

ABBY BOETTCHER, RITIKA KINI, MEGAN MURLLESS, BAILEY WILLIAMS

## ENDING PROBLEMS IN THE U.S. SURROUNDING MENSTRUAL PRODUCTS

## PERIOD.

## **TABLE OF CONTENTS**

Introduction	2
History	2
Stigma	3
Suppression	3
Media	4
Tampons	4
Accessibility	5
Tampon Tax	5
Homeless Population	6
Low Income Population	6
The Incarcerated	7
Sustainability	7
Transgender Rights	8
Policy Suggestions	9
Increased Accessibility	9
Increased Education and Research	10
Conclusion	10
Works Cited	12

## Introduction

Women make up about 50% of the world's population. This means that over 50% of the human population will have menstruated in their lifetime when including those who menstruate but don't identify as female. Menstrual management is vital for the health and wellbeing of women across the country--and around the world. However, far too often this issue does not have the attention that it needs in order to better the lives of all women. This paper focuses on the history behind menstruation in the United States as well as issues such as the stigma, accessibility, and sustainability surrounding menstruation and associated products.

## History

In the early 1970s, women formed societal groups to discuss the taboos of menstruation. These groups led them to the reality that many women lacked access to basic health information and that there was a need to circulate educational material (BWHBC, 2008). The Boston Women's Health Book Collective (BWHBC) began a series of pamphlets entitled *Our Bodies*, *Ourselves* in which they talked about taboo subjects like abortion, the pill, and orgasms (Morgen, 2002). They also discussed different products women could use to manage their periods--from tampons and pads to "period extraction." The language used in this writing suggested that periods were a burdensome experience that needed to be managed.

Period extraction was developed as a way for women to go through their entire period at once. Done in private settings, this procedure is done by creating a vacuum that suctions out the contents of the uterus through the cervix. It is also a common procedure for early abortions. This procedure was popular in the 1970s as a way for women to skip the complications that can accompany menstrual cycles (Grant, 2016).

In 1974, a 10-minute film titled *Period Piece* was produced, which shed light on the everyday burdens women face when dealing with their periods in a way that encourages positive attitudes (Culpepper, 1992). This film raised menstrual consciousness and encouraged conversations around societal taboos. Another groundbreaking publication titled *The Curse: A Cultural History of Menstruation*, written in a feminist perspective, discussed taboos, culture, and myths related to menstruation (Delaney, Lupton, and Toth, 1976). The publication also criticized the menstrual products industry, something that hadn't been done before. The argument was made that marketing was used as a way to manipulate consumers into thinking these products were necessary to relieve them of problems they didn't know they had. An example of this would be scented tampons as there is no fact-based need for tampons to be scented and yet they are still sold.

During this time, menstrual products were seen as a convenient service to be grateful for and not as a danger to health. However, in 1975, Toxic Shock Syndrome (TSS) became a concern. Proctor and Gamble released a new line of tampons--Rely--that were highly absorbent. After using their free sample of Rely tampons, women reported vomiting and diarrhea. The FDA responded by passing the "Medical Device Amendments" to control the quality of menstrual products for safety and effectiveness (FDA, 2005). However, the way in which the FDA handled the Rely tampon issue had upset the public. In 1978, the BWHBC released a brochure that listed all health hazards associated with the use of tampons (Friedman, 1981). They also criticized producers for not releasing information on the materials used in tampons.

In the 1980s, TSS became a prevalent issue. A study released in 1980 officially established a link between synthetic absorbent tampons and TSS (Shands, Schmid, and Dan, 1980). The FDA responded by making tampons a Class II medical device which allows tampons to be liable to quality control but does not require companies to be responsible to educate the public about these health concerns (US Code, 21, 1976). As a result, the *Everything You Must Know About Tampons* brochure was released in 1981, explaining TSS and providing information on tampon substitutes (Friedman, 1981). The *Menstruation* pamphlet was again updated to emphasize the importance of publicly funded research to hold corporations accountable for exposing people to menstrual health risks (Rome and Culpepper, 1981). The pamphlet also pressured the FDA to mandate that every box of tampons have a warning about TSS. After a campaign by Public Citizen in 1990, the FDA made it a requirement for producers to include warnings and to advise consumers to use the lowest possible level of absorbency (Rome and Wolhandler, 1992; Houppert, 1999).

