

# Menstrual concealment—“You can’t just play the woman card”

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## ABSTRACT

**INTRODUCTION:** This article explores women’s experiences of menstrual suppression within the New Zealand Army while seeking to understand the influence of military systems, culture and processes on those experiences. More specifically, it examines women’s desire for menstrual concealment and control over their chosen method of managing their menstruation.

**METHODS:** Data were collected using narrative interviews with 18 women currently serving in the New Zealand Army and nine key informants. Data were analysed using reflexive thematic analysis.

**FINDINGS:** Study participants described the convenience of not having their period in a military environment as their main reasoning for menstrual suppression. Whether suppressing their period or not, women’s stories revealed their desire to fit in within the current military culture while also having control over their own body and decision-making. The decision on how they managed their menstruation was influenced by their peers, their rank, their environment, their past experiences and the information provided to them through briefings and visits with their medical provider.

**CONCLUSION:** The preliminary findings from this study suggests that within the military, women are not only expected to keep their feminine identity but also maintain body equivalence with men to ensure they are seen as equally operationally effective. Although women describe an expectation of menstrual concealment, women choose how they reach that expectation. A reproductive justice lens is used to argue that without addressing menstrual stigma and the military structures, women will continue to “choose” to conceal or suppress their period as it is presented as the only appropriate choice.

**Keywords:** Menstrual suppression; military; menstrual concealment; menstrual stigma

The New Zealand Army (NZDF) is a combat ready force, meaning that they must be ready to conduct military operations whenever required to keep Aotearoa New Zealand safe and secure (NZDF, 2019). Operational readiness refers to the capability of the organisation to perform that task. This includes access to ships, weapon systems, technology, and other supplies and how prepared soldiers are

to perform their assigned tasks (Duggan, 2021). Menstruation has been characterised as a challenge to operational readiness that carries a multitude of potential issues for the military. The supply and provision of menstrual products, deployment and field infrastructure, and field hygiene can bring operational and strategic challenges (Chua, 2020). In the military context, research has focussed on the inconvenience of

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menstruation and addressing the barriers associated with menstruating while in uniform instead of exploring women's embodied experiences. Increasingly, menstrual suppression is offered as a solution to the "problem" of menstruation in the military. Current research, particularly in the US, has investigated the acceptability and convenience of menstrual suppression for enhancing operational readiness (Philips & Lynn, 2021; Ricker et al., 2021; Trego, 2007).

Goffman (1963) defined stigma as a mark that sets people apart from others due to "an attribute that is deeply discrediting" (Goffman, 1963, p. 3). Menstrual stigma refers to the negative perception of menstruation and those who menstruate (Olson et al., 2022). These beliefs characterise the menstruating body as being abnormal and abject and reinforces stereotypes of menstruators as irrational, emotional and less capable (Johnston-Robeldo & Chrisler, 2020; King, 2020; Olson et al., 2022). Johnston-Robeldo and Chrisler (2020) assert that menstruation is more like a hidden than visible stigma due to the efforts that women put into concealing it. As Wood (2020) highlighted, women are most successful in their lives if they conceal their periods or at least, appear to be unaffected by the presence of menses. Hypervigilance is a noted consequence of the stigmatisation of menstruation as individuals seek to ensure their menstrual blood is concealed (Johnston-Robeldo & Chrisler, 2020). The self-monitoring undertaken by women aligns with Foucauldian concepts of self-policing (Foucault, 1979) which is seeking to produce a more docile, non-menstruating body as it is thought to be more well-suited for success (Kissling, 2013). A non-menstruating body is considered to be more docile due to the unpredictability of menstruation, with its potential for leaks and heightened emotions which would damage the presentation of a rational and self-regulating subject (Kissling, 2013). This stereotypical view of women on their period as being "oversensitive, unpredictable and verbally unpleasant"

(Young, 2005, p. 118), has often accompanied the construction of women as abject and out of control during that time of the month.

