign of potential fertility, but the majority of girls did not talk about as a symbol of fertility or even the sign of womanhood. They did talk about the onset of menstruation as a sign of "growing up". I want to emphasise that they talked about menarche as being a step in growing up - not the step in growing up, not being grown up, not being an adult, and not being a woman. Aside from the two girls who desired maternity, this constituting of menarche as a sign of "growing up" was the only aspect of menstruation that girls thought they would like. The following answers capture this:

Q: What will you like most about menstruation?

A: I suppose feeling that you're older and that you're growing up a bit.

A: Makes you feel a bit older.

A: Feeling more grown up.

A: Getting older - a bit more kinda grown up really.

Either the discourse of menarche as the symbol of fertility or sign of womanhood was not strongly present in these girls' world or they had resisted it. There was a hint of its presence in one girl's description of menarche as "I think it's changing from childhood to womanhood" and "For me, inside it's telling me that [] I'm going to be a woman. I'm changing from a child to a woman." However, she was the only girl to talk about menstruation in this way and again a number of girls did not talk about it at all. Eight girls gave no explanation of menstruation and ten girls could think of nothing they would like about it. The psychological discourse of menarche as a rite of passage, a sign of womanhood, or even a highly significant event did not feature in the accounts of these pre-menarcheal girls. Menarche was associated with an undesired and unsought fertility, a loss of blood signifying both health and injury, a waste product requiring hygiene measures, and for a few girls pains and moods. If menarche had any further meaning for these girls, it was only as a sign of growing up.

So what did girls' expect the onset of menstruation to actually be like? For what had the explanations and descriptions from schools, mothers, sisters, or books prepared them? From the number of "Don't know" responses⁴¹ to my question "What do you think the first period will be like?", I would suggest that explanations of menarche had prepared these girls in only the most basic of ways. From their comments in other parts of the interviews, all these girls appeared aware of the hygiene requirements. They knew that at some point they would need to use sanitary towels for the menstrual flow or menstrual bleeding. From the number of times girls talked about "not worrying" and being told "not to worry", this appeared to be

another recurring message in their preparation. And they did the one thing they could not to worry in the absence of experience or detailed knowledge - they tried to forget about it or not think about it - "Don't know, (I) haven't thought about it yet" or "Sort of like, don't know [] I haven't really thought about that."

My distinct impression is that these girls were not given detailed, explicit, or what could be called phenomenological descriptions of menstruation. In the absence of this kind of knowledge, they wouldn't know what to expect although they may know what to do. As one girl replied to my question about what she thought the first period would be like:

A: Hmm, just finding out what you actually do, you know. []

Q: What do you think it will like when you have them?

A: You'd get used to it, wouldn't you. Well, you wouldn't [be used to it until] after you have had it about twice and then you get used to it so you wouldn't really worry about it.

This lack of explicit knowledge in conjunction with the information that menstruation entailed bleeding both scared and worried girls. When they thought about their first menstruation, they anticipated being scared to some extent by the unknown: "(It's) a bit scary because I've never had it before, and you don't know what it's like." In addition, a number thought there might be pain or discomfort. They expected menarche to be: "Painful", "Ehmm, it will be a bit uncomfortable at first" and "A bit sore and painful." Although pathology had not figured prominently in explanations of menstruation, at least some girls had either heard about or been told about menstrual symptoms. One girl was worried about the onset of menstruation because:

A: Um...bit worrying when you're going to have it and anything. Like my sister always says to my mum that she like, you get headaches and you get in a bad mood and everything.

Q: Do you think that will happen to you?

A: Probably.

Other girls had been told that any current aches and pains they were experiencing indicated the body's preparation for menstruation.⁴²

These were the accounts of this happening from two girls:

First Girl

Q: [] Any ideas when you think your periods will start.

A: Um, well I um...I've got a Geography teacher, Mrs. Lamb.

[] I had all stomach pains and she said that I was probably preparing to have a periods so [] Maybe [I'll start] this year, I don't know.

Second Girl

[The following girl had said her mother had been "very open about that, she's always told me" about menstruation and given her booklets.]

Q: Right. And what about you, have you begun your periods yet?

A: No, I have pains alot though. [] I just get like a...sometimes I get like a sharp pain or ache on my back, on my spine...[] I know what they are immediately. I can tell by different pains in my body. I know my body, the different pains I get, I know what they are.

Q: Right. So when do you actually think your periods will start then?

A: I think fairly soon, fairly soon.

These girls comments indicated that the medical discourse of menstrual pathology was obviously available to girls though it was not frequently used in these interviews.

In addition to the possibility of the first menstruation being painful, it had the potential to be embarrassing as well as frightening. It might happen in a public place catching the girl unaware and unprepared. As one girl explained:

I think it will be dead embarrassing if it happens somewhere that, it would be okay if it happened in the house but if it happened somewhere like in the pool it would be dead embarrassing.

This was one of the unspoken fears of starting menstruation - suddenly having blood everywhere. In the absence of detailed

information about how much blood there might be or how much warning they might have, there appeared to be a phantasy about being flooded with blood for which one was unprepared - unprotected by the bulky but reassuring sanitary towels.⁴³ It may have been this unspoken eventuality that lead girls to expect the first, and therefore, unprotected menstrual flow to be:

Horrible! Well, I don't know actually. Well, it can't be that bad really, but it won't be very nice, not the most enjoyable thing.

Rather messy at first [] I think it will be different at the start, but once you get used to it then it won't be as bad.

This possibility appeared to lead a few girls to remain in a state of constant readiness:

I don't know. Every time I go to the toilet, I look thinking it has happened. I don't know what it is going to be like, I don't know.

It was no wonder that these girls were finding their developing bodies a source of ambivalent feelings and being a young adolescent girl difficult. Neither was it any surprise to learn that none of these girls were positively looking forward to the onset of menstruation. At best a few girls wanted their periods to start because it was a sign of growing up and being normal or to relieve the anxiety of waiting:

Q: Are you looking forward to [menarche]?

A: For some reasons I am, others I'm not [] cause then I'll know that I'm growing up and everything, but the other [reason I'm not is] like might happen in a really embarrassing place.

Q: When would you start your periods?

A: Um.....well if I had it too old, well, all my friends would be teasing me that you haven't had your periods yet and they have, and they are more grown up than me, they'd think.

A: This age to get to know the routine quicker [] Get it over with, yeah.

A: About 13 [] get it over and done with. I know you have it for a long but you know....

At worst, many did not appear to want them at all: "Well, I wouldn't have them at all. Really, I could do away with them and just say now produce an egg."

There appeared to be few advantages for these young adolescent girls in beginning to menstruate aside from normality and growing up. They did not expect menarche to have any effects on their relationships with other people. They did not expect menarche to bring them any particular privileges, benefits, or celebrations. They did not even expect to tell many people when they began to menstruate. The majority of these premenarcheal girls expected to tell their mothers, but few expected to tell anyone else including fathers. This was a typical reply to the question about who they expected to tell: "I won't tell any of my friends. I'll tell my mum and other really close friends, but I wouldn't like broadcast it." There were a few girls who indicated they would tell no one including the following girl:

Q: Will you tell anybody [about your first menstrual period]?

A: No.

Q: What about your mum?

A: No.

Q: Or your dad?

A: No.

Q: [Will you] tell anybody when you're actually having them?

A: No.

This was a major concern and worry for these girls - for their menstruation not to be "broadcast." Whatever else happened with the onset of their menstrual flow, they hoped they would begin menstruating at home, preferably and literally "on the toilet". Girls worried "about when I'm going to have it and where" preferring it "didn't happen at school" or in any other public place because "then it will be embarrassing". The practice of women being silent about and concealing their menstruation in everyday life was so

dominant for these girls that it had taken on the nature of an imperative.

4) Postmenarcheal girls' understanding and explanations of the onset of menstruation: "It's alot of hassle...."

There were two major themes in the post-menarcheal girls' accounts of starting menstruation. One concerned the management of the menstrual flow: girls talked about where they had been when they started menstruating and what they had done. The other concerned the lack of any notice or any significance given to menarche by the girls themselves or the people around them: girls said they did not notice or did not remember their menarche. It appeared to have had little impact on them or their friends and family.

In this section I want to begin by discussing the concern of premenarcheal girls with the management of the hygiene and concealment aspects of menstruation. Whatever else these girls included or left out of their descriptions of their first menstrual period, they nearly always talked about whether they had been at home or at school. This appeared to be an important aspect of their experience primarily for two reasons. First, their location made a difference in how they could manage and conceal the menstrual flow. If they were at home, they could change their clothes and obtain sanitary protection relatively easily even if their mothers were not available. However, if they were at school without their own sanitary towels or tampons, they had two problems. One was the difficulty of obtaining sanitary protection and the other was being embarrassed by some revealing stain or remark. The following remarks captured this concern about the always present potential of public embarrassment by menstruation.

Q: Where were you when you first started?

A: Well I didn't notice until I got home and I had this kind of (stain in my pants).

Q: What was your first period like then?

A: Um well there wasn't very much blood I suppose, so it was okay.

Q: *Right. How did you feel about [your first period]?*

A: Oh, sometimes, I just think that everybody will know. Just, yeah, just walk and everything and you think everybody's going to know this or something like that, but nobody said, nobody noticed at all.

In the first case this girl's experience of her first menstruation was "okay" because, in spite of not noticing "until I got home", she had not been embarrassed by bleeding through to her external clothing.⁴⁴ As she said: "there wasn't very much blood". In the second case, the girl was expressing every girl's fear that somehow she will give herself away, that people will notice especially at school.

Girls who started to menstruate at school differed in how they dealt with this occurrence. One girl was able to go the relevant teacher who was "Okay, she was really nice" but another waited all day until she got home.⁴⁵ Here is her description of her menarche.

Q: What was the first one like? Where did it actually happen?

A: The first day of school.

Q: Oh, did it really?

A: The first day after half term I think.

Q: Oh, what did you do?

A: Well, I had the whole day and came home and told mum.

Q: Did you manage it alright?

A: Yeah, the first time it was alright.

[]

Q: You didn't tell anyone at school though?

A: No.

Although she described her menarche as "alright", it could not have been a pleasant or positive experience for a girl to spend the whole day in school without proper sanitary protection guarding her 'secret' until she could get home.

Second, their location made a difference to whom they could talk about starting menstruation. As we have seen the majority of these girls expected to tell their mothers even if they weren't going to tell anyone else. So if they were at home, their mothers were

more likely to be available for practical assistance and some reassurance at least. The following descriptions by two girls illustrated how much easier it could be for girls to start menstruation at home.

Q: What was your first period actually like?

A: Oh, I just sort of, I was at home at the time so it wasn't that bad and I just said to mum, that it's come and she said oh it doesn't matter, it just has to happen sometimes, so I just didn't worry after that.

A: I was home. I was sitting in the front room and I went to the toilet and all (in) my pants, I ran out and I told mum. [] She just like went, oh, that's fine, good, and everything....

The relief of being at home when their menstruation started implied that most girls were more concerned about and surprised by menarche than their own descriptions indicated. This made the number of comments about not noticing or not remembering the first menstruation all the more surprising, but they were frequent.

This leads me onto the other major theme in these interviews with postmenarcheal girls - the lack of significance and impact of menarche. When asked about their first menstruation, a number of girls⁴⁶ simply replied that: "Oh, it was okay", "I don't remember, I started at school I remember that", "Didn't really notice", or even "I don't know". These were puzzling responses to an event which other girls in this study described vividly. Here are two examples from girls who didn't know about or notice what their first menstrual period was like:

Q: When did your periods actually start?

First Girl

A: Um..in January.

Q: Oh, so not very long ago then, has it? Where did it actually happen, at school or at home?

A: At home.

Q: Oh, right. What was it like?

A:Didn't really notice really.

Second Girl

A: In September I think.

Q: Did it happen at school or at home?

A: At home.
Q: What was it like?
A: I don't know.
Q: How did it make you feel when it started.
A: I just got a bit worried.
Q: It was a bit worrying because you didn't quite know what was happening at first, huh?
A: Mmm.

There was little evidence that these girls were less prepared for or had more problems with their menarche than any other girls in this study. It was not even that they had completely forgotten or repressed the event because they could remember when and where they had started menstruating occasionally even mentioning one aspect of the experience: one girl did remember being "a bit worried" and another remembered there wasn't "much blood".

There seemed to be two aspects to this not remembering and not noticing. One aspect was the lack of any dramatic element in the actual physical event of beginning the menstrual flow. For these girls there was no pain, no sudden gush of blood and no strong physical sensation so that in essence they "didn't notice" the beginning of menstruation until they found a stain in their pants. The other aspect was the lack of reaction by others and subsequently the lack of effect on themselves. When they told someone primarily their mothers⁴⁷ about beginning their menstruation, the common reactions appeared to have been practical and low-keyed. Girls remembered being shown what to do and told not to worry. These were typical examples of mothers' responses: "She said come upstairs and I'll show you what to do." "She just said are you alright and things." "She told me not to worry about it." Most fathers were not involved in any direct way: most girls did not tell their fathers or other family members with the majority not even knowing if their fathers knew they had begun menstruation.⁴⁸ The majority of these girls said: people treated them no differently than before their menarche, there had been few effects on their activities, and they

felt no different aside from feeling slightly more grown up. People seemed neither interested in nor concerned about their menarcheal experience. In essence these girls were not remembering or noticing their menarche because others indicated there was nothing of significance or importance to remember or notice. As girls said:

Q: What was your first period actually like?

A: ...Not very like everybody talks about it being really like different from then on but it wasn't really.