## **Stigma**

Periods are stigmatized in many ways and are considered an "abomination" (Johnston-Robledo & Chrisler, 2013). Menstruating women are seen as unclean and that they, or their periods, should be kept out of sight (Johnston-Robledo & Chrisler, 2013). Women who are more body-positive generally hold more positive attitudes regarding menstruation, but only 18.6% of women in a study wanted monthly cycles while the rest of the sample wanted fewer cycles. Those women who wanted monthly cycles and those wanting a cycle every 2-3 months were less secretive regarding their period and were less likely to see menstruation as a limitation, but unfortunately that is not how a majority of women feel (Chrisler et al., 2015).

## "AUNT FLO" COMING TO A KEYBOARD NEAR YOU

# - A new red drop emoji is being introduced to help destigmatize menstruation - It hopes to bring forward the many issues surrounding menstruation: from diseases like endometriosis to the struggles homeless women face while on their periods. -According to an article in the Independent, "50% of young women believe it will encourage them to talk more openly." Source: https://www.independent.co.uk/voices/period-emoji-unicode-menstruation-iphone-android-poverty-stigma-a8772166.html

## Suppression

A 2003 study by Johnston-Robledo et al. found that 35% of women involved were familiar with menstrual suppression-something advertised in magazines to limit or hide menstruation--but many weren't learning about it from doctors. Both women who were familiar with the concept and those who weren't were curious about learning more, but they weren't necessarily supportive of the practice. When this study was published, little was known about menstrual suppression and the effects of using oral contraception to do so (Johnston-Robledo et al., 2003). However, the NIH published a journal article in 2014 that

partially explained the use of contraception to suppress menstruation. The only "major" issues found was the variation in lengths of time for women to stop their periods and that many experience random breakthrough bleeding (Hillard, 2014). However, both the 2003 and 2014 study mention that long term effects are still not known and that there still hasn't been any longitudinal study completed.

## ENDING PROBLEMS IN THE U.S. SURROUNDING MENSTRUAL PRODUCTS. PERIOD.

Although menstrual suppression is gaining traction among women in order to combat many of the difficult and painful side effects, suppression can further contribute to the stigma as it encourages women to hide their periods and reinforces the idea that it is something unnecessary (Johnston-Robledo & Chrisler, 2013). Medical professionals also contribute to the desire to suppress and hide periods. Many pamphlets and infographics only focus on the negative side effects and rarely mention the fact that a period is a sign of a healthy body. Furthermore, the information is often vague and emphasizes secrecy (Johnston-Robledo & Chrisler, 2013).

College males and females found women on their period "less sexy... and more irritable," a result of the stigma of periods, but also contributing to it (Johnston-Robledo & Chrisler, 2013). Women are also more self conscious on their periods, choosing to wear baggier clothes and avoid activities like swimming or sex. In order to combat these stigmas, JR and Chrisler suggest more positive discussions about menstruation and to question the media and health care providers so they change their rhetoric.

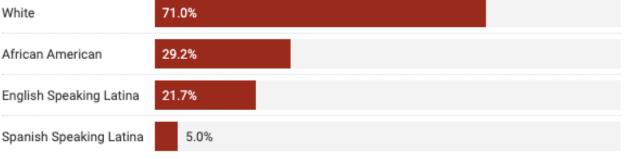
## Media

The depiction of menstrual products in the media largely contributes to the stigma. The advertisements for period products that are widely broadcasted utilize various marketing techniques to depict, and consequently contribute to, society's aversion to menstruation. One way in which the media avoids the realities of menstruation is through the use of blue liquid to symbolize menstrual blood when advertising products, effectively separating the actual act of menstruating from the advertised products. The products are also marketed to be "fresh and untainted," and promise secrecy and avoiding the "embarrassment" associated with menstruation (Johnston-Robledo & Chrisler, 2011). Another prominent issue in menstrual product advertising is the potential for self-objectification. According to a study conducted by Mindy Erchull, 76.42% of the advertisements analyzed used sexually suggestive body language and imagery. The study found many uses of "perfect" women, wearing tight white clothing or lingerie, and posing flirtatiously. This type of imagery in advertisements can be distancing and demeaning to those who see them. The juxtaposition of the sexually suggestive body language for something that is viewed to be embarrassing and taboo by society can cause society to distance menstruation from the actual act of menstruation itself. Depicting women using menstrual products in an idealized manner can further drive the stigma, as women may feel inferior for not reacting to menstruation in the same manner as women in the advertisements, distancing reality from falsified images (Grose & Grabe, 2014).