In the workplace, these stereotypes and judgments are often used to dismiss women's anger and impatience and discredit their experience (Young, 2005). These stereotypes and stigma have led to unspoken rules and actions for the concealment of menstruation, described by Young (2005) as "menstrual etiquette". Menstrual etiquette, such as practices of concealing tampons on a trip to the bathroom, cleaning stained underwear, and discreetly managing the blood captured in menstrual cups are sources of gendered labour which, Young (2005) argued, oppress women. Removing the stigma that prompts practices of concealment is considered by Kissling (2006, p. 126, as cited in Robeldo and Chrisler, 2020), critical to achieving menstrual justice. Kissling (2006) suggested that achieving "menstrual justice", which is built from the concepts of reproductive justice, will mean that menstruation is no longer a shameful secret but a fact of life that need not be concealed. Menstrual justice would acknowledge access to menstrual products, pain management and open dialogue as a basic human right (Przybylo & Fahs, 2020).

In addition to menstrual etiquette, the introduction of menstrual suppression using COCs (combined oral contraceptives) and LARCS (long-acting reversible contraceptives), which include IUDs (intra-uterine devices), the contraceptive injection (Depo) and the hormonal implant (the rod) have become tools for menstrual concealment. These hormonal methods of contraception have provided women with options to have fewer periods a year or even the ability to eliminate bleeding altogether (Hasson, 2016). Menstrual suppression COCs are nearly identical to existing COCs, with only the regimen of pills with active hormone taken, instead of monthly planned "breaks" from hormonal pills (Watkins, 2012). This change in the use

of COCs highlighted the possibility that always existed but was previously only considered unofficial or off label (Hasson, 2016). Hasson (2016) argued that, following the introduction of menstrual suppression through COCs and LARCs, the need to redefine menstruation by examining the many types of bleeding that we had understood as menstruation was introduced. Pill periods or withdrawal bleeding, meaning bleeding experienced while on a break of hormones, was developed to be understood and experienced as a regular monthly bleed. However, pharmaceutical companies have disclosed that pill periods are not in fact “real periods” and are therefore unnecessary (Hasson, 2016). Although this distinction might seem irrelevant, if the effects and experiences of bleeding are the same, this redefinition of menstruation, as it is understood in relation to COCs, is central to understanding menstrual suppression and its effect on gendered embodiment. Taking for granted what we understand as being menstruation obscures what could be learned from being open to a multitude of experiences of menstruation and its relationship to how women experience their monthly bleeding.

Menstruation is constructed through the material, social and cultural contexts in which it is experienced. The emergence of menstrual suppression as a choice for women is often framed as a simple preference or lifestyle which places the emphasis squarely on the individual (Liddel, 2019). Framing reproductive health concerns, in this case menstrual suppression, as a series of individual choices, negates the very influential role the military structures and culture has on these decisions (Liddel, 2019; Ross & Solinger, 2017). When menstruation is constructed as a barrier to operational readiness, menstrual suppression may become an expectation and responsibility of military women, rather than a choice. From a reproductive justice perspective, suppressing menstruation is not a neutral choice but one grounded in the gendered and hierarchical context of the military and the embodied

experience of having a period in that environment (Ross & Solinger, 2017).

The menstruation practices of military personnel, the associated tensions concerning menstrual suppression and issues of choice are of relevance for the discipline of social work, specifically the field of military social work practice in Aotearoa New Zealand. In this context, the military social work service within the NZDF involves micro-, meso-, and macro-level interventions with individual personnel and their whānau and families. This includes both clinical social work services focused on assessment and treatment aspects of practice and occupational social work with an emphasis on the well-being of the person in the military environment (Nicholson et al., 2022). This article will conclude by exploring implications for social work practice and research.

## Methodology

The qualitative data described in this article were collected as part of a larger study examining women’s experiences of menstruation within the New Zealand Army and the influence of military structures and systems on those experiences. Adopting a narrative inquiry approach, and a liberal feminist theoretical lens, the research employed in-depth interviews to provide an opportunity for participants to narrate their own experiences (Freeman, 2019). Narrative research is a broad and varied methodology that puts stories and individual voices at the heart of the research. It leans on the complexity of stories to establish a greater understanding of a phenomenon or lived human experience (Creswell, 2007; Lewis et al., 2017).