A: Oh, sometimes, I just think that everybody will know. Just, yeah, just walk and everything and you think everybody's going to know this or something like that, but nobody said, nobody noticed at all.

In contrast to the girls who forgot, didn't know, or didn't notice, I want to discuss five accounts which give quite a different impression of the possible impact and significance of menarche. The first two accounts were given by two girls in the first set of interviews. Their menstrual periods had started recently: one just a few days before the interview and the other within two months of the interview. They both clearly remembered their experience of starting menstruation:

First Girl - menarche just occurring

[I had been asking her about how she felt about her body changing. In reply she talked about starting to menstruate.]

A: Well I'm sort of on the start of my period. But I'm not, I haven't lost exactly blood but its been this browny stuff so I've nearly started.

Q: How do you feel about that.

A: Weird.

Q: When did it happen.

A: A few days ago.

Q: So just really recently.

A: It was a bit of a shock.

Q: So what was it like.

A: First of all I wasn't sure what it was, so I asked my mum and she said it's probably starting.

Second Girl - menarche two months ago

[I had been asking her about starting her periods.]

Q: How many times have you had it now?

A: Twice.

Q: So it just started then.
A: I had it one time in school.
Q: Right - so what happened?
A: I had to borrow one of the teacher's [sanitary towels] cause I didn't have any.
Q: How did you feel when it happened?
A: Surprised and all. []
Q: What was it like when you had it the first time? How did you feel?
A: Scared and all.
Q: What did you think had happened to you.
A: Nothing when I first started. I shouted to my mum and said: "Mum, I've got blood in my pants."
Q: Oh right, and what did she say?
A: She said: "Come upstairs and I'll show you how to use the towels."

Although these two girls did need prompting about their experience of menarche, their accounts give a vivid impression of their feelings and concerns. They said they felt "weird", "scared", and "surprised" at finding "brown stuff" and "blood" in their pants. They were concerned about the hygiene⁴⁹ and health aspects of menstruation: was brown stuff normal, was the bleeding alright, would they get caught unprepared? These experiences reflected many premenarcheal girls' expectations of the onset of menstruation: They expected to feel scared about starting to bleed and to be concerned about managing the hygiene aspects. They were worried about when and where their menstrual periods would start.

Certainly these girls remembered and noticed the start of their menstruation. Again there was little evidence that these girls differed in any significant way from the other girls in the study aside from their periods starting a year earlier. But they were neither particularly early nor relatively unprepared, nor was their experience exceptionally difficult. In part I think the vividness and immediacy of these girls' accounts can be attributed to the recent occurrence of their menarche and in part I think it can be attributed to them being interviewed about their experience. By asking questions I had both encouraged them to put their experience

into words and given significance to the onset of their menstruation. I had not shown them what to do, told them not to worry, or said it didn't matter: instead I had asked them about what had happened and how they had felt. The possible effect on girls of having the opportunity and being encouraged to talk about their expectations and experiences of menstruation was indicated by the following third account. This girl's menstrual periods had started soon after I had interviewed her the previous year:

Third Girl - menarche a year ago

Q: [If your periods started] just about a year ago, so it was before (summer)?

A: It was just after you talk to me. *It was easier.*

Q: Oh, was it?

A: Yeah. It wasn't a couple of days after, but you know it was quite soon after.

Q: Oh, right, so was that, was it a bit odd or had it been helpful to have a chat about it, do you think?

A: I don't know, it had been quite helpful.

[]

Q: So what was the first one actually like then []?

A: Well, not too bad I suppose. I didn't know it was actually, I didn't know it was actually a period first of all.

Q: Right.

A: Then I realised [] in the middle of it, because it wasn't really blood that was coming out first of all so I didn't (realise at first).

Q: I know, it's a bit surprising isn't it?

A: Yeah, yeah.

Not only did she clearly remember her menarche, but she had actually found it "easier". This was in spite of not knowing at first whether her menstruation had started or not. My point is not that talking about menstruation necessarily removes the surprise or even the fear. It was possible that like the first two girls discussed above, she was initially surprised or shocked by her menarche. After a year, she may have 'forgotten' that aspect either because it was unpleasant or because she had never talked about it. The point I am making is that the silence about and concealment of menstruation may neither prepare girls for the actuality of starting their menstruation nor

give their experience any significance: no one appeared interested in what girls remembered, noticed, knew or even what they had to say. When alternative practices and discourses gave impact and significance to menarche, then girls' accounts could be quite different as shown by the following two examples.

In the first example, the practice of publicly celebrating a girl's menarche had made a strong impact on one of the girls I interviewed. When I asked her about her first period, she launched into a relatively long and full account of a celebration which she had witnessed. In comparison her account of her own private menarcheal experience was short and brief:

Fourth Girl - menarche 7 months previously

Q: What was your first period like then?

A: I don't know.⁵⁰ It was like exciting first of all, you know, but I asked my mum (not to do the same). Because when my friend started her period in France last year, they were all like clinking their glasses and they were really congratulating (my friend). But I said I didn't (want that) because that would embarrass me.

Q: Right. So in France they really made a celebration about it?

A: Yeah, because we were all just sitting around the table and then um Julie like, she goes, argh, like this, and she told her mum. Then Gloria told my mum, and they they were all going, oooooohh, like this and then they were all getting wine out and everything.

Q: But you didn't want that?

A: That would embarrass me, I think? []

Q: So who did you actually tell when your period started?

A: My mum [] just my mum.

[]

Q: Can you remember your first period?

A: Yeah.

Q: How did it happen, was it at home or school?

A: I was home. I was sitting in the front room and I went to the toilet and all (in) my pants...I ran out and I told my mum.

This public celebration of menarche had obviously made an impact on this girl's menarcheal experience even though she didn't have a celebration herself: she was the only girl to describe her first

period as "exciting first of all". The excitement of her friend's celebration imbued her own menarche with some measure of excitement and significance. It certainly gave her something to say and something to remember about menarche as an event. However, her own more private and subdued menarcheal experience does not appear to have been as "exciting" after all: she only had a physical process to recount.

In the second example, the discourse of menarche as the sign of womanhood gave a significance to a girl's menarche that was missing from other girls' accounts. In the first set of interviews, this particular girl had described the onset of menstruation as the change from "childhood to womanhood": she expected menarche to make her feel like "I'm going to be a woman." When she actually began menstruating, this was the experience she described:

Fifth Girl - menarche 10 months ago

Q: What was [your first period] like?

A: I didn't really notice at first till the evening but I thought, you know I've got to grow up now. (laughs) I thought you know I'm nervous and I have to grow up now. This is too quick, you know, like some of my friends and I thought when will I like (start), and then when it happened it sort of hit you like that, you know, you have to grow up.

Her menarche was as she had expected it - it made her feel as if she had to grow up. It was obvious this constituting of menarche as a sudden transformation into a woman was more difficult and less positive than she had anticipated; however, it had given her experience a shape and a significance that she could remember and recount. In contrast, the dominant discourses of menstruation as blood loss or reproductive waste product in conjunction with the practice of silence about and concealment of women's menstruation in everyday life appears to make of menarche an insignificant event.

With the majority of these girls' accounts of menarche dominated by the practical concerns of managing menstruation and the minimal importance of their actual menarcheal experience, how did

beginning menstruation influence girls' talk about other aspects of menstruation? Did their explanations of menstruation change? Was the discourse of menstrual pathology in evidence? Were hygiene and concealment important issues in the everyday management of regular menstruation? How did they feel about menstruation, and what meaning did it have for them now that they were actually menstruating?

In terms of the postmenarcheal girls' explanations and descriptions of menstruation, there was very little general change. The two dominant discourses remained the discourse of blood loss and the scientific discourse of menstruation as the waste product of failed reproduction. These were typical responses to the request:

Q: Explain to me what happens when you have a period?

A: Um...it's when all the tissue in your womb it just sort of dies away and comes out.

Q: Why do you think this happens to women?

A: Umm..because um if they're going to have a baby it needs to be all nice and clean for it to grow in.

A: You start bleeding.

Q: Why does this happen to us?

A: Mmm....

Among a few girls the scientific discourse became more dominant. Whereas in the first set of interviews, their explanations had been rather scanty descriptions of "you get blood" or "you just get a pain in your stomach" by the second set of interviews, they could give more complete scientific explanation. The following were the 'best' given by any girls in terms of biology:

Q: Explain to me what happens when you have a period?

A: Oh, well, there is an egg inside you that you produce every month and because we don't need to use it, it's, it goes into some tube or something and it just turns into blood.

Q: Why does this happen?

A: Um, don't know, I suppose you produce an egg and everything and you don't need to use it or something so you get rid of it.

A: Um, the lining of your something, I've forgotten what it is, starts to come out and then your egg cells are ready or something like that and then it just happens.

Q: Why does this happen?

A: Because it, um, it means that after you have had your period, it means that your body is ready to have a baby.

This might suggest that the scientific discourse had become more relevant as girls started menstruating. In the case of these girls that might be correct, but as many girls moved away from the scientific explanations as moved towards it. Four girls (who were discussed in the previous section on blood) in spite of starting their periods retreated into silence when it came to explaining menstruation in second set of interviews. This included two girls who claimed not to know about menstruation in the first set of interviews and maintained this position in the second set of interviews. The other two girls had given explanations which had been loosely based on the scientific discourse. The second time round one girl avoided answering while the other refused to answer.

In direct contrast to this retreat into silence was the change in position of *The Girl Who Said No!* She is an interesting example of the complex and contradictory nature of girls' expectations and experiences of menstruation. Her case defies simple answers to menarcheal practice or theory. As a young premenarcheal adolescent, she did not want to hear about or learn about menstruation. She appeared unprepared for menarche describing her first menstrual period as "Well, I didn't really know that it was coming on". Her explanation of menstruation was "Well sometimes I get really, really...start hitting my sister and brother." On further questioning, she reported feeling moody just before starting menstruation as well as occasionally getting "stomach aches". This pattern of poor preparation for menarche followed by negative menstrual symptoms and attitudes has been supported by research. But in this case the pattern breaks down because she did not have

negative feelings about menstruation. In fact just the opposite, she actually felt happy and joyful during her menstrual period, neither did she want to stop menstruating given the choice. This was her description of how she felt when menstruating:

Q: Do they make you feel different?

A: Yeah, well, they sort of like make me feel happy and um joyful so they sort of start like going round really moody and then I suddenly become happy.

She was one of only two girls to describe their menstrual experiences in any positive way. In looking through her interview for a clue to this contradictory and unexpected happiness and joy, I found the following account of her telling her mother she had starting menstruating:

Q: How did she [mother] react?

A: Well she just started getting really happy. []

Q: How did that make you feel?

A: Well I felt really pleased with myself as well.

Perhaps, in spite of her lack of preparation and knowledge, the positive response from her mother may been powerful enough to make her feel happy during menstruation. This suggests a reason for her happy mood but it is only a suggestion. There were a few examples in these interviews of mothers reacting just as positively as this mother without girls reporting any positive feelings about menstruation. In addition the one other girl who felt "happy" during menstruation only reported the more typical practical response from her mother who "kinda of said oh right humm you do this."

This second girl who felt "happy" is another example of the contradictory and complex nature of menstrual experience. In the first set of interviews she had described menstruation as "you have it every month and you get a tummy ache", she expected pain herself, and she didn't "really want to know anything about it." In the second set of interviews she described menstruation as "Um well you

just [get] loads of blood and stuff goes everywhere." Her menarche happened at school and she managed for the whole day without telling anyone. When she got home and told her mother, her mother's response was "[She] kinda of said oh right humm you do this." On the basis of research findings one might have expected this girl to have negative menstrual feelings and symptoms. Yet she reported minimal, occasional menstrual symptoms and feeling "happier" during her menstrual period.

The only other change in post-menarcheal girls' explanations and descriptions of menstruation was in relation to the discourse of 'aches' and 'pains'. In a few cases as girls experienced a pain free menstruation, they dropped pain from their descriptions as in the case above. In other cases as girls experienced pain it was included, as in this first girl's description:

A: Well um you just get blood and you get tummy aches, you get pains in your tummy.

Q: And why do we have these?

A: So that when we are older, we can have children.

She was the one girl who reported quite severe menstrual cramps: she couldn't ride her pony during her menstruation and she had been to her doctor for treatment. Before menstruating, she had not expected pain saying: "No, she [mother] didn't tell me about the tummy aches." The second girl did not report regular menstrual pain, but as she said: "Not every time. If it's bad, I get a really bad pain". Her description of menstruation by the second set of interviews had changed from "you feel really scared because you get blood and all that" to:

You get a tummy ache sometimes, cause um the other day when I had it, I got um [a] really bad tummy ache and I felt ill.

In her case, her explanations were based on her experience rather than ideas: they could be described as phenomenological rather than scientific. In the first set of interviews, she had only begun her

menstruation two months previously so that her explanation of menstruation was a description of how she was feeling about menstruating. In the second set of interviews, she appeared to have recently experienced a painful menstrual period so that her explanation was a description of that event.

This phenomenological approach to menstruation was unusual when these postmenarcheal girls talked about their menstrual experience, except in relation to menstrual pathology. In the interviews I asked them a series of questions⁵¹ about the effects of menstruation and their feelings about menstruation. In most respects, their answers were brief and low-keyed indicating how successfully they and others regulated menstrual discourse and practice. Here is a summary of their responses to these series of questions.

On the whole, they thought people had not treated them differently since menarche. This was not surprising in relation to people outside the family because these girls rarely talked about menstruation with anyone including friends. They would "sometimes talk about it a little bit" but they tended to not share their experiences or feelings. They informed one another about their menstruation through signs, like not swimming at school or as one girl described: "Um sometimes my friends [say] oh what's up with you and I'm going (gives a big sigh)."