## **Tampons**

In addition to stigma regarding menstruation, there is further stigma regarding tampons. Many women use tampons as they are more discreet and can be more comfortable. However, tampon use varies greatly among different demographic groups. Many girls don't use tampons at the onset of their period because there is a fear of using tampons. Much of this is from their mothers, as 40% of teens in a study received information from their mothers and about 70% of teens and their mothers never discussed tampon use with their physicians. Adolescents who were more likely to use tampons are older, white, or were told about tampons by their mothers (Middleman & Varughese, 2012).





Source: Romo, L. F., & Berenson, A. B. (2012). Tampon use in adolescence: differences among European American, African American, and Latina women in practices, concerns, and barriers. J Pediatr Adolesc Gynecol, 25, 328-333.

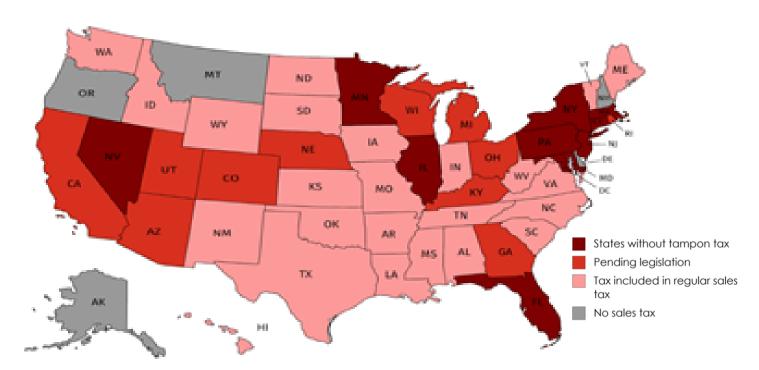
Tampon use also varies based on ethnicity, as shown by the breakdown demonstrated from a study completed in Texas. While white women were more likely to get their information from their mothers, as mentioned above, African American women were more likely to get their information from school and health education--which was generally not adequate and didn't cover how to use a tampon (Romo & Berenson, 2012). Minorities were also more likely to believe that tampons were not safe or were not appropriate for virgins. Many Latina women simply didn't have tampons in their house, as their mothers didn't approve of or use tampons (Romo & Berenson, 2012).

## **Accessibility**

Although every woman experiences periods in their lifetime, there are communities who suffer the consequences at greater rates than other women. Studies have shown the inadequate access to these products hinder a woman's ability to go to work, school, and function properly. 72% of menstruators in emergency situations without pads or tampons leave work or school because of humiliation, panic, and the need to get these products. This leads to inefficiency in the workplace and a loss of education when in school (Montano 2018). The following section provides data on marginalized communities such as the homeless, low income people, the incarcerated, and trans people. This section also discusses the importance of sustainability and the disparity regarding access to alternatives. Taxes, such as the tampon tax, make menstrual products more expensive, creating a larger barrier for communities already lacking other necessary resources. Oftentimes women resort to toilet paper, paper towels, old rags, or diapers as an alternative to pads and tampons when the products necessary are not present (Fienberg, 2019).

## **Tampon Tax**

Menstrual products are treated as a luxury good rather than a necessity. A major contributor to menstrual product accessibility is the "tampon tax" in the United States. Only ten states in the US are tax exempt from period products. Sales tax is a regressive tax meaning it disproportionately affects low income people, as people who earn less pay the same amount of money as those who make more. This means that a greater percent of their income is dedicated towards buying products such as pads or tampons (Fienberg, 2019).