Participants were individuals serving in the Army who menstruate currently or have done so in the past. Not all women menstruate and not all people who menstruate are women; however, all participants in this study identified as women. Therefore, the term *women* is used

throughout this article when referring to participants. Moreover, when the term *men* is used, this article is referring to cisgender men, as, it should be noted, some men menstruate. Eighteen participants were recruited through purposive sampling at the different Army camps across New Zealand. The study was reviewed by the NZDF and organisational support was gained in 2019. Interviews with participants were undertaken between December 2019 and January 2021.

Narrative interviewing was chosen as the richness of the data collected through narrative research lies in the inquiry into the stories and analysis of voices. It goes beyond words into more expansive ways of interpreting individual experiences and understanding of a phenomenon (Murray-Orr & Olsen, 2007). In line with the aim of the study, the reflective nature of narrative research often leads to new insights, questions, connections and pathways for future research (Creswell, 2007). Narrative interviews ranged in length from 28 minutes to 1 hour 42 minutes.

Braun and Clarke's reflexive thematic analysis (Braun & Clarke, 2021) was adopted influencing thematic saturation considerations and the analysis of findings. As Braun and Clarke have suggested (2021), since codes and themes are driven by the researcher, it is impossible to know whether data saturation has been reached prior to undertaking thematic analysis (Braun & Clarke, 2019). In their 2021 article, Braun and Clarke suggest that Dey's phrase, "theoretical sufficiency" would be a more accurate alternative to capture the concept that the researcher believes they have collected enough data to build a depth of understanding (Braun & Clarke, 2021). Therefore, within this study, theoretical sufficiency was reached when interviews did not contribute any new information about the concepts or their dimensions (Schwandt, 2001) and when participants of diverse ages, ethnicities, ranks and trades had been recruited. Using a narrative methodology

with reflexive thematic analysis ensured that the researcher reflected on their own biases, thoughts and experiences throughout the data collection and analysis processes. Prior to data analysis, all interviews were transcribed verbatim. Transcripts were uploaded into the qualitative analysis software publisher, NVivo. The use of this software facilitated the analysis process through the organisation of themes and codes.

Due to Covid-19 restrictions, many of the interviews that were originally going to be conducted face to face, needed to be conducted online, over Zoom. Although both options were always offered to participants, most chose to conduct interviews online for both safety and convenience. Being flexible in very uncertain times was crucial. Nevertheless, utilising this data-collection method led to an incredibly rich data set. To limit personal and professional harm, including the possibility of retribution, issues around confidentiality and safety were acknowledged and addressed prior to every interview. To protect the participants' confidentiality, pseudonyms were given to each participant as well as establishing ranges for age, rank and length in the military. As women are still only a small percentage of the New Zealand Army, even without providing their names, participants could still be easily identified through the additional information.

Ethical approval for the study was granted by the NZDF and exception by the Chair, University of Canterbury Human Ethics Committee Chair was provided on 12 March 2020.

## Findings

Menstrual concealment, or the need for women to hide their period, was popularised by Wood (2020) who suggested that women's desire and vigilance to ensure their menstruation is kept hidden is not chosen but a "required self-disciplinary practice rooted in menstrual discourse that

characterises menstruation as stigmatized, taboo, and therefore shrouded in secrecy” (Wood, 2020, p. 319). The experience of menstrual concealment was identified as central to participant narratives of menstruating in the military and is the focus of this article. Through reflexive thematic analysis, three themes were identified that explore the normalisation of menstrual concealment. First, the examination of participant narratives generated “menstruation as gendered embodiment” as a central theme which explores how menstruation is experienced, whether menstruating spontaneously or as withdrawal bleeding. Next, we explore the gendered pressure that military women experience to conceal their menstrual blood in the theme “managing menstruation is basic self-care”. Finally, women describe the relief that the technologies of menstrual suppression offer them from self-surveillance when exploring the theme of “the menstrual suppression imperative”.