They expressed few worries about and few effects of menstruation. The issues raised tended to be about the regularity, normality, and inconvenience of their menstruation. In terms of regularity the issue was hygiene and concealment. If girls' menstruation started when they were not expecting it, they might get "embarrassed". There was always this potential for embarrassment. Once they began menstruating, girls' concern changed from the start of the *first* menstruation to the start of the *next* menstruation.

In terms of normality the issue was whether their menstrual cycle conformed to the expected norm. The norm appeared to be

defined as a menstrual period which occurred every 28 days and was of 5 days duration with minimum pain, slight or occasional pain was acceptable.

In terms of inconvenience the issue was partly about the curtailment of activities and partly about hygiene. If girls wanted to swim or shower especially but not exclusively at school, they resented not be able to because of sanitary towels or fear of bleeding in public. The contradictory demands of not being able to swim and of concealing menstruation can create difficult situations for girls. This was illustrated clearly by one girl:

I was a bit worried cause on Monday my friends have got a swimming pool down the road and we sort of go swimming in it. But I sort of just stopped [menstruating] but if it had carried on then I wouldn't have been able to go in, and it would [have] been tricky to say [that] I could go in or anything.

If they wanted to do other activities such as skating or horse riding, they resented painful periods stopping them. But their biggest complaint was the nuisance of menstrual hygiene. They dislike changing pads, dealing with pads, and concealing everything, especially at school. As the girls said: "It's a lot of hassle and you've got to change [the pads] all the time", "I just don't like them because they are YUK", and "[I dislike] just having to keep yourself to yourself."

When I asked the girls if they felt they had changed in any way since they started menstruating over half said "No", with the other half simply saying they felt "more grown up". On the whole these girls just did not have much to say about their experience of menstruation, unless they were suffering from menstrual problems or pain. I want to illustrate what I mean with two extracts from the interviews: in the first interview the girl had no problems and in following part of the interview very little to say whereas in the second the girl had painful menstrual periods and something to say.

First Girl - no menstrual symptoms

Q: Do you feel any different inside yourself?
A: No.
Q: Do you feel more grown up?
A: No, not particularly.
Q: People just treat you a little bit more [grown up]?
A: Yeah.
Q: When you have your periods now, do you tell anybody?
A: Not really.
Q: Is there anything that's [] worrying about them?
A: No.
Q: What are your periods actually like, do you feel alright?
A: No, I don't have any pain.
Q: You feel the same?
A: Yeah.

The paucity of this girl's answers could be attributed to a reluctance to be interviewed even if she had volunteered. Although this was a possibility, her comments in other parts of the interview indicated that she was willing and able to say more about other things. During the debriefing at the end of the interview, she had said she thought the questions were "good" and she agreed to come the next year. I suggest her brief answers were more to do with the silence about and concealment of women's *normal* menstruation in everyday life than with her personality or the interview, whereas *abnormal* or *problematic* menstruation has a discourse - the medical discourse of menstrual pathology or the sexist patriarchal discourse of disgust in which 'pains', 'aches', 'moods', and 'miseries' can be discussed. Compare the extract above with the extract below.

Second Girl - menstrual symptoms

Q: Do you feel any different inside yourself?
A: Um yeah cause I feel different cause sometimes um I get tummy aches and everything and I get them quite often.
Q: When you have your periods, is it before?
A: I always get tummy aches before so I know and then I have them sort of half way through and then none.
Q: Until kind of the next time round?
A: Yeah half way though, well I get them sometimes when I'm not on and then I just ignore them and take a paracetamol and ignore them.
Q: Do you take anything for the pains when you have them?
A: Um I used to have the paracetamols but mum got me some tablets, I haven't tried them but she got them a week ago.

This second girl has something to talk about - symptoms and treatment. Within a discourse of menstrual pathology, she had more to say and I had more to ask. The same pattern occurred when other girls talked about their menstrual difficulties. From having relatively little to say about their menstrual experience, they would talk more expansively about their problems or difficulties as the following extracts illustrate:

Q: *Are there any things you worry about with your periods?*

A: Yes, things like in case when you've got P.E. you don't know if its come on or not and it would be a bit embarrassing. [I'm] worried cause I don't know when its going to come on or anything.

[The girl was worried because she was menstruating every two weeks]

A: Yeah, only for the last 2 weeks, or something has happened, for the last 2 months sort of thing. Mum says if it does that again better go and see the doctor.

Q: Is there anything else that you worry about []?

A: Well not really.

In making this point about the discourse of menstrual pathology, I am not trying to suggest that girls suffer from menstrual distress because they are unprepared for menstruation, have negative attitudes to menstruation, or expect to have menstrual difficulties. In fact these interviews suggest there no such straight forward relationship between expectations about or preparation for menstruation and menstrual attitudes or symptoms. As we have seen, there were girls who expected pain, but did not have any. And girls who didn't expect pain, but did have it. In the event in this study, half the postmenarcheal girls did report some menstrual symptoms: they said they got "grumpy before" or "sometimes I have tummy aches". But girls tended to describe these symptoms as occasional, brief, or transitory, and they did not to seek treatment. They viewed them as part of *normal* menstruation not *abnormal* menstruation and consequently they had little to say about them. The following was a

typical comment on these symptoms: "Sometimes I get stomach pains and things but nothing that bad."

IN CONCLUSION

Certainly the way in which the dominant discourses and practices of menstruation constructs menstrual experience had given these young adolescent girls few positive feelings about the menstrual cycle. Of the postmenarcheal girls, two girls were delighted to get out of showers and swimming at school while slightly more girls liked the feeling of growing up. However, most girls especially if they ^{were} postmenarcheal could find nothing they liked about menstruation. Depending on their desires and their menstrual symptomology, they found it more or less restricting, inconvenient, painful and distasteful. In the absence of a discourse of menstrual pleasures or a practice of menstrual celebration, as these girls had expected the onset of menstruation had brought them few advantages and fewer delights. There was not even much to talk about except aches, pains and mess. The only advantage of menarche was that it did signify to these girls that they were growing up and this was important. For slightly more than half, it was important enough that they would not stop menstruating given the chance.⁵² At least they felt they were normal and more grown up. As they said:

Well, you just, you know, if you don't have them, people would think there was something wrong with you or something.

It would seem strange [to stop menstruation] like you weren't growing up or something.

However, for a substantial number of these girls the importance of growing up and normality was not enough. There were too many hassles and too few pleasures so that they would only menstruate "when I wanted to have a baby."

CHAPTER 10

CONCLUSION

Over the years, while I have been working on menstruation, I have increasingly asked myself how it came about that I have written such a nasty book?

Sophie Laws, 1990,
Issues of Blood, p. 207.

I think [the interview questions] were very good. I think they are the sort of things I feel a lot better for talking about...because I've never really talked to anyone like that about them before.

Girl commenting on her
interview - this study.

During the years I have been working on this research into menstruation and adolescent girls, in common with Sophie Laws I have asked myself why I decided to "work on what has been spoiled"⁵³ and "publicly identify...myself with this highly stigmatised subject".⁵⁴ Although I have always found it a fascinating study, it has also been a difficult and painful experience, full of contradictions.

It was painful to be faced with my own negative feelings about menstruation which is after all an aspect of my own femaleness and a reality of my own body. It was and at times still is difficult to discuss my research especially with men or in mixed company: even women do not necessarily want to be faced with what I have to say. I have lived with the contradiction of thinking that menstruation is an important topic for research, yet fearing that I am being marginalized by taking up this topic for *my* research. After all it was a male psychologist who originally encouraged me to research menstruation because of its promise as an under-researched 'ecological niche' which men "can't" do. But always the questions remained with me - why can't men do research on menstruation and have I have been encouraged into this area *just* because I am a woman? I continue to live with the contradiction of suspecting that menstruation itself may not in fact be *that* important in the psychology of women, yet knowing that in practice women's bleeding

bodies play an important part in women's oppression and subordination in Western society.

It has been difficult for me to escape my training as a psychologist in pursuit of a universal truth predicated on the autonomous, unitary and rational subject. Even as I tried to develop a more feminist critical approach in the early stages of my research, I found myself caught up in the basic assumptions of traditional psychology and the micro-processes of research. My discussions with my original supervisors were framed by concerns about reliability, validity, objectivity and facts; not concerns about how psychology could be done differently, what values should inform the research or what effects might be produced. It was only through my change to a poststructural psychology that I began to understand how psychology is produced by social forces, underwritten by 'fictions' and affected by irrationality.⁵⁵

Without this understanding, it was difficult to make sense of modern psychology's claims about menarche, menstruation and psychology. Modern psychologists have decried the lack of research on menarche and menstruation, yet as I have shown, these have been subjects of psychological research since psychology's emergence as a discipline. My literature search as well as my historical work has yielded numerous articles, doctoral dissertations and books about menarche and even more about menstruation. Modern psychologists have proclaimed menarche to be the signal event in female adolescent development, yet their research has demonstrated that menarche does not have any significant effects on girls' self-concept nor has it been proved to have long term effects on girls' subsequent menstrual experience. These results were repeated in the research I did on the effects of menarche on girls' self-concept and attitudes to menstruation: menarche had no effect on any aspect of girls' self-concept and few effects on girls' attitudes.

Yet like these modern psychologists, I am claiming that the onset of menstruation has important and real effects on women's and girls' lives and subjectivity.⁵⁶ What may be as important as any light the research on menarche throws on girls' development is how it can illuminate "unexamined features of the lives of adults".⁵⁷ In this case, it is the lives of menstruating women and working female psychologists. I want to suggest that it has been as much from their own experiences that women psychologists have been writing as from their research into girls' development per se. The psychometric testing of traditional psychology may produce no significant menarcheal effects and even woman centred interviewing may not reveal the full impact of menstruation on girls. But as menstruating women psychologists, we know menstruation has significant and important effects: it is a real part of our everyday life which has no public place in male dominated work or male defined reality. A woman's menstruation may go unnoticed in public, but she herself is acutely aware in order to conceal from others. Psychological research into menarche may be done and some of it may even be published, but in reality it is rarely cited, rarely taught and rarely discussed.⁵⁸ The dominant psychological agenda and practice has been set by powerful patriarchal scientific discursive practices. What has been presented as a seemingly abstract code of psychological science "in fact tells a very concrete story, rooted in our particular form of social hierarchy and control"⁵⁹ in which women and their bodily experience are denied and denigrated.

The discussion groups I did with girls and boys revealed the extent of this denial and denigration of the female body and menstruation. All these adolescents found these discussions problematic and menstruation particularly difficult. Although in comparison to boys young adolescent girls were more knowledgeable and could talk more easily to their mothers about menstruation, they were still remarkably ignorant about the realities of menstruating. In relation to the onset of menstruation, the majority were worried,

anxious or even scared; in part because of an inevitable lack of experience but in part because of social rules of concealment and silence. This everyday silence about menstruation can leave girls who start menstruating younger than the average 12 years old vulnerable in two ways. First, they can feel quite 'abnormal' because menstruation tends to be absent from the education of and conversations with pre-adolescents. Second, a girl could begin menstruating totally unprepared in a hostile environment.

The denigration of the female body could be seen in the boys' conversations about girls, menstruation and their 'sex' education. At best these boys were ignorant about menstruation, considering the female body as some extra-ordinary feminine object quite different from their own masculine body. At worst they expressed a "crude form of anti-woman ideology".⁶⁰ It has been an uncomfortable and painful experience for me to directly face how young adolescent boys act in oppressive ways. I was and still am upset and angry when I read in the transcripts about what is done to girls. I was and still am upset and angry at the arrogance and injustice of a male dominated scientific psychology which sets the agenda, allows only one story and still assumes "the subject-position of one who in principle can know about human development *in general*."⁶¹

It had been in order to escape this male dominance and to tell another story that I had moved to a feminist woman centred contextual analysis and girl only interviews. It was difficult for me when I realised that a contextual analysis did not theorise how girls' subjectivity is constituted in the social and that interviews with girls only told part of the story. I began to have serious doubts about the whole project, alternating between feeling "intensely personally undermined"⁶² and despairing of the psychological enterprise. My choices seemed to be a 'political' alternative in which I became a "hostage to the fortunes of factions of scholars",⁶³ a feminist psychology "ultimately reducible to conventional

psychology's primary concept of the individual subject"⁶⁴ or simply "pack up and go home."⁶⁵

Instead, I took the prosaic step of attending a conference in London on "Discourse and Gender" where I was introduced to a third alternative - a different kind of psychology which does not turn its back on the psyche or "simply propose new universalizing theories to replace the old."⁶⁶ By the good chance of being in the right place at the right time and the good graces of the women who organised the conference, I was able to take up an approach which incorporates an understanding of the history of social forces that produce discourses of the female body, menstruation and menarche. Although this approach only claims 'stories' specific to a time and place, it recognises the real effects of psychological research and is concerned about values.

It was the change to a feminist woman professor and a poststructural discourse analysis that enabled my real interests in menstruation to come to the foreground of this doctoral research. I could now pursue questions about the sources of our culture's negativity about menstruation and its effects on adolescent girls' subjectivity. It was through tracing the changing conceptions of menstruation from the 17th to 20th century that I have tried to show how our assumptions about the female body and menstruation are not based on a nature-given reality or universal human social or psychic structures. Rather I have argued that while constrained by the material realities of the body, our present discourses and practices of the female body and menstruation are the product of specific, historic and patriarchal 'fictions' which support male elites. And how in common with the other human sciences, psychology has been part of this production and re-production of the female body as different from and inferior to the male body. The corollary to this argument is that our modern psychological questions about the menarcheal girl have not arisen from the transparent nature of adolescent girls' development. The tabooed, vulnerable, traumatised and always sexual,

always extra-ordinary menarcheal girl has been an ever present object of psychological scrutiny and practice in child psychology since its emergence as a discipline in the early 20th century.