## The Homeless Population

Women make up around 39% of the homeless population in the United States (Fienberg, 2019). Because of limited access to homeless shelters and public bathrooms, this population of women have inadequate resources when it comes to menstruation management (Parrillo, 2017). Shelters provide approximately two pads per menses, but on average a woman uses 20 pads/tampons per cycle (Parrillo, 2017). Because of the lack of resources, homeless women must utilize unsafe/unhealthy alternatives. Unclean substitutes and the inability to clean your genitals daily can lead to infections such as urinary tract infections and yeast infections, increasing risks and possible costs that homeless women face (Parrillo, 2017). Homeless shelters are unable to buy any menstrual products with grant money from the government, which leaves it up to donations for providing these products. Despite being the most demanded, period products are the least donated item to shelters (Fienberg, 2019). Because of the instability homeless women face, they are prone to unpredictable and heavier cycles requiring a reliable and larger supply of period products (Feinberg 2019).

## The Low Income Population

A survey of low-income women conducted in January of 2019 found that nearly 2/3 of women couldn't afford menstrual products during the previous year (Carroll, 2019). Women would have to make do with alternatives such as those mentioned above. Nearly half of the women surveyed said that there were times when they could not afford to buy both food and tampons, thus having to make tradeoffs (Carroll, 2019). States such as New York and California have started to provide free products in schools, and other states have exempted these products from sales taxes, but there are still many states that are behind on this fight (Carroll, 2019). Although period products are classified as "medical devices" by the Food and Drug Administration and described as a "medical necessity" by the American Medical Association, many states categorize pads and tampons as nonessential and therefore place a sales tax on these goods (Fienberg,



2019). Government programs such as Supplemental Nutrition Assistance Program (food stamps); the Special Nutrition Program for Women, Infants, and Children (WIC); or Medicaid can not be used to buy menstrual products (Fienberg, 2019). Oftentimes women sell or trade their food stamps with other people in order to get the products necessary (Montano, 2018).

## The Incarcerated

Incarcerated people also suffer a large barrier to accessing menstrual products. Oftentimes supplies must be bought in prison convenience stores for marked up prices, which are hard for many of the inmates to afford (Fienberg, 2019). For those that can afford commissary prices, they often run out of tampons and pads, taking weeks to restock them. Inmates are allotted a particular number of

pads and tampons per cycle, but it generally isn't enough to sustain their whole cycle. It has been reported that women trade tampons/pads for food in some facilities (Fienberg, 2019). When pads are provided for the inmates, they normally aren't high quality pads, being flimsier and less absorbent. Some correctional facilities don't have any period products at all, forcing the inmates to make their own tampons or pads with whatever materials are available to them (Fienberg, 2019). Power dynamics in prison often result in less access even when products are provided--one prison in New York forced inmates to show them their dirty pads in order to get more. Many inmates have described the humiliation and degradation from asking for pads and tampons, emphasizing the stigma that surrounds this issue (Fienberg, 2019). Recently the #MeToo movement has fueled state legislatures to supply prisons and jails with adequate menstrual products, train staff, and raise awareness of this issue. The work of advocacy groups has brought issues in our criminal justice system to the forefront and states around the country are beginning to find ways to solve this lack of accessibility of pads/tampons in jail (Associated Press, 2018).

## Sustainability

There is a significant amount of plastic hidden inside of popular menstrual products. The mass quantity of plastic from menstrual products that is disposed of in landfills poses a serious threat to the environment. Women use approximately 11,000 tampons in their lifetime--that amounts to 11,000 tampon plastic applicators per menstruating woman without factoring in the plastic content from other menstrual products (Peberdy et al., 2019). The chemicals and materials in cotton pads can take 500-800 years to

## COLORADO PRISONS TO PROVIDE FREE TAMPONS

- House Bill 1224 mandates that every county and municipal jail provide free tampons to inmates.
- Currently in Colorado free feminine hygiene products are provided in prisons.
- This bill came into light when activist, Elizabeth Epps was jailed and not given products until 10 days after her period began.
- The bill would also require that Colorado's Correction Facility provide free products to women.
- The goal of House Bill 1224 is to "ensure that we have consistent policies across the state."

Source: https://coloradosun.com/2019/03/19/colorado-jail s-tampons-house-bill-1224/ break down in landfills. The plastic applicators for tampons, on the other hand, never truly decompose (Peberdy et al., 2019). However, the reality is that many women are not able to easily access these products. A study conducted concerning public awareness of the environmental impact of menstrual products stated that reliability and convenience are large factors that contribute to the continued use of unsustainable menstrual products (Peberdy et al., 2019). However, we must note that many products that are sustainable are either significantly more expensive or require regular cleaning which many lower income, homeless, and incarcerated women do not have access to. Therefore, reliability and convenience are disproportionately larger issues for the groups identified in this brief. Sustainable options still deserve more research and education, but they should not be the primary focus of policymakers unless they are willing to make them more accessible as well.