### Menstruation as gendered embodiment

Participants’ emotional responses to menstruation changed over time reflecting menstruation as a social and material construct (Hasson, 2016). When asked how they felt about menstruating, participants shared very different embodied experiences. Although no participant said outright that they loved getting their period—their responses were all very nuanced.

Olivia described feeling fortunate to have been able to experience having a regular cycle. Earlier in the interview, she explained that she had colleagues and friends whose experiences were very different to hers and, due to a variety of reasons, were unable to have children. Becoming a mother prompted her to reframe how she experienced menstruating as a form of gendered embodiment. She described it as something that she needed to go through to have children and was thankful to have

that experience. “I’m happy that I don’t have them anymore. In saying that, I thought it was a real honour, a privilege to have a period, because that’s what allowed me to have children” (Olivia).

For Rose, menstruating was also a reminder of her fertility but, unlike Olivia, this experience of gendered embodiment elicited gratitude for *not* being pregnant. For Rose, her period was a visual reminder that she was not pregnant that month, and that periods were just an unfortunate norm. “I guess if anything, which is probably wrong, it’s been a pain. [...] it’s been a blessing a couple of times, too, when I’m like ‘Thank God I’m not pregnant.’ [...] It’s kind of been like, you’re a female. You have a period” (Rose).

Candace’s perceptions of menstruation evolved over time. Initially practising menstrual suppression, was a positive experience for her, yet, in retrospect, she dismissed the experience of break-through bleeding while on her period as “weird” and not resembling a genuine period. When Candace ceased using contraception, she described feeling more in tune with her body, enjoying tracking her periods and understanding how her cycle influenced her moods and energy levels. She described this experience of gendered embodiment giving her a greater appreciation and understanding into how she functioned.

After coming off the Mirena [IUD], I really liked getting it. [...] all the years I’d been on contraception and stuff and I’d had these weird, crazy, brownish blood—and I didn’t know what my body was going to do. I didn’t understand my body very well, and I didn’t understand my menstruation very well. [...] When I see that, I’m like, “Oh yeah, I’m due tomorrow. That explains my mood. Cool”. I just think of it as quite a big part of being a woman. (Candace)

As Candace described, having her period also made her feel like this was a “big part

of being a woman". She appreciated feeling "normal" and was amazed to see how her body worked. The feeling of being part of something bigger than herself was not shared by everyone. Another participant, Katy, shared her experience with a chuckled and confusing tone—like she must be missing something! "I feel like I'm a traitor to feminism, but I hate it. I think because it was that it wasn't a milestone, it wasn't a thing. [...] It's never been a bonding thing or whatever" (Katy). Her emotions regarding her period were influenced by how she thought it was going to be, as dictated by culture all around her, and it did not reflect her experience. Her reality was that menstruation was an "inconvenience, painful and embarrassing". Candace and Katy's experiences are reflective of the changing social construction of menstruation. As Przybylo and Fahs (2020) highlighted, there has been a wave of feminist authors calling on women to embrace their period. Although menstrual positivity has been presented as a way to counter the need for menstrual concealment, one of the unintended consequences, outside of marginalising women who do not menstruate at all, has been isolating women, such as Katy who actually would prefer to avoid menstruation altogether.

The unpredictability, especially in a military environment, was an aspect of menstruation that was difficult for Jasmine to manage. However, much like other participants, her experiences changed over time and were influenced by other factors. After being on the pill for years, when she stopped taking hormonal contraception, her period never returned. Despite numerous consultations with medical providers, almost two years later, her period still has not returned. Jasmine described previously having her period as "a real pain. Um, because it always seems to turn up at the wrong time. But now that I didn't have it now that I have it I really appreciate it".

This feeling of wanting to be in control of your body was a sentiment shared by other

participants. In an effort to feel more in tune with her body, Emma would purposefully wait between depo [Depo-Provera, contraceptive injection] shots to ensure she had a period. This was her way of taking care of herself, and give her comfort that her body was still working "as it should". As she describes, "sometimes I would go over the three months with the Depo just to have a period [...] I felt like I wanted my body to reset. I would purposely not go back after the 13 weeks just to have a period and then go back and restart again" (Emma).