As I have discussed in Part II, this is a transformation from previous theories and accounts of the female body as the same as if inferior to the male body, menstruation as a healthy process which could incite sexual desire and the onset of menstruation as only the beginning of the "flowers". Psychology with its reliance on a nature-given body, theories of abnormality and claims to practical knowledge is implicated in pathologising the female body as an aspect of power to regulate the female population and produce the docile female subject. It builds on the medicalisation of the menstrual cycle so that menstruation can only be talked about in a psycho/medical discourse interminably,⁶⁷ while elsewhere it becomes taboo and subject to the practices of concealment and silence.

It is important for a contemporary feminist psychology of menstruation and menarche to understand that our present discourses of the female body and menstrual cycle are a historical phenomena constituted as^{an} aspect of power. It is important to understand this: so that we do not re-produce the peculiarities of female physiology as somehow ab/normal and so incommensurately different from the male that women become 'obviously' and 'naturally' designed for a 'special' sphere however that is presently conceived; or so that we do not position women as somehow to blame for their menstrual cycles through assumptions about women's faulty physical apparatus, poor mental attitudes, inability to learn correct facts or failure of mothering or femininity; or so that we are not implicated in the patriarchal disciplining and regulation of what can and cannot be said or what can and cannot not be done by women in relation to their bodies; or that we ignore the way in which the dominant discourses, practices and power relations constitute our subjectivity as women and psychologists - a subjectivity which is irrational, contradictory and in process. The deployment of only a traditional psychological

approach will not account for the nature of women's and girls' menstrual symptomatology, feelings, behaviour or practices nor will it transform the discourses and practices of the female body.

In Part III of this thesis, I have tried to show the power of a feminist poststructural discourse analysis to account for the inscription of young adolescents into menstrual discourses and girls' subjectivity in relation to menstruation. I have concentrated on a small group of girls and boys in British society: they do not constitute a representative or normative sample. This is not a generalised truth about adolescents' discourses of menstruation or girls' subjectivity. Different adolescents will have been exposed to different discourses and different girls will have different subjectivities: these depend upon numerous factors I have not researched including religious beliefs, cultural backgrounds, material conditions, educational experiences, peer groups and parental practices to name but a few. However, I hope what I have done may give pause for thought for anyone engaged in a psychological enterprise or with young adolescents as well as serve as a starting point for further studies. Although this is only one story and one step to a new approach in psychological studies of menarche, it to be hoped that "such writing can still have real effects (Walkerline)."⁶⁸

Certainly my research suggests in common with modern child psychology that puberty can bring problems for adolescents. Their changing bodies and sexuality are a source of discomfiture and embarrassment at the very least. Although the extent of adolescent rebellion or '*storm and strife*' are contested in psychological literature, the view of adolescence as a nodal point for adult sexuality and identity underwrites much research in developmental psychology. As for the 'problems' of girls and menarche, they have been dealt with in different ways.

The dominant approach has been to treat puberty as a developmental transition which affects girls and boys more or less equally. Here puberty is seen as a physical process involving the

development of adult sexuality. In boys sexual maturation is marked by the growth of the genitals and the development of secondary sexual characteristics like facial hair; occasionally seminal emissions will be mentioned. In girls sexual development is marked by menarche and the development of secondary sexual characteristics like breasts. The only discussion of menarche is in the context of the advantages and disadvantages of being an early- or late-maturing girl. On the one hand, this modern child psychology discourse does not constitute menarche as a particularly significant, pathological or distressing event. The development of girls and boys is treated as more similar than different. On the other hand, this approach is predicated on nature-given sex differences with the ideal goal assumed to be 'normal' sex roles, a gendered identity and heterosexuality. Not only does it ignore diversity, it completely ignores the difficulties and realities of being a girl and becoming a woman in a sexist patriarchal society.

An alternative approach to female puberty has been taken by feminist psychologists. Here the focus is primarily if not exclusively on girls. Menarche is seen as an important event in girls' development at the very least requiring adjustment to regular menstruation and signalling potential fertility. There is discussion about girls' preparation for, attitudes to and knowledge about menstruation. These factors are considered important determinants of girls' experiences of menstruation and consequently better preparation for and education about menstruation is advocated. This approach to female puberty has raised important issues about the impact of menstruation on girls and Western culture's negative attitudes to menstruation. Certainly in the light of the regulation of menstrual discourse and practice, it is crucial that girls are prepared for the onset of their menstrual periods.

However, on the basis of my research I suggest that better preparation and positive education will not in themselves lead to better attitudes to or experiences of menstruation. Although this

feminist approach seeks to develop a biopsychosocial interactionalist theory of female development,⁶⁹ its reliance on biological models of the body, unspecified social influences and traditional psychological theory reduces its solutions to just more of the same preparation and education that has already singularly failed to produce 'positive' attitudes to menstruation.

We can no longer afford to view menarche and its attendant difficulties as arising out of the physical realities of girls' developing bodies or their lack of preparation or poor social education. Such constructs both belie the immense complexity of the discourses and practices of the female body and menstruation, and explain it away by making it mothers' and educators' problem. By ignoring the cultural and patriarchal construction of the female body, a particular historically produced 'body' discourse and practice can remain intact. The girls in this study are *failing* to learn about menstruation, they are *failing* to be prepared for menarche and they are *failing* to have positive attitudes to menstruation. But this is not because their mothers or even their teachers are ignorant or inadequate or because bleeding genital orifices are inevitably disgusting or frightening. Neither telling girls about the mechanics and management of menstruation nor teaching them positive attitudes is going to solve the difficulties of becoming a menstruating adolescent. There is no easy womanhood, no simple adjustment to sexual maturation thanks to the sensitive mother or enlightened educator preparing the way through the crisis inside. The failure of girls to adjust to the onset of menstruation and the crisis of girls on reaching menarche is an aspect of the historical construction of the dominant male and the subordinate female designed by nature for passivity, procreation and domesticity with menstruation as the event *par excellence* which symbolises women's difference, sexuality, inferiority and fate. This is the powerful regulation of the feminine.

This does not mean there is nothing to be done to improve girls' lives. There are some simple things that the girls in my research suggested themselves, as have girls in other studies.⁷⁰ Girls and boys could be given their education about puberty, sexuality and menstruation in single sex groups, especially in the early stages and ages. Any discussions and educational materials could be equally about girls and boys, their bodies and their role in reproduction. Women teachers could teach these areas to girls and men teachers could teach boys. Schools both primary and secondary could set up mechanisms that accept menstruation at a public level including decent toilet facilities, easy access to sanitary products and recognition of girls' menstrual requirements as well as the reality of menstrual discomfort.

If, in addition to these simple things, schools were to take up what Jacqui Holson considers their duty "to challenge and condemn boys' and mens' sexual violence and, thereby, to help empower young women to challenge and change their world"⁷¹ and developmental psychology was to become involved in what Ben Bradley considers "an increasingly profound and intimate way with the human struggle for liberty and equality",⁷² then there might be a better possibility for social justice for adolescent girls.

Certainly when my research into the historical construction of the female body and my discussions with young adolescents are collected together hard and painful truths are told. It may be that they will be difficult to accept and meet defensively. The dominant discourses of the female body and the psychology of adolescent girls has been remarkably resistant to any fundamental change. The language may evolve and new 'facts' may be 'discovered' but the story stays the same - women are different from and inferior to men by virtue of their bleeding bodies.

However, it has not always been like this. Menstruation was once the "flowers" and menstruating women were desirable and desirous. Women ^{in both the Victorian era and in the present} have resisted the transformation of the female body

into a somaticised and pathological object of the male gaze and practice. They have even created alternative visions of the healthy and capable female body.⁷³ If it has been different before then it could be different again but to be different the practices of the regulation of the feminine would have to be transformed. We need different fictions to function in truth and help in the transformation of the discursive constitution of the feminine body.

Girls in this study give us some hope for this transformation with their resistance to the dominant discourses of menstruation. They refused to learn the correct 'scientific' theories, they complained about menstrual practices and they suggested a different way. We need to continue this resistance and to tell a different story. For feminist psychology I suggest incorporating into our research an understanding of the history of social forces that produce ideas of the female and male body, femininity and masculinity and the psychology of women and menstruation. For women I suggest we need to talk about menstruation with friends, colleagues, lovers, family, children and adolescents. This is a necessary (and I know a difficult) step even if it is not a sufficient step in any transformation of sexist patriarchal discourses and practices of menstruation, menarche and psychology. The girls in my study encourage us by saying:

It's a subject that's always like been, they shouldn't talk about it in front of people, I think you should get it out in the open a bit more.

I think it's important to find out about....talk about growing up.

Um.....I thought it would be embarrassing but it wasn't I could talk and everything.

Conclusion - reflections.

In conclusion I want to reflect and comment on the limitations and difficulties of the thesis I present here: as with any work there are things that could have been done differently and can be developed further. Not only has it been painful to be repeatedly faced with my own and others negative feelings about menstruation and difficult to escape my training as a traditional psychologist, but it has been difficult (as well as painful, exhilarating and exhausting) to pull together into one piece of work what are two completely different psychological methodologies, e.g. traditional social psychology and poststructural discourse analysis, and three related but different studies, e.g. the social psychology of menarche, the historical construction of the female body, menstruation and menarche, and British adolescents and discourses of menstruation. It has been problematic to collect data in terms of a traditional methodology in this case through questionnaires and semi-structured interviews and then to analyse it in terms of a poststructural discourse analysis.

This has resulted in a number of discontinuities in the thesis. In Part I, I have included information about methods and data which I did not complete and did not analyse. In order to take up a poststructuralist discourse analysis, I had to stop both my analysis of the questionnaire data and the contextual analysis of the interviews. Then having, as it were, changed my 'mind-set' from a traditional psychological approach to a discourse analysis, I found it problematic to go back to my original work to prepare Part I of the thesis. Consequently, the analysis I present is fragmentary and incomplete. Ideally this part of the thesis could have been either more succinct or more complete though in reality this would have been beyond the possible scope and limitation of a PhD thesis.

In Part II of the thesis I struggled firstly to understand and explain a poststructural psychology and discourse analysis as influenced by the work of Michel Foucault and secondly to trace the social, political and historical influences on the present psychology of menarche. In this struggle with what was for me exciting but difficult research, I did not indicate that Foucault's approach to historical evidence has been a subject of debate among historians with some arguing that Foucault has been rather selective in his use of historical evidence. As my aim in using a Foucaultian approach was to demonstrate that psychological assumptions about the female body, sexuality and menstruation are the result of what Foucault calls a long historical production of 'truths', I had neither the time nor the space to explain the economic, social or political circumstances from which these psychological theories and practices emerged. My discussion of particular discourses was governed by psychological questions rather than by considerations of economic, social or political history. This focus meant that the continuities and discontinuities between the different discourses could not be addressed in this thesis. In a

history of the present psychology of menarche, these issues would be developed fully.

This leads me onto the relationship between Part II and Part III of the thesis. On reflection the links between the historical analysis of discourses of the female body, menstruation and menarche and the discourses of young British adolescents about the body and menstruation are not as clear or as explicit as they could be. In part this was the result of collecting data in terms of one methodology and then analysing it in terms of another as I discuss above. In part it was the result of becoming so immersed in the historical analysis and preparation of the research that I did not make clear my thesis that the historical emergence of patriarchal and sexist scientific and psycho/medical discourses of sexual difference, women's bodies and the menstrual cycle has produced present day adolescents' discourses about the female body, puberty, menstruation and in particular menarche.

In my research we see that the previous and dominant scientific, psychological and medical discourses have produced the discourses of young adolescents about the female body and menstruation: discourses in which the female body is incommensurately different from and inferior to the male body and is the always already sexual and reproductive body fascinating yet embarrassing and shameful; puberty is an uneventful event for boys but brings dramatic and problematic changes for girls which are (and should be) dealt with by pedagogic intervention in the form of 'sex' and biological education which further reproduces the female body as a source of extra-ordinary interest, oppression and embarrassment; menstruation is an essentially female and extra-ordinary process linked to adult feminine sexuality and associated with pathology so that although it is (and should be) refused a place in a male dominated everyday social world it has an important place in medical practice and the regulation of the feminine; and menarche is a sign of growing up and fertility for which girls must be prepared in order to conceal their menstrual flow, regulate their sexuality and have positive mental attitudes to menstruation so that 'nothing' is revealed, male sexuality is not incited and their menstrual periods do not disrupt 'normal' public life.

The emergence of these discourses and practices of the onset of menstruation have on the one hand lessened any shock or trauma associated with beginning to bleed in complete ignorance but they have not made menarche a developmental milestone or a symbol of womanhood and femininity let alone a cause for celebration for girls. Rather for the majority of adolescent girls in this study, menarche is constituted at best as 'nothing' much and a hardly noticed step in the adolescent process of growing up, more usually as a nuisance with its hygiene requirements and at worse as a dreaded event which curtails girls' activities and brings unrelieved menstrual discomfort.