## **Transgender Rights**

A recent goal in the menstrual movement is to involve all people who menstruate, ensuring the inclusion of transgender people (Chrisler et al, 2015). There are discrepancies within the movement regarding the degree to which trans experiences are valid, even differences between trans men and trans women.

A popular argument for discrediting trans women is that these individuals benefited from having lived as men before transitioning (Schmidt, 2017). Even though they didn't identify as men, society perceived them as such, and therefore they didn't face the same barriers as cisgender women. This view puts too much weight on the perceived identity trans women possessed before transitioning, because even if they haven't always been viewed as a woman, they have

## SUSTAINABLE **ALTERNATIVES**

Why aren't sustainable alternatives to menstrual products more popular?

### **MENSTRUAL CUPS**

COST- \$37.50

PROS-

CONS- Can be messy, some women report discomfort with insertion, not easily accessible or cheap



## **REUSABLE PADS**

COST-\$15-\$20 for one

CONS-

Reusable, wash with laundry, PROSholds more than traditional pad

> Women are hesitant to try, can be difficult to pick correct size, not cheap or accessible

### APPLICATOR-FREE TAMPONS

Appx \$6.99 for 40

Reusable, less plastic, PROScheaper than traditional

women are not aware of existence, can be difficult to use





## **PERIOD PANTIES**

\$24-39 for single pair COST-

Reusable, wash with laundry, PROSconveinent, marketed for comfort

CONS- Very expensive, not easily accesible in stores

Sources: https://divacup.com https://www.shethinx.com https://lunapads.com

https://www.target.com/c/tampons-feminine-products-personal-care/o-b-/-/N-4 y 6 3 4 Z 7 b z 4 8

## ENDING PROBLEMS IN THE U.S. SURROUNDING MENSTRUAL PRODUCTS. PERIOD.

identified as such. Their experiences have been excluded from the menstrual movement simply because they differ from the experiences of cis women.

Transgender men also face stigma from the menstrual movement as trans men can experience periods just like cis women do. Depending on how trans men choose to deal with their period, they can continue to menstruate just as they had before transitioning. They could also choose to suppress their periods with hormones and other treatment. A popular argument made to exclude trans men from the mainstream menstrual platform is that trans men, after transitioning, now receive special privilege because they appear physically male.

This argument completely discredits the experiences of trans men. Because periods are typically thought of as a feminine characteristic, it can make dealing with menstruation difficult for trans men. Due to the juxtaposition of having masculine characteristics while menstruating, trans men may feel shame. They must deal with body-dysmorphic reminders that their body doesn't align to their identity. With this shame, they might hide their menstrual experiences and be less likely to talk about them. In terms of healthcare, this greatly reduces the chances of trans men seeking out gynecological care. Trans men are also less likely to seek out medical treatment partially because healthcare professionals are not trained to treat trans patients-a study found that 80% of OB-GYNs hadn't received appropriate training (Strousma, 2019). In the same study, fewer than 50% of transgender participants said they receive routine care (Strousma, 2019). Because doctors lack training and are possibly ignorant towards trans patients, the likelihood of a trans person seeking out medical health is even more reduced (Chrisler et al, 2015).

These statistics are even more reason for the mainstream menstrual movement to welcome the intersectional experiences of trans people. Although the experiences of cisgender women and trans people differ with regards to menstruation, this dynamic should not imply that one party is more entitled to share their experiences than the other. There needs to be a push in the movement to strengthen the validity of trans people's menstrual experiences. In order for these problems to be addressed, they must first be visible. If more information on the barriers trans people face when dealing with their periods were accessible, the root causes of these issues could be mitigated. This won't happen until the menstrual movement adopts a more intersectional belief system.