Notes for Part III

Chapter 8

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1. Potter and Wetherell (1987) p. 164
 2. Potter and Wetherell (1987) p. 165
 3. Seidel, J.V., Kjolseth, R. and Seymour, E. (1985, 1988) THE ETHNOGRAPH: A PROGRAM FOR THE COMPUTER ASSISTED ANALYSIS OF TEXT BASED DATA from Qualis Research Associates, P.O. Box 3129, Littleton, Colorado, 80161, U.S.A. Tel: 303-795-6420.
 4. Potter and Wetherell (1987) pp. 188-9.
 5. Mostyn, B. (1985) "The content analysis of qualitative research data: a dynamic approach", in M. Brenner, J. Brown, and D. Canter (eds) The Research Interview: Uses and Approaches. Academic Press: New York.
 6. See Wendy Hollway (1989) for a discussion of "intuition" in discourse analysis, p. 16.
 7. The emphasis in all the quotes from the group discussions are mine.
 8. This was in spite of the fact that seminal emissions can be and have been considered a parallel process to menarche/menstruation in puberty. Certainly when I have given papers on this research in mixed groups, the men present will often draw this parallel, especially with how embarrassing erections were for them as adolescents. And even though I discuss seminal emissions and erections in public without embarrassment, it has not been discussed between my adolescent son and I, in spite of his pronouncements both at home and in school that "we talk about sex all the time".
 9. Billig, M., Condor, S., Edwards, D., Gane, M., Middleton, D., and Radley, A. (1988) Ideological Dilemmas: A Social Psychology of Everyday Thinking, Sage: London.
 10. Elkind, David (1981) Children and Adolescents, Oxford University Press: New York and Oxford.
 11. See Hollway (1989) for a discussion of signification, Chapter 4.

12. Tong, Rosemarie (1992) Feminist Thought, Routledge: London, pp. 223-33.
13. A friend of mine who is a child clinical psychologist described just this practice between her daughter and herself. In discussion, this was explained as an attempt to avoid the pathology discourse of menstruation. With no alternative discourse of menstruation, for instance, a discourse of menstrual pleasures and desires, the only adult alternative to either the scientific fertility or medical pathology discourse of menstruation appears to be silence.
14. Shirley Pendergast (1989) talks about the very real hygiene problems girls have in schools.
15. In my university psychology classes, I informally tested this commonsense hypothesis by asking students to write down their associations to list of words. The word "blood" was overwhelmingly associated with either injury or attack. This was true even in the Gender Issues in Psychology classes after we had been discussing menstruation.
16. See Hollway (1989), Chapter 4, for a discussion of the relationship between signification and suppression or repression.
17. Martin, Emily (1989) The Woman in the Body, Open University Press: Milton Keynes, p. 106-7.
18. This was the one girl in all the groups who openly admitted that her periods had started, but from what she said it appeared they had only just begun. She was one of the few girls who openly and easily talked about menstruation. The other girls in her group described her as one who always talked about "things" which was how she described her mother, as always easy to talk to.
19. In spite of positioning myself within the developmental psychology and health education discourse, my questions and explanations often made the same connection as the adolescents between menstruation and fertility. Although I do not tend to associate menstruation to fertility myself (it could be said to have been displaced to the signified through my own more recent menstrual experience), menarche and menstruation are still obviously connected to fertility in my discourse if nothing else because of the dominant scientific discourse. This includes menopause being constructed primarily as the lost of fertility.
20. Walkerdine, Valerie (1990) SCHOOLGIRL FICTIONS, Verso: London and New York, p.5.
21. Walkerdine (1990) p. 5.

22. Weedon (1992) pp. 86-7.

Chapter 9

23. There are two reasons for using these 30 participants. First, it was just too time consuming for this doctoral research to analyse 46 sets of interviews, in effect 92 interviews. I decided to analysis 30 set of interviews considering this would be sufficient for this part of the research. Although I had planned to establish some criteria for selecting the 30, in the event I was only able to transfer 30 complete sets of interviews to THE ETHNOGRAPH because of computing difficulties. It was these thirty 30 girls' interviews which constitute what could be called an 'opportunity sample'.

24. On the basis of the analysis done in Part I, approximately 19 of the girls could be classified as working class with 11 being in the middle and professional classes.

25. See my comments on this issue in Chapter 3, PARTICIPANTS, note in that section.

26. Initially I did make some notes on each interview, but I quickly abandoned this procedure. There was not enough time to take notes between the interviews and, after doing up to 6 interviews consecutively, notes on individual interviews were neither helpful nor informative.

27. At the time of printing this thesis, the transfer of all the interview transcripts had not been done. There were approximately 16 cases where at least one of the interviews could not be transferred. If the difficulties in moving the text from one system, Apple Mac, on to another system, IBM DOSS, cannot be solved, then the remaining interviews will either have to be re-processed from the original tape recordings or scanned into the current programme from the original printed texts.

28. A space between dialogue indicates another person is being quoted, so that in this example there are quotes from four different girls.

29. See Appendix K, Section on Physical Development, Questions 32 to 36.

30. All italics in this chapter are mine and are for emphasis.

31. The thing about themselves girls wanted to changed the most

frequently was their body shape, they wanted to be slimmer. This was 8 girls out of the 30.

32. See Appendix K, Section on Menstruation, Questions 37 to 56.

33. I can remember as a girl seeing sanitary towels for sale in women's public toilets and finding various sanitary products hidden among my mother's underwear, but I couldn't guess what they were for. Other women have told me of being aware of magazine advertisements for menstrual hygiene products and wondering what they were, but again having little idea of the realities of menstruation.

34. Out of the 30 girls, 15 expressed various degrees of disbelief and shock.

35. Initially I was disconcerted by her response and at a loss. Up to this point, I would have described the interview as typical. All the other girls had said they had heard of "periods" at the very least. Suddenly I was faced with a girl who said she had never heard of menstruation and she didn't want anyone to tell her. I was concerned that a pre-menarcheal girl might be unprepared for the onset of menstruation, but her refusal to be told was very emphatic. As the paucity of girls' knowledge became apparent, I decided to follow a similar course to the one established for self-reported abuse. I would offer to answer questions or give them information about menstruation, and I would do what they wanted. Again, although a number of issues about feminist theory and research are raised by this sort of event, as this is not the focus of this research I will acknowledge them but not explore them.

36. Deutsch, Helene (1946) The Psychology of Women. A Psychoanalytic Interpretation. Vol. 1 Girlhood, Research Books Ltd.: London.

37. An editorial about menstruation was published in the magazine, People Weekly, in 1993. It discussed the work on menstruation by Margie Profet in which she proposed that menstruation is "a process designed to protect the upper reproductive tract from sperm-borne infectious bacteria and viruses that can cause sickness, sterility and, in extreme cases, death. In other words, our ancestors had it exactly backward when they viewed menstruating women as unclean." p. 47. Her work won a 1993 MacArthur Foundation award and was published in the Quarterly Review of Biology.

38. Martin (1987) found this to be the dominant discourse used by women to explain menstruation in the U.S.A.

39. At this point in the interview, I did not know whether they had begun menstruating or not. If I had known it may have been informative to gently challenge them about their refusal to answer

when they had personal experience of menstruation.

40. Indeed she did not have to answer, and I went on to the next set of questions. I was relieved that in spite of the power differential at least some of the girls were able to act on my introductory statements that they did not have to answer any questions.

41. Eleven (11) girls said they had no idea what their first period would be like.

42. This was an unexpected aspect of the menstrual pathology discourse. When young adolescent boys complain of aches and pains, they are told they are having growing pains. When young adolescent girls complain of aches and pains, they are told they are having pre-menarcheal pains. I am not debating the causality of these physical symptoms which can be genuinely distressing to young people, but it does support the view that women are encouraged to attribute any negative symptoms of a physical or emotional nature to their menstrual cycle and hormones whereas men are not.

43. In a recent seminar (1994), the participants recalled two images of menarche in the films Carrie and The Blue Lagoon. In both cases the girls' menarche happened in water - one a shower, the other a pool. These scenes were reported as presenting great pools of blood. This brought back to me my abiding memory of my school education on menstruation when I was about 10 years old. It was of a film. All I can remember is bloody tissue projected on the auditorium film screen.

44. In discussing menarche with women, many have very clear memories of starting menstruation at school. In one case a woman described realising that she must be bleeding right through to her skirt. She waited until the end of the class when everyone had left the classroom. She then stood up, turned her skirt around so that the blood stain was in front, put her books in front of her, left school, and walked home. She was unlucky in not having a coat to put on, but lucky in being able to walk home. In numerous schools, a girl would have to wait to catch the school bus home.

45. Many of these girls would have found it difficult to get home before the end of the day because of school rules and transport. First, it is against the rules for pupils to leave school without permission which would have meant telling a staff member, perhaps a male, that your menstruation had started. Second, this was a semi-rural area with poor public transport. The pupils tended to catch school buses.

46. The girls' responses to being asked "What was your period like?" were so mixed and often contradictory that quantifying them is

difficult. Approximately 6 out of the 18 post-menarcheal girls gave answers that could be clearly categorised as "Don't know", "Didn't notice", or "Don't remember", but other girls gave this as an initial answer but did go on to answer further questions. Other girls said so little about their experience as in the example quoted "Oh, it was okay" that it was almost as if they had hardly notice in reality.

47. Out of the 18 post-menarcheal girls, 13 told only their mothers initially. The other 5 girls only told someone else because their mother was not available when their menstruation began so they turned to a friend, sister, or teacher. All mothers were told eventually as were close girlfriends.

48. Only 1 girl told her father and only 5 girls definitely knew their fathers had been told.

49. This concern about hygiene aspects of menstruation would be a very real concern for girls about managing menstruation in school where the facilities for girls can be truly appalling, see Pendergast (1989).

50. These initial and recurring responses of "don't know" before then giving a fuller response appeared to signal the need for girls to gather their thoughts when presented with questions they were not typically asked. It appeared to be a sort of 'let me think' conversation filler.

51. See Appendix K, Section on IF YES, Questions 66 to 74.

52. Out of the 18 post-menarcheal girls, 8 said they would stop menstruation given the chance while 10 said they would not.

CHAPTER 10

53. Shuttle, Penelope and Redgrove, Peter (1978, 1986) revised edition, The Wise Wound. Menstruation and Everywoman, Paladin: London, p. 10.

54. Laws (1990) p. 207.

55. See Walkerdine, Valerie (1993) Theory and Psychology, Vol. 3(4),

56. See the work of Sophie Laws (1990), Emily Martin (1989) and Lesley Holly (1989).

57. Bradley (1993) p. 409.

58. This is in contrast to the psycho/medical discourse of menstrual pathology especially premenstrual syndrome or anthropological/religious discourse of menstruation as taboo or pollution.
59. Martin (1989) p. 197.
60. Laws (1990) p. 209.
61. Bradley (1993) p. 406.
62. See Sophie Laws (1990) for a discussion of the researcher's difficulties when interviewing men and when working from a minority position, p. 220.
63. Bradley (1993) p. 406.
64. Squire (1989) p. 123.
65. See Ben S. Bradley (1993) for the choices advocated for developmental psychology, p. 408.
66. Bradley (1993) p. 407.
67. See Foucault (1976) for a discussion the nature of the medical discourse about sexuality and women.
68. Bradley (1993) p. 408.
69. See A.C. Petersen (1980a) "Biopsychosocial processes in the development of sex-related differences" in J.E. Parsons (ed.) The psychobiology of sex differences and sex roles, Hemisphere: Washington, D.C. and (1980b) "Puberty and its psychosocial significance in girls" in A. Dan, E. Graham, and C. Beecher (eds) The menstrual cycle: a synthesis of interdisciplinary research. Vol. 1, Springer: New York.
70. See Holly (1989).
71. Holson, Jacqui (1989) "The Sexual Harassment of Young Women" in Lesley Holly, p. 141.
72. Bradley (1993) p. 412.
73. For examples of resistance among women during the first wave of feminism see Dr. Elisabeth Garrett Anderson (1874), Leta Stetter Hollingworth (1914), Dr. Mary Putnam Jacobi (1878), Dr. Clelia Mosher (1910) and Mary Roberts Smith (1900-01) as discussed in this thesis in Chapter 6. For examples of resistance among current feminists see Emily Martin (1987), Paula Nicolson, Jane Ussher and Barbara Sommer (1992), Mary Brown Parlee (1980), Janet Sayers (1982), Anne Walker (1992) and Patricia Vertinsky (1990).

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APPENDICES

- A: FORMAL PERMISSION FOR RESEARCH
- B: PROCEDURE FOR SELF-REPORTED SEXUAL ABUSE
- C: LETTERS TO PARENTS
- D: GUIDE FOR SEMI-STRUCTURED DISCUSSION GROUP
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FORM FOR ADOLESCENT FEMALES
- N: POSSIBLE SELVES RESULTS

A: FORMAL PERMISSION FOR RESEARCH

Mrs. K. Lovering,
M
P
S

Ref: F /M
Ext: 240

26th June, 1989

Dear Kathryn,

Permission for Research

Thank you for your letter of 15th May outlining your plans for research. On behalf of the Local Education Authority I am happy to give it formal approval. I am glad that you have been in touch with S C and M B. Mrs. C. too, will be a very useful link. I have had a word with P C and he endorses the choice of , with added if you need to make up the numbers.

I take your point about your personal involvement with . Moreover the new head might well wish to get established before engaging the school in a research programme of this nature. (He comes with very good reports from , by the way, and I hope your son will be very happy there).

Yours sincerely,



Deputy Secretary for Education

B: PROCEDURE FOR SELF-REPORTED SEXUAL ABUSE

Procedure for Self-Reported Sexual Abuse

If a girl tells me

1. that she has been abused in the past but is not being abused at present

Then I suggest that if she would like to talk to someone about what has happened to her that she either

- i. telephone (the relevant person) at the Child Protection Team in her area, or
- ii. telephone Childline 0800 1111.

I give her the telephone numbers on a card.

2. that she is currently being abused

Then I first ask her if she has tried to tell anyone or has told anyone and who, if anyone, knows?

If she has not told anyone or the person has not done anything then I say "In my experience abuse can cause you problems either now or as you grow up, so you might want to get some help" and

i." I can put you in touch with someone to stop the abuse but it means bringing in the Social Services, and the police will get to know about it. I will help you to contact the person and go with you to meet them if you want, but it is for you to decide. I won't do anything unless you decide you want it done."

If she says "Yes" then we will contact the Child Protection Team in whatever way we have agreed and I will arrange that someone be with her to meet the worker, either myself or someone that she chooses like a teacher or tutor.

If she says "No" then I will give her the following telephone numbers suggesting that she contact any of them if she wants more information or to talk about it further

- i. Child Protection worker in her area
- ii. Childline number
- iii. My work number.

As the research is confidential then any girl's decision not to do anything more than tell me about any particular experiences must be respected. I will have made contact with the relevant Child Protection worker before the interviewing so that I have the appropriate contact number and they have the dates of the interviewing.

C: LETTERS TO PARENTS



POLYTECHNIC SOUTH WEST

Plymouth

Faculty of Social Science

Department of Social & Political Studies, Drake Circus, Plymouth, Devon PL4 8AA, United Kingdom

Telephone: 0752 233200 Fax: 0752 232293 Telex: 45423 PSWAS G

20 November 1989

Dear Parent,

I am conducting a study on normal growing up in early adolescent boys and girls at several schools in _____, including _____ School. The study has been given formal approval by the _____ Education Department and by Mr _____, the Headmaster. This letter is to tell you about the study so that you can ask for your child not to take part if you wish.

The study at _____ School would involve your child in a small discussion group with his/her classmates of the same sex and myself. The discussion will cover how the children feel about growing up in general and about their physical development in particular. Not much is known about how boys and girls feel about the emotional and physical changes of early adolescence or how much information the children themselves feel they need. The purpose of the study is to learn more about what boys and girls experience during this important stage in growing up. At present too little is understood about normal development at this age.

The discussion will take about 35 minutes at a good time for your child and his/her teacher. Each child will be told that the discussion group is voluntary and he/she can withdraw at any time. All the discussion material will be kept so that no comment can be linked to a particular child.

In other studies of this kind, children have enjoyed the chance to say what they think and feel. I am sure the children will find the same in this study. If you do NOT want your child to take part please fill in the slip below. The study will take place during school before the Christmas holiday. Please do contact me at Polytechnic South West, Plymouth (0752) 233272 if you have any questions. Thank you very much for your time in this matter.

Sincerely

Kathryn Lovering

Kathryn Lovering (Mrs)
Senior Lecturer

Study on Growing Up

I have read the above letter and do NOT want my child to take part.

Signature of parent: _____

Name of Child: _____

Acting Head of Department: Mr Adrian Lee, BSc, MSc



POLYTECHNIC SOUTH WEST

Plymouth

Faculty of Human Sciences

Department of Applied Social Science, Drake Circus, Plymouth, Devon PL4 8AA, United Kingdom

Telephone: 0752 233200/233297/233298 Fax: 0752 232293 Telex: 45423 PSWAS G

Dear Parent,

I am conducting a study on normal growing up in early adolescent boys and girls at several schools in _____, including _____ School. The study has been given formal approval by the _____ Education Department and by Mr. _____, the Headmaster. This letter is to tell you about the study so that you can ask for your child not to take part if you wish.

The study at _____ School is in two parts. The first part would involve your child in filling in a number of short questionnaires; the second part would involve a short interview. The questionnaires and the interviews will cover how the children think about their future and feel about growing up in general and about physical development in particular. Not much is known about how boys and girls feel about the emotional and physical changes of adolescence or how they view their future. The purpose of the study is to learn more about young people during this important stage in growing up. At present too little is understood about their normal development at this age.

The questionnaire and the interview will take about 45 minutes each once per year during your child's time at the school. They will take place at a good time for your child and his/her teacher. Each child will be told that the study is voluntary and he/she can withdraw at any time. All the questionnaire and interview material will be kept so that no answers can be linked to a particular child. It is confidential.

In other studies of this kind, children have enjoyed the chance to think and talk about themselves. I am sure the children will find the same in this study. If you do NOT want your child to take part please fill in the slip below. The study will take place during school over the next five years. Please do contact me at Polytechnic South West, Plymouth (0752) 233272 if you have any questions. Thank you very much for your time in this matter.

Yours sincerely,

Kathryn Lovering

Kathryn Lovering (Mrs)
Senior Lecturer

Study on Growing Up

I have read the above letter and do NOT want my child to take part.

Signature of parent: _____

Name of child: _____

D: GUIDE FOR SEMI-STRUCTURED DISCUSSION GROUP

GUIDE FOR SEMI-STRUCTURED DISCUSSION GROUP

1.) General introduction to topic of growing up and physical development.

2.) Feelings about growing up.

How does it feel?
What is good about it?
What is bad about it?

3.) Knowledge about the physical development of boys and girls.

What have you been taught about growing up?
What happens to boys?
What happens to girls?
It is easier/better for boys/girls?

4.) Sources of information.

Where have you got your information from?

5.) Menstruation

Have you heard of menstruation?
What have you been told about it?
What do you think happens when a woman menstruates?
Why does it happen?
Who has told you?

6.) Adequacy of information

Do you think you know enough about growing up? physical development?
menstruation?
Who teach you? Where? When? With Whom?
Do you have any questions?

7.) For girls only. Feelings and attitudes about menstruation and menarche:

What is it like for girls to reach menarche? the first period?
What are you worried about?
What will be good about it? What will be bad about it?
What do you think menstruation will be like?
How will it effect you?
How do you feel about it?

E: HEADINGS FOR GROUP DISCUSSION PROCESS NOTES

GROUP DISCUSSION: PROCESS NOTES

1. How I felt:
2. General emotional tone and reactions:
3. Non-verbal behaviour:
4. Content: Recalled
5. Content: Transcript
6. Implications and thoughts:

F: PERSONAL DATA FORMS

PERSONAL DATA FORM - FEMALE

1. Write the names of the magazines or comics you like to read
(or write none if you don't read anything).

i. _____

ii. _____

2. Have your periods started yet? (tick and fill in the answer)

Yes ___ If yes, when did they start _____

No ___ If no, when would you like them to start _____

3. What do you find most difficult about growing up?

4. What do you think about this study on growing up?

Thank you for taking part in this study!

PERSONAL DATA FORM - MALE

1. Write the names of the magazines or comics you like to read
(or write none if you don't read anything).

i. _____

ii. _____

2. Has your voice started to break or change? (tick and fill in the answer)

Yes ___ If yes, when did it start to change _____

No ___ If no, when would you like it to change _____

3. What do you find most difficult about growing up?

4. What do you think about this study on growing up?

Thank you for taking part in this study!

G: DESCRIPTIONS

DESCRIPTIONS

Read the following pairs of words that we use to describe people.

You are to put an "X" in the space nearest the word that describes your character most closely as you are now.

Answer as quickly as you can. Put an "X" in the first space that comes into your mind. There are not any right or wrong answers.

Make sure that you have put one "X" in each line and only ONE "X".

EXAMPLE:

FAST _____ : _____ : _____ : _____ : _____ : _____ SLOW

KIND _____ : _____ : _____ : _____ : _____ : _____ MEAN

LIKED _____ : _____ : _____ : _____ : _____ : _____ DISLIKED

STOP!

THE KIND OF CHARACTER I HAVE

Remember there are no right or wrong answers.

GOOD _____ : _____ : _____ : _____ : _____ : _____ BAD

WEAK-MINDED _____ : _____ : _____ : _____ : _____ : _____ STRONG-MINDED

NICE _____ : _____ : _____ : _____ : _____ : _____ NOT NICE

FOLLOWER _____ : _____ : _____ : _____ : _____ : _____ LEADER

HONEST _____ : _____ : _____ : _____ : _____ : _____ DISHONEST

SELFISH _____ : _____ : _____ : _____ : _____ : _____ GENEROUS

CONFIDENT _____ : _____ : _____ : _____ : _____ : _____ UNSURE

POWERLESS _____ : _____ : _____ : _____ : _____ : _____ POWERFUL

PLEASANT _____ : _____ : _____ : _____ : _____ : _____ UNPLEASANT

ACTIVE _____ : _____ : _____ : _____ : _____ : _____ NOT ACTIVE
(take part (not take part
do things) not do things)

STOP HERE!

H: POSSIBLE SELVES QUESTIONNAIRES

POSSIBLE SELVES

Probably everyone thinks about their future some times. When doing so we usually think about what might happen to us and the kinds of people we might possibly become. Sometimes we think about what we will probably be like, other times about the ways we are afraid we might turn out, and other times about what we hope or wish we could be like.

Listed below are a number of "future selves". We are interested in what possible selves, both good and bad, that you may consider for yourself.

The question asks whether you hope this possible self will come true for you.

Please work very fast on these questions and answer with the first thought that comes into your head. Try to be honest. Answer all the questions. THERE ARE NO WRONG OR RIGHT ANSWERS. Circle either yes or no.

Example: I hope this
 will be true
 for me in
 the future

Movie Staryes/no

Healthyyes/no

STOP HERE

Possible self

I hope this
will be true
for me in the
future

1. Good lookingyes/no
2. Cheat at thingsyes/no
3. A parentyes/no
4. Fearedyes/no
5. Hard workeryes/no
6. Worriedyes/no
7. Dentistyes/no
8. Rubbish collectoryes/no
9. Sexyyes/no
10. Put others downyes/no
11. Cook wellyes/no
12. Child abuseryes/no
13. Likedyes/no
14. Self-confidentyes/no
15. Go to collegeyes/no
16. Nurseyes/no
17. Physically strongyes/no
18. Overweight (fat)yes/no
19. Repair carsyes/no
20. Marriedyes/no

Possible self

I hope this
will be true
for me in the
future

21. Divorcedyes/no
22. Doctoryes/no
23. Moodyyes/no
24. Friendlyyes/no
25. Ignoredyes/no
26. Secretaryyes/no
27. Not attractiveyes/no
28. Do well at schoolyes/no
29. Go into businessyes/no
30. Have a good jobyes/no
31. Admiredyes/no
32. Bus driveryes/no
33. Engineeryes/no
34. Selfishyes/no
35. Stupidyes/no
36. Shop assistantyes/no
37. Defend myself
physicallyyes/no
38. In prisonyes/no
39. Cleveryes/no
40. Like my motheryes/no

Possible self

I hope this
will be true
for me in the
future

41. Do badly at schoolyes/no
42. Hairdresseryes/no
43. Unhappyyes/no
44. Be beaten upyes/no
45. Get things doneyes/no
46. Carpenteryes/no
47. Childminderyes/no
48. Like my fatheryes/no
49. Be rapedyes/no
50. Be a leaderyes/no
51. Get into trouble withyes/no
the law
52. Good reputationyes/no
53. Lazyyes/no
54. Have lots of friendsyes/no
55. Cleaneryes/no
56. Teacheryes/no
57. On my ownyes/no
58. Unpopularyes/no
59. Go to universityyes/no
60. Bully othersyes/no

I: SELF-ESTEEM QUESTIONNAIRES

Please mark each sentence in the following way:

If the sentence describes how you usually feel, put a tick (✓) in the box under "LIKE ME".

If the sentence does NOT describe how you usually feel, put a tick (✓) in the box under "NOT LIKE ME".

There are no right or wrong answers. Read the questions carefully.

	LIKE ME	NOT LIKE ME
1. I spend a lot of time daydreaming	<input type="checkbox"/>	<input type="checkbox"/>
2. I'm pretty sure of myself	<input type="checkbox"/>	<input type="checkbox"/>
3. I often wish I were someone else	<input type="checkbox"/>	<input type="checkbox"/>
4. I feel I'm easy to like	<input type="checkbox"/>	<input type="checkbox"/>
5. My parents and I have a lot of fun together ...	<input type="checkbox"/>	<input type="checkbox"/>
6. I never worry about anything	<input type="checkbox"/>	<input type="checkbox"/>
7. I find it very hard to talk in front of the class	<input type="checkbox"/>	<input type="checkbox"/>
8. I wish I were younger	<input type="checkbox"/>	<input type="checkbox"/>
9. There are lots of things about myself I'd change if I could	<input type="checkbox"/>	<input type="checkbox"/>
10. I can make up my mind without too much trouble	<input type="checkbox"/>	<input type="checkbox"/>
11. I feel I'm a lot of fun to be with	<input type="checkbox"/>	<input type="checkbox"/>
12. I often get upset easily at home	<input type="checkbox"/>	<input type="checkbox"/>
13. I usually do the right thing	<input type="checkbox"/>	<input type="checkbox"/>
14. I'm proud of my school work	<input type="checkbox"/>	<input type="checkbox"/>
15. Someone usually has to tell me what to do	<input type="checkbox"/>	<input type="checkbox"/>
16. It takes me a long time to get used to anything new	<input type="checkbox"/>	<input type="checkbox"/>
17. I'm often sorry for the things I do	<input type="checkbox"/>	<input type="checkbox"/>
18. I think I'm popular with kids my own age	<input type="checkbox"/>	<input type="checkbox"/>