## Policy Suggestions Increased Accessibility

As this brief has demonstrated, a major barrier for people who menstruate is the accessibility of menstrual products. Considering menstrual products as necessities rather than luxuries can be reinforced by removing the tampon tax in all states and allowing benefits from programs such as SNAP, Medicaid, and WIC to be used to purchase period products. Under the Supplemental Nutrition Assistance Program (SNAP), nutrition assistance is offered to low income people. SNAP benefits can purchase food for households (USDA 2017). Many period products can be purchased at stores where SNAP benefits are accepted, therefore increasing overall accessibility. The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides federal grants to the state in order to provide food, healthcare assistance, nutrition education for pregnant women, and other assistance in relation to pregnancy (USDA 2018). These government provisions

don't outline any provisions which would assist women on the purchasing of menstrual products. People who cannot afford to purchase food, shouldn't be expected to allocate their income to necessary period products. If these programs were expanded to include pads/tampons and other products used during menstrual cycles such as heating pads or pain reliever pills, we could increase accessibility to more women and girls in the United States. Furthermore, as some states have already implemented, we recommend that all state and local prisons and jails be required to provide adequate supplies for women while they menstruate, both pads and tampons, that will cover a woman's whole period and will not force her to try to find other products to use as substitutes.

## **Increased Education and Research**

The lack of education and research on menstruation contributes greatly to the lack of policy in this area. Not having enough data has proved to be an obstacle for policymakers as they do not have sufficient data to support policy solutions to address the issues identified throughout this brief. One proposed solution to reduce stigma in education is to keep boys and girls together in early sexual education classes. This reinforces the idea

## The House of Representatives Will Finally Provide Menstrual Products

In June of 2018, Representative Sean Patrick Maloney was told he could not use his Members'
Representational Allowance (MRA) to "stock tampons and other menstrual products" totaling \$37 for his staff and visitors as they were not deemed "ordinary and necessary." However, as of February 11, MRA's can be used for menstrual products, showing how even the U.S. Congress is still slow to change to fit the times.

that girls shouldn't be ashamed of, or want to hide, their period. Additionally, sexual education classes should teach how to use pads and tampons, with the goal of reducing the fear about these products. Furthermore, advertising companies should be held to a higher standard in limiting negative or false perceptions used in commercials that perpetuate the stigma.

In order to create strong policy, reliable research is required. The studies done regarding stigma, suppression, and tampon use amongst different demographics all show that these studies are not recent enough. Additionally, these studies exclude trans experiences and those of other marginalized groups, such as homeless or incarcerated women. Studies often don't account for the experiences of trans people and therefore, little is known. More research must be completed in order to better understand the stigma of menstruation; more must be done to educate young girls before they menstruate in order to diminish the stigma and provide accurate and complete information. Lastly, many of these studies have a large sample of white participants relative to other ethnicities, meaning the data that we do have is not intersectional. All future research should be done to represent everyone who menstruates, not just white women, and should be done with the goal of making those who menstruate not feel less adequate simply because they have their period.

## Conclusion

The issues surrounding menstrual products are complex. These products are heavily stigmatized in society and as a result the conversation can often be controversial--or simply nonexistent. However, there are many

## ENDING PROBLEMS IN THE U.S. SURROUNDING MENSTRUAL PRODUCTS. PERIOD.



problems that society must address, including the stigma, barriers to access, environmental impacts, and lack of education. It is crucial to draw attention to these issues as they have been consistently present throughout history, and will continue to exist if not confronted. Policymakers must be able to have access to relevant, factual, and intersectional data while the public must be provided with educational materials in order for menstrual products to become widely accessible to all. The issues surrounding menstrual products impact over half of the United States' population on a regular basis. It is a daily struggle for menstruating individuals and has a significant impact on their quality of life. Therefore, it is important to draw attention to the issues, conduct and compile more comprehensive research, and present the information to policymakers in order to push for positive changes, like those mentioned above, that would positively impact over half of the population of the United States.

## **Works Cited**

Associated Press (2018). #MeToo helps shine light on access to feminine hygiene products

in prison. Retrieved from https://www.nbcnews.com/news/us-news/metoo-helps-

shine-light-access-feminine-hygiene-products-prison-n860946

Bobel, C. (2008). From convenience to hazard: A short history of the emergence of the menstrual activism movement, 1971-1992. Health Care for Women International, 29(7), 738-754. doi:10.1080/07399330802188909

Boston Women's Health Book Collective (BWHBC). (1979).Our bodies, ourselves: A book by and for women. New York: Simon & Schuster.