	LIKE ME	NOT LIKE ME
19. My parents usually consider my feelings	<input type="checkbox"/>	<input type="checkbox"/>
20. I'm never unhappy	<input type="checkbox"/>	<input type="checkbox"/>
21. I usually do the best work that I can	<input type="checkbox"/>	<input type="checkbox"/>
22. I give in very easily	<input type="checkbox"/>	<input type="checkbox"/>
23. I can usually take care of myself	<input type="checkbox"/>	<input type="checkbox"/>
24. I'm pretty happy	<input type="checkbox"/>	<input type="checkbox"/>
25. I would rather play with children younger than me	<input type="checkbox"/>	<input type="checkbox"/>
26. My parents expect too much of me	<input type="checkbox"/>	<input type="checkbox"/>
27. I like everyone I know	<input type="checkbox"/>	<input type="checkbox"/>
28. I like to be asked things in class	<input type="checkbox"/>	<input type="checkbox"/>
29. I know myself	<input type="checkbox"/>	<input type="checkbox"/>
30. It's usually pretty tough to be me	<input type="checkbox"/>	<input type="checkbox"/>
31. Things are all mixed up in my life	<input type="checkbox"/>	<input type="checkbox"/>
32. Kids usually follow my ideas	<input type="checkbox"/>	<input type="checkbox"/>
33. No one pays much attention to me at home	<input type="checkbox"/>	<input type="checkbox"/>
34. I never get told off	<input type="checkbox"/>	<input type="checkbox"/>
35. I'm not doing as well in school as I'd like to	<input type="checkbox"/>	<input type="checkbox"/>
36. I can make up my mind and stick to it	<input type="checkbox"/>	<input type="checkbox"/>
37. I often don't like being a girl	<input type="checkbox"/>	<input type="checkbox"/>
38. I have a low opinion of myself	<input type="checkbox"/>	<input type="checkbox"/>
39. I don't like to be with other people	<input type="checkbox"/>	<input type="checkbox"/>
40. There are many times when I'd like to leave home	<input type="checkbox"/>	<input type="checkbox"/>
41. I'm rarely shy	<input type="checkbox"/>	<input type="checkbox"/>
42. I often feel upset in school	<input type="checkbox"/>	<input type="checkbox"/>

	LIKE ME	NOT LIKE ME
43. I often feel ashamed of myself	<input type="checkbox"/>	<input type="checkbox"/>
44. I feel I'm not as nice looking as most people	<input type="checkbox"/>	<input type="checkbox"/>
45. If I have something to say, I usually say it	<input type="checkbox"/>	<input type="checkbox"/>
46. Kids pick on me very often	<input type="checkbox"/>	<input type="checkbox"/>
47. My parents understand me	<input type="checkbox"/>	<input type="checkbox"/>
48. I usually tell the truth	<input type="checkbox"/>	<input type="checkbox"/>
49. My teacher makes me feel I'm not good enough	<input type="checkbox"/>	<input type="checkbox"/>
50. I don't care what happens to me	<input type="checkbox"/>	<input type="checkbox"/>
51. I feel like I'm a failure	<input type="checkbox"/>	<input type="checkbox"/>
52. I get upset easily when I'm told off	<input type="checkbox"/>	<input type="checkbox"/>
53. I feel most people are liked better than me	<input type="checkbox"/>	<input type="checkbox"/>
54. I usually feel as if my parents are pushing me	<input type="checkbox"/>	<input type="checkbox"/>
55. I usually know what to say to people	<input type="checkbox"/>	<input type="checkbox"/>
56. I often get discouraged in school	<input type="checkbox"/>	<input type="checkbox"/>
57. Things usually don't bother me	<input type="checkbox"/>	<input type="checkbox"/>
58. I usually can't be depended on	<input type="checkbox"/>	<input type="checkbox"/>

J: MENSTRUAL ATTITUDE QUESTIONNAIRES

	1	2	3	4	5	6	x		
	disagree a lot	disagree	disagree a little bit	agree a little bit	agree	agree a lot	don't know		
10. Girls are more easily upset just before/during their menstrual period than at other times of the month.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
11. Menstruation is a topic that can be talked about easily with one's mother.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
12. Girls feel the same as usual when they have their menstrual periods.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
13. Most teachers are uncomfortable talking to their classes about menstruation.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
14. Menstruation makes most girls feel grown up and mature.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
15. Most girls have cramps or pain when they menstruate.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
16. Girls can do things like swimming or sports when they are menstruating.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
17. I think it is embarrassing to discuss menstruation.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
18. If it was totally safe, and girls could change their minds at any time, most girls would stop their periods for a while.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know
19. I think it is a good thing to discuss menstruation.			1	2	3	4	5	6	x
			disagree a lot					agree a lot	don't know

On this scale how would you rate your overall feelings about menstruation:
(Circle the one that fits best.)

1	2	3	4	5
awful	not so good	alright	pretty good	great

THE END!

ATTITUDE QUESTIONNAIRE

1. How did you first find out about menstruation? (tick one)
- From home _____
- From school _____
- From friends _____
- From T.V. _____
- From a book or magazine _____
2. Who first told you about menstruation? (tick one or more)
- Mother _____
- Father _____
- Teacher _____
- Another Adult _____
- Sister _____
- Brother _____
- Friend _____
- Other _____

Now, please read the sentences below and circle the one closest to how you feel about each statement from

- | | 1 | 2 | 3 | 4 | 5 | 6 | x |
|---|-------------------|----------|-----------------------------|--------------------------|-------|---------------|---------------|
| | disagree
a lot | disagree | disagree
a little
bit | agree
a little
bit | agree | agree
alot | don't
know |
| 3. When girls have their menstrual period they don't want others to know. | 1 | 2 | 3 | 4 | 5 | 6 | x |
| | disagree
alot | | | | | agree
alot | don't
know |
| 4. Girls envy boys because they don't have to menstruate. | 1 | 2 | 3 | 4 | 5 | 6 | x |
| | disagree
alot | | | | | agree
alot | don't
know |
| 5. You can talk about menstruation easily with your father. | 1 | 2 | 3 | 4 | 5 | 6 | x |
| | disagree
alot | | | | | agree
alot | don't
know |
| 6. Most girls have headaches when they have their menstrual periods. | 1 | 2 | 3 | 4 | 5 | 6 | x |
| | disagree
alot | | | | | agree
alot | don't
know |
| 7. Menstruation is something to be happy about. | 1 | 2 | 3 | 4 | 5 | 6 | x |
| | disagree
alot | | | | | agree
alot | don't
know |
| 8. You shouldn't talk to just any one about menstruation. | 1 | 2 | 3 | 4 | 5 | 6 | x |
| | disagree
alot | | | | | agree
alot | don't
know |
| 9. Menstruation is a sign of a woman's general good health. | 1 | 2 | 3 | 4 | 5 | 6 | x |
| | disagree
alot | | | | | agree
alot | don't
know |

1	2	3	4	5	6	x
disagree a lot	disagree	disagree a little bit	agree a little bit	agree	agree alot	don't know

10. Girls are more easily upset just before/during their menstrual period than at other times of the month.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

11. Menstruation is a topic that can be talked about easily with one's mother.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

12. Girls feel the same as usual when they have their menstrual periods.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

13. Most teachers are uncomfortable talking to their classes about menstruation.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

14. Menstruation makes most girls feel grown up and mature.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

15. Most girls have cramps or pain when they menstruate.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

16. Girls can do things like swimming or sports when they are menstruating.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

17. I think it is embarrassing to discuss menstruation.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

18. If it was totally safe, and girls could change their minds at any time, most girls would stop their periods for awhile.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

19. I think it is a good thing to discuss menstruation.	1	2	3	4	5	6	x
	disagree alot					agree alot	don't know

20. On this scale how would you rate your overall feelings about menstruation:
(Circle the one that fits best.)

1	2	3	4	5
awful	not so good	alright	pretty good	great

K: INDIVIDUAL INTERVIEW SCHEDULES

INDIVIDUAL INTERVIEW SCHEDULE

Year One

INTRODUCTION - Thank you for coming to talk to me. As you know I am trying to find out how girls feel about themselves and different aspects of their lives so I want to ask you some questions. I feel it is very important that you know that anything you tell me will be confidential (that is I won't tell anyone here about what you say through it will be part of my report but without any names). Of course if you want to tell anyone you can. Also I hope to see you again next year so we can see if any of your feelings or views have changed with time.

1. Are you still willing to take part?
2. Is it still alright with your family if you are in the study?
3. How old are you
4. What do you think would be the best age to be?

SELF-CONCEPT AND SELF-REGARD

5. Tell me how it feels to be (age)?
6. Do you ever feel happy or really good?
7. Do you ever feel unhappy or depressed? Very often? Tell me what is it like?
8. Are there any situations that make you feel really good about yourself? Tell me about them.
9. What situations make you feel bad about yourself? What are they?
10. How would you describe yourself to yourself? (If you had a penfriend, how would you describe yourself to them?)
11. Overall, then would you say you like yourself?
12. Tell me the thing(s) that you like best about yourself? (What would you say you are good at?)
13. The thing(s) you don't like about yourself? (What you are bad at?)
14. And what would you change about yourself if you could?

IDENTIFICATION AND POSSIBLE SELVES

Introduction: Probably everyone ... wish we could be like.
Do you ever think about things like this?

15. What do you hope to be in the future?
16. What do you expect to be in the future?
17. What do you avoid or fear being?
18. Of of the adults that you know, who do you like the best?
19. Of all the people that you know about, who would you most like to be like?
20. Would you like to be like your mother? In what ways?
21. Would you like to be like your father? In what ways?

RELATIONSHIPS WITH BOYS AND WITH FRIENDS

Many people think that girls start to become interested in boys sometime during secondary school.

22. When do you think girls should become interested in boys as boyfriends?
23. What about you?
24. In terms of a sexual relationship, have you thought about what do you think it is alright to do as a teenager?
25. How have you come to decide this?
26. Do you ever have any doubts?
27. At the moment do you prefer boys or girls?
28. Do you have any special friends?
29. Who?
30. How long have you known them?
31. Are they important to you? Why?

PHYSICAL DEVELOPMENT

One of the things about growing up is the way our bodies begin to change we start to develop an adult woman's body with breasts, hair in different places, a different shape.

32. Do you look forward to these changes?
33. How do you feel about your body changing in these ways.
34. At the present what do you like about your body?
35. What do you dislike?
36. If you could change something about your body, what would it

MENSTRUATION

Another of the changes for young women around this age is the start of menstruation,

37. have you ever heard of menstruation or "having periods"? (IF YES CONTINUE SECTION)
38. How did you first find out about it?
39. How did you feel when you found out?
40. Who gave you the most information?
41. Did your school teach you anything about it?
42. Have you talked about it with other girls?
43. Who should tell girls about menstruation and growing up?
In what situation?
44. Should boys be taught about it as well?
45. With girls or separately?
46. Do you feel you have enough information about menstruation (growing up)?
47. Do you have any questions about menstruation?
48. What are they?
49. Do you have any questions about growing up?
50. What are they?
51. Explain to me what you think happens when you menstruate.
52. Why do you think women menstruate?
53. Do you know if any of your friends or classmates have started to menstruate yet?
54. How many?
55. How do you know?
56. Have you begun to menstruate yet?

If YES

57. When - year and month?

58. What was your first period like?

59. Compared to the girls you know, have your periods started earlier, later, or about the same as the other girls?

60. Did you tell anyone about it?

61. Who?

62. How did (person) react?

63. Did you tell your mother/father?

64. How did your mother/father react?

65. Was this how you wanted them to react?

66. Do your family or friends treat you any differently since you have begun menstruating?

67. Do you tell anyone now when you have your period?

68. Are there any things you worry about with your periods - such as will people know, will you have an accident like spots on your clothes, or other things?

69. Describe what your periods are like?

70. Do you change any of your activities during your periods? (Such as sports, or the ways that you care for yourself, daily activities, etc.)

71. What do you like most about menstruation?

72. What do you dislike most about menstruation?

73. Do you feel like you have changed in any way since you started menstruating?

74. If it was proven to be totally safe, and you could change your mind at any time, would you choose to stop having your menstrual periods for a while?

If NO

75. Are you looking forward to them starting?
76. When do you think your periods will start?
77. Why do you think that?
78. What do you guess your first period will be like?
79. Will you tell anyone about it?
80. Who?
81. Will you tell your mother/father?
82. How will they react?
83. How you would like them to react?
84. Do you think people will treat you differently once you begin menstruating?
85. Will you tell anyone when you are having your period?
86. Are there any things you worry about in relation to your periods?
87. Describe what you think menstruating will be like?
88. Will you change any of your activities during your periods?
(Such as sports, or ways that you care for yourself, daily activities, etc.)
89. What will you like most about menstruation?
90. What will you dislike most about menstruation?
91. Do you think that you will change in any way once you start menstruating?
92. If you could chose any time you wanted, when would you like your periods to start?

GENERAL ISSUES

Considering all the things that we have been talking about, overall,

93. how do you feel about being a girl?
94. What do you think are the advantages?
95. the disadvantages?
96. Would ever like to be a boy?
97. Why/why not?
98. What about being a woman? What do you think are the advantages? the disadvantages?
99. What about being a man? What do you think are the advantages? the disadvantages?
100. When you think back over the last couple of years, what is the most important thing that has happened to you?
101. Tell me how this has effected you.
102. What has been the best thing to happen?
103. What has been the worse thing to happen?
104. Is there anything special that you are forward to happening?
105. Of all the different things in your life, like your family, friends, school, interests, _____, what is the most important to you - that you want to do really well?

CONCLUSION (DEBRIEFING)

That is all the questions that I want to ask.

106. Is there anything you would like to say about any of things we have been talking about?
107. What did you think of the questions? Were there any you disliked?
108. Are there any other questions that I should have asked you, that would have helped me to better understand the things we have been talking about ... that is girls' growing up and their feelings about themselves?
109. How did you find the interview?
110. Would you mind coming again next year to answer the same sort of questions?