Boston Women's Health Book Collective (BWHBC). (2008). Our bodies ourselves timeline. Retrieved March 26, 2008, from http://www.ourbodiesourselves.org/about/timeline.asp

Burk, C. (2019, February). The House of Representatives' Office Supply Store finally has tampons on its shelves. Bustle.

https://www.bustle.com/p/the-house-of-representatives-office-supply-store-finally-has-tampons-on-its-shelves-15951954

Byrne, K. (2019, February 10). The new 'period' emoji is a reminder that de-stigmatising menstruation has a long way to go.

Independent. https://www.independent.co.uk/voices/period-emoji-unicode-menstruation-iphone-android-poverty-stigma-a8772166.html

Carroll, L (2019). Even in the U.S., poor women often can't afford tampons, pads. Retrieved

from https://www.reuters.com/article/us-health-menstruation-usa/even-in-the-u-s-poor-

women-often-cant-afford-tampons-pads-idUSKCN1P42TX

Chrisler, J.C., Marván, M. L., Gorman, J. A., Rossini, M. (2015). Body appreciation and attitudes toward menstruation. Body Image, 12, 78-81. https://doi.org/10.1016/j.bodyim.2014.10.003

Culpepper, E. (1992). Menstrual consciousness raising: A personal and pedagogical process. In A. Dan & L. Lewis (Eds.), Menstrual health in women's lives(pp.274–284). Urbana & Chicago: University of Illinois Press.

Delaney, J., Lupton, M. J., & Toth, E. (1976). The curse: A cultural history of menstruation. New York: Dutton

Erchull, M. J. (2013). Distancing through objectification? depictions of women's bodies in menstrual product advertisements. Sex Roles, 68(1-2), 32-40. doi:http://dx.doi.org/10.1007/s11199-011-0004-7

Fienberg, G, Seibold, H. (2019). Free to Bleed: Virginia House Bill 83 and the Dignity of

Menstruating Inmates. Law School Journals, 22(1), 69-88. Retrieved from

https://scholarship.richmond.edu/pilr/vol22/iss1/6/

Food and Drug Administration (FDA). (2005). Milestones in food and drug law history. Retrieved from

http://www.fda.gov/opacom/backgrounders/miles.html

Friedman, N. (1981). Everything you must know about tampons. New York: Berkeley Books.

Grant, R. (2016, July 19). Inside the World of Menstrual Extraction, the Period Procedure No One Talks About . Retrieved from https://mic.com/articles/148568/what-is-menstrual-extraction-inside-the-controversial-technique-that-could-help-women#.WEhAVSRji

Grose, R. G., & Grabe, S. (2014). Sociocultural Attitudes Surrounding Menstruation and Alternative Menstrual Products: The Explanatory Role of Self-Objectification. Health Care for Women International,35(6). doi:10.1080/07399332.2014.888721 Hillard, P.A. (2014, June). Menstrual suppression: current perspectives. International Journal of Women's Health, 6, 631-637. https://doi.org/10.2147/IJWH.S46680

Houppert, K. (1999). The curse: Confronting the last unmentionable taboo. New York: Farrar, Strauss, & Giroux.

India scraps tampon tax after campaign. (2018, July 21). Retrieved from https://www.bbc.com/news/world-asia-india-44912742 Johnston-Robledo, I., Ball, M., Lauta, K., & Zekoll, A. (2003) To bleed or not to bleed: Young women's attitudes towards menstrual suppression. Women & Health, 38, 59-75. https://doi.org/10.1300/J013v38n03\_05

Johnston-Robledo, I., & Chrisler, J. C. (2011). The Menstrual Mark: Menstruation as Social Stigma. Sex Roles, 68(1-2). doi:10.1007/s11199-011-0052-z

Johnston-Robledo, I., & Chrisler J. C. (2013). The menstrual mark: Menstruation as social stigma. Sex Roles, 68, 9-18. https://doi.org/10.1007/s11199-011-0052-z

Middleman, A. B., & Varughese, J. (2012). Perceptions among adolescent girls and their mothers regarding tampon use. J Pediatr Adolesc Gynecol, 25, 267-269. https://doi.org/10.1016/j.jpag.2012.04.004

Miranda, M. (2015, May 27). Say goodbye to the 'tampon tax,' Canada. Retrieved from https://www.theloop.ca/the-tampon-tax-is-getting-nixed-on-canada-day/

Montano, E. (2018). The Bring Your Own Tampon Policy: Why Menstrual Hygiene Products Should be Provided for Free in Restrooms. University of Miami Law Review, 73(1), 370-411. Retrieved from https://repository.law.miami.edu/umlr/vol73/iss1/10/

Morgen, S. (2002).Into our own hands: The women's health movement in the United States, 1969–1990. New Brunswick, NJ: Rutgers University Press.

Parrillo, A., M.D., & Feller, Edward, MD, F.A.C.G., F.A.C.P. (2017). Menstrual hygiene

plight of homeless women, a public health disgrace. Rhode Island Medical

Journal, 100(12), 14-15. Retrieved from http://libproxy.lib.unc.edu/login?url=https:

//search.proquest.co m/docview/1975990 728?accountid=14244

Peberdy, E., Jones, A., & Green, D. (2019). A Study into Public Awareness of the Environmental Impact of Menstrual Products and Product Choice. Sustainability, 11(2). doi:10.3390/su11020473

Perry, S., & Dawson, J. (1985). Nightmare: Women and the Dalkon Shield. New York: MacMillan Publishing Company.

Prisco, J. (2018, August 27). Scotland Is the First Country to Offer Free Sanitary Products to All Students. Retrieved from https://www.globalcitizen.org/en/content/scotland-free-sanitary-products-students/

Rodriguez, L. (2018, August 30). Malaysia Finally Lifts 'Tampon Tax' on Menstrual Hygiene Products. Retrieved from https://www.globalcitizen.org/en/content/malaysia-lifts-tampon-tax-menstrual-hygiene/

Rome, E. R., & Culpepper, E.E. (1981). Menstruation [Brochure]. Boston: Author. (Original work published 1977)

Rome, E., & Wolhandler, J. (1992). Can tampon safety be regulated? In A. Dan &L. Lewis (Eds.), Menstrual health in women's lives(pp. 161–273). Champaign: University of Illinois Press.

Romo, L. F., & Berenson, A. B. (2012). Tampon use in adolescence: differences among European American, African American, and Latina women in practices, concerns, and barriers. J Pediatr Adolesc Gynecol, 25, 328-333.

https://doi.org/10.1016/j.jpag.2012.06.001

Schmidt, S. (2017, March 13). Women's issues are different from trans women's issues, feminist author says, sparking criticism. Retrieved from https://www.washingtonpost.com/news/morning-mix/wp/2017/03/13/womens-issues-are-different-from-trans-womens-issues-feminist-author-says-sparking-criticism/?utm\_term=.9f4fcbfa799e

Shands, K., Schmid, G. P., & Dan, B.B. (1980). Toxic-shock syndrome in menstruating women: Association with tampon use and Staphylococcus aureus and clinical features in 52 cases. New England Journal of Medicine, 25, 1436–1442.

Stroumsa, D., Shires, D. A., Richardson, C. R., Jaffee, K. D., & Woodford, M. R. (2019). Transphobia rather than education predicts provider knowledge of transgender health care. Medical Education, 53(4), 398-407. doi:10.1111/medu.13796

Swenson, N. (1995). Eulogy in memory of Esther Rome. Unpublished speech. Retrieved from Boston Women's Health Book Collectives archives. Schlesinger Library on the History of Women. Cambridge, MA.

Tarabay, J. (2018, October 03). Australia Scraps Tax on Tampons, Once Considered a 'Luxury'. Retrieved from https://www.nytimes.com/2018/10/03/world/australia/tampons-tax.html

Tierno, P. (2001). The secret life of germs: What they are, why we need them and how we can protect ourselves against them. New York: Atria Books.

Weiss-Wolf, J. (2018, June 29). Representative Sean Patrick Maloney says a House panel wouldn't fund tampons for his office. Marie Claire. https://www.marieclaire.com/politics/a22002491/sean-patrick-maloney-tampons/

USDA. (2017). Supplemental Nutrition Assistance Program. Retrieved from https://www.f ns.usda.gov/snap/eligible-food-items USDA. (2018). Women, Infants, and Children. Retrieved from https://www.fns.usda.gov/wic/women-infants-and-children-wic U.S. Code. (1976). 21§§884.5460, 884. 5470.