THANK YOU!

INDIVIDUAL INTERVIEW SCHEDULE

YEAR 2

INTRODUCTION

Thank you for coming to see me. As you probably remember from last year I want to talk to you about your feelings and experiences of growing up and to hear if your views have changed over the last year. The questions are the same as last year and anything you say to me will be confidential. You don't have to answer the questions if you really don't want to.

1. Are you still willing to take part?
2. Is it still alright with your family if you are in the study?
3. How old are you now?
4. What do you think would be the best age to be?

SELF-CONCEPT AND SELF-REGARD

5. Tell me how it feels to be (age)?
6. Do you ever feel happy or really good?
What makes you feel that way?
7. Do you ever feel unhappy or depressed? Very often?
What makes you feel like that?
10. How would you describe yourself to yourself?
(If you had a penfriend, how would you describe yourself to them?)
11. Overall, then would you say you like yourself?
12. Tell me the thing(s) that you like best about yourself?
(What would you say you are good at?)
13. The thing(s) you don't like about yourself? (What you are bad at?)
14. And what would you change about yourself if you could?

IDENTIFICATION AND POSSIBLE SELVES

Probably everyone thinks about their future sometimes - what might happen to us, what we might be, what we don't want to be like, and even what we wish could be like.
Do you ever think about things like this?

15. What do you hope to be in the future?
16. What do you expect to be in the future?
17. What do you avoid or fear being in the future?
 - i. Would you like to get married when you grow up?
 - ii. Would you like to have children?
18. Of of the adults that you know, who do you like the best?
19. Of all the people that you know about, who would you most like to be like?
20. Would you like to be like your mother? In what ways?
21. Would you like to be like your father? In what ways?

RELATIONSHIPS WITH BOYS AND WITH FRIENDS

Many people think that as girls become teenagers they start to become interested in boys.

22. When do you think girls should become interested in boys as boyfriends?
23. What about you?
24. In terms of a sexual relationship, have you thought about what do you think it is alright to do as a teenager?
25. How have you come to decide this?
27. At the moment do you prefer boys or girls?
28. Do you have any special friends? Who?
30. How long have you known them?
31. Are they important to you? Why?

MENSTRUATION

One of the changes for young women around this age is the start of menstruation,

37. Have you ever heard of menstruation or "having periods"?
(IF YES CONTINUE SECTION)
38. How did you first find out about it?
39. How did you feel when you found out?
40. Who gave you the most information?
41. Did your school teach you anything about it?
42. Have you talked about it with other girls?
43. Who should tell girls about menstruation and growing up?
In what situation?
44. Should boys be taught about it as well?
45. With girls or separately?
46. Do you feel you have enough information about menstruation
(growing up)?
47. Do you have any questions about menstruation?
48. What are they?
51. Explain to me what you think happens when you menstruate.
52. Why do you think women menstruate?
53. Do you know if any of your friends or classmates have
started to menstruate yet?
54. How many?
55. How do you know?
56. Have you begun to menstruate yet?

If YES

57. When - year and month?
58. What was your first period like?
59. Compared to the girls you know, have your periods started earlier, later, or about the same as the other girls?
60. Did you tell anyone about it?
61. Who?
62. How did (person) react?
63. Did you tell your mother/father?
64. How did your mother/father react?
65. Was this how you wanted them to react?
66. Do your family or friends treat you any differently since you have begun menstruating?
67. Do you tell anyone now when you have your period?
68. Are there any things you worry about with your periods - such as will people know, will you have an accident like spots on your clothes, or other things?
69. Describe what your periods are like?
70. Do you change any of your activities during your periods? (Such as sports, or the ways that you care for yourself, daily activities, etc.)
71. What do you like most about menstruation?
72. What do you dislike most about menstruation?
73. Do you feel like you have changed in any way since you started menstruating?
74. If it was proven to be totally safe, and you could change your mind at any time, would you choose to stop having your menstrual periods for a while?

If NO

75. Are you looking forward to them starting?
76. When do you think your periods will start?
77. Why do you think that?
78. What do you guess your first period will be like?
79. Will you tell anyone about it?
80. Who?
81. Will you tell your mother/father?
82. How will they react?
83. How you would like them to react?
84. Do you think people will treat you differently once you begin menstruating?
85. Will you tell anyone when you are having your period?
86. Are there any things you worry about in relation to your periods?
87. Describe what you think menstruating will be like?
88. Will you change any of your activities during your periods? (Such as sports, or ways that you care for yourself, daily activities, etc.)
89. What will you like most about menstruation?
90. What will you dislike most about menstruation?
91. Do you think that you will change in any way once you start menstruating?
92. If you could chose any time you wanted, when would you like your periods to start?

GENERAL ISSUES

Considering all the things that we have been talking about, overall,

93. How do you feel about being a girl?
94. What do you think are the advantages?
95. the disadvantages?
96. Would you ever like to be a boy?
97. Why/why not?
98. What about being a grownup woman? What do you think are the advantages? the disadvantages?
99. What about being a grownup man? What do you think are the advantages? the disadvantages?
100. When you think back over the last year, what is the most important thing that has happened to you?
101. Tell me how this has effected you.
103. What has been the worse thing to happen?
102. What has been the best thing to happen?
104. Is there anything special that you are forward to happening?
105. Of all the different things in your life, like your family, friends, school, interests, _____, what is the most important to you - that you want to do really well?

CONCLUSION (DEBRIEFING)

That is all the questions that I want to ask.

106. Is there anything you would like to say about any of things we have been talking about?
107. What did you think of the questions? Were there any you disliked?
108. Are there any other questions that I should have asked you, that would have helped me to better understand the things we have been talking about ... that is girls' growing up and their feelings about themselves?
109. How did you find the interview?
110. Would you mind coming again next year to answer the same sort of questions?

THANK YOU!

L: TRANSCRIPTION NOTATION

TRANSCRIPTION NOTATION

Developed by Gail Jefferson.

Extended square brackets mark overlap between utterances, e.g.:

A: Right[so you
B: [I'm not sure

An equals sign at the end of a speaker's utterance and at the start of the next utterance indicates the absence of a discernible gap, e.g.:

A: Anyway Brian=
B: =Okay

One or more colons indicate an extension of the preceding vowel sound, e.g.:

A: Yea::h, I see::

Underlining indicates that words are uttered with added emphasis; words in capitals are uttered louder than the surrounding talk, e.g.:

A: It's not right, not right AT ALL

A full stop before a word or sound indicates an audible intake of breath, e.g.:

A: I think .umm I need more

Round brackets indicate that the material in the brackets is either inaudible or there is doubt about its accuracy, e.g.:

A: I (couldn't tell you) that

Square brackets indicate that some transcript has been deliberately omitted. Material in square brackets is clarificatory information, e.g.:

A: Judy [the speaker's sister] said [] it's fine

M: MENSTRUAL ATTITUDE QUESTIONNAIRE--
FORM FOR ADOLESCENT FEMALES

MENSTRUAL ATTITUDE QUESTIONNAIRE--
 FORM FOR ADOLESCENT FEMALES
 (BROOKS-GUNN & RUBLE, 1980)

Instructions:

Please read the sentences below and say how much you agree or disagree with each one. If you disagree a lot, circle "1." If you just disagree, circle "2." If you disagree a little bit, circle "3." Now, if you agree a little bit, circle "4." If you agree with it a medium amount, circle "5," and if you agree a lot, circle a "6."

	1	2	3	4	5	6	x
disagree a lot		disagree	disagree a little bit	agree a little bit	agree	agree a lot	don't know
1. When I have (or will have) my menstrual period, I am (or I think I will be) worried that someone will know.	1	2	3	4	5	6	x
2. When I have (or will have) my menstrual period, I am (or I think I will be) worried that I'll have an accident (like spots on a skirt).	1	2	3	4	5	6	x
3. I envy boys because they don't have menstruation.	1	2	3	4	5	6	x
4. Menstruation is something to be happy about.	1	2	3	4	5	6	x
5. Menstruation is something I would prefer not to have.	1	2	3	4	5	6	x
6. I make (or will make) an extra effort not to be crabby during my period.	1	2	3	4	5	6	x
7. You shouldn't talk to just anyone about menstruation.	1	2	3	4	5	6	x

	1	2	3	4	5	6	x			
	disagree a lot	disagree	disagree a little bit	agree a little bit	agree	agree a lot	don't know			
8. Menstruation gives women a way to keep in touch with their bodies.				1	2	3	4	5	6	x
9. Women are more tired than usual when they are menstruating.				1	2	3	4	5	6	x
10. I hope it will be possible someday to get a menstrual period over within a few minutes.				1	2	3	4	5	6	x
11. I feel as fit (or think I will feel as fit) during menstruation as I do during any other time of the month.				1	2	3	4	5	6	x
12. Menstruation is a sign of womanhood.				1	2	3	4	5	6	x
13. I can tell (or think I will be able to tell) my period is coming because of breast soreness, backache, cramps or other physical signs.				1	2	3	4	5	6	x
14. Most women make too much of the minor (little) physical effects of menstruation.				1	2	3	4	5	6	x
15. Menstruating every month is a sign of a woman's general good health.				1	2	3	4	5	6	x
16. I am (or think that I will be) more easily upset just before or during my menstrual period than at other times of the month.				1	2	3	4	5	6	x
17. Cramps bother you only if you pay attention to them.				1	2	3	4	5	6	x

	1	2	3	4	5	6	x			
	disagree a lot	disagree	disagree a little bit	agree a little bit	agree	agree a lot	don't know			
18. Others should not be critical of a woman who is easily upset before or during her menstrual period.				1	2	3	4	5	6	x
19. Most mothers are uncomfortable talking to their daughters about menstruation.				1	2	3	4	5	6	x
20. Most fathers are uncomfortable talking to their daughters about menstruation.				1	2	3	4	5	6	x
21. When I got (or will get) my period for the first time, I found (will find it) difficult to tell my mother.				1	2	3	4	5	6	x
22. Menstruation is a topic that can be talked about openly with one's family.				1	2	3	4	5	6	x
23. Most girls feel they are more like their mothers once they start to menstruate.				1	2	3	4	5	6	x
24. Most girls wonder about what it is like to have children once they start to menstruate.				1	2	3	4	5	6	x
25. Menstruation is something to feel ashamed about.				1	2	3	4	5	6	x
26. When I am having (or will have) period, I feel like (or think I will feel like) I have a secret that I want to keep all to myself because it's so special.				1	2	3	4	5	6	x
27. Menstruation makes most girls feel grown up and mature.				1	2	3	4	5	6	x

Note: Items #19-27 were developed by Weiden.

N. POSSIBLE SELVES RESULTS

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Table V: Possible Selves Results

Item	G	YY	YN	NN	NY	Sign	Item	G	YY	YN	NN	NY	Sign
1.	1:	36	1	1	0	.05	19.	1:	1	2	35	0	.08
	2:	34	0	1	1	.06		2:	1	2	33	0	.08
2.	1:	0	0	37	1	nc	20.	1:	35	0	1	2	.08
	2:	0	2	32	2	.89		2:	31	1	2	2	.03
3.	1:	34	1	1	2	.15	21.	1:	0	0	37	1	nc
	2:	28	3	3	2	.02		2:	0	0	36	0	nc
4.	1:	0	0	38	0	nc	22.	1:	1	5	27	5	.67
	2:	0	1	35	0	nc		2:	1	2	30	3	.31
5.	1:	38	0	0	0	nc	23.	1:	0	1	36	1	.97
	2:	32	0	2	2	.01		2:	0	0	35	1	nc
6.	1:	0	0	36	1	nc	24.	1:	37	0	0	0	nc
	2:	0	1	33	2	.94		2:	36	0	0	0	nc
7.	1:	1	1	36	0	.05	25.	1:	0	1	36	1	.97
	2:	0	1	34	1	.97		2:	0	0	36	0	nc
8.	1:	0	0	37	1	nc	26.	1:	3	3	23	9	.28
	2:	0	1	35	0	nc		2:	5	4	19	7	.13
9.	1:	20	7	8	3	.01	27.	1:	0	0	38	0	nc
	2:	23	3	6	2	.00		2:	0	0	35	1	nc
10.	1:	0	0	37	1	nc	28.	1:	38	0	0	0	nc
	2:	0	1	34	1	.97		2:	35	1	0	0	nc
11.	1:	38	0	0	0	nc	29.	1:	24	5	4	5	.11
	2:	35	0	0	1	nc		2:	17	3	9	7	.01*
12.	1:	0	1	37	0	nc	30.	1:	38	0	0	0	nc
	2:	0	1	35	0	nc		2:	35	0	0	1	nc
13.	1:	38	0	0	0	nc	31.	1:	31	4	1	2	.35
	2:	35	0	0	1	nc		2:	28	2	3	3	.02
14.	1:	37	0	0	1	nc	32.	1:	0	0	38	0	nc
	2:	33	0	0	3	nc		2:	0	0	36	0	nc
15.	1:	32	3	2	1	.04	33.	1:	0	1	37	0	nc
	2:	26	4	5	1	.00		2:	1	2	32	1	.16
16.	1:	2	3	26	7	.34	34.	1:	0	0	38	0	nc
	2:	3	1	31	2	.03		2:	0	0	36	0	nc
17.	1:	26	6	3	3	.13	35.	1:	0	0	38	0	nc
	2:	23	4	5	4	.03		2:	0	1	35	0	nc
18.	1:	0	0	38	0	nc	36.	1:	2	1	31	4	.06
	2:	0	1	35	0	nc		2:	1	3	27	4	.48