Emma's experience reflects the negative menstrual suppression attitudes that has been highlighted in many studies both within a military context (Lawrence-Wood et al., 2016; Ricker et al., 2021) and a civilian context (Fleming et al., 2010; Spies et al., 2010). DeMaria et al. (2019) explained that women expressed concerns over menstrual suppression, believing that regular menses is natural, provides evidence of pregnancy prevention and that monthly bleeding was necessary to regulate the body of menstrual build-up. Despite this not being needed, these assumptions influence gendered embodiment and how menstruation is experienced. These concerns and desire for bodies to "reset" through menstruation is reflected in Emma's experience above. Despite recommendations from her medical professional, her need for some control over how her body functioned was prioritised.

### **Managing menstruation is basic self-care**

The idea that women are responsible for managing their own menstruation was touched on by many participants. For example, Candace, likened being prepared to manage her period with bringing a toothbrush. By comparing menstruation to just another aspect of self-care, she asserts bodily equivalence, and more broadly, equivalence of women and men in the military (Chua, 2020). If managing one's period is as straightforward as bringing a toothbrush, men and women

may be considered equally effective operationally. While Lili alludes below to the unpredictability of one's period, she explains that it is up to the individual to have everything in place to ensure they are not "caught out".

I always make sure like I have enough with me just in case I happen to like get my period because it's not something you want to bring up with a random like commander like "hey I have to go back into camp to go to a shop". Yeah. So we're always going to be prepared. (Lili)

The way most participants spoke about managing their period was individualistic. The self-policing maintained that the responsibility to be prepared lay with themselves. For Lili, within the military context, being prepared ensured she did not need to need to communicate her needs to her commander. As Wood (2020), highlighted, women's bodies are viewed as sites of discipline that require constant management and containment in order to remain viewed as rational and self-regulating. In the military context, this meant continuing to be viewed as equally competent as those who are not menstruating. When participants were caught off guard, as Christine explains, several expressed disappointment in themselves and embarrassment that they did not have menstrual products with them. "I just completely forgot about [my period]. [...] I forgot to bring tampons and I was super annoyed at myself" (Christine).

The feeling of not wanting to be caught unprepared and therefore, single yourself out was present in many of the participants' stories. One of the participants, Polly, described a time where after a heavy surprise period, she needed to self-monitor her reactions to ensure she did not bring any attention to herself. What she describes below is bloody mess that had the potential to completely go against the self-discipline and self-surveillance that Polly was striving to achieve. When the self-surveillance

and discipline had a leaky outcome, she described feeling shame and even disgust in her situation. Nevertheless, this shame and disgust only led to her doing everything she could to continue the concealment imperative. Although she described disappointment in herself, she was not going to give any power to her chain of command to change their perception of her worth and work ethic due to her menstruation. While describing the situation, her voice was shaking and it was apparent that she was still affected by the story.

You're up early in the morning, listening to orders, and I remember this one morning, I was just flooding, it was awful. Like, you know, you feel it. [...] I thought, oh my goodness, this is very bad. Like what do I have to do? I have to sit through these orders and everyone's very serious [...] I just need to go to the bathroom right now. But there were no bathrooms. So I had to go into the forest. And like try find cover and sort that mess out and work with the baby wipes. And you can't, like what do you do with it like I had to carry that rubbish on me, it was awful. [...] what made it worse was that once I got back from sorting out my life, with the blood and everything, I get told off for being Like, "no one's going to the toilet!". Yeah, but I couldn't explain to the sergeant guy that I was afraid of that actually, I'm bleeding through my pants. Yeah, so that was horrific. (Polly)

When asked if she would do anything differently now that she can look back on the situation, she said that she would not. For Polly, although she was afraid, she was bleeding through her pants and feeling desperate to address the situation, managing her menstrual blood and concealing the waste seemed like the only option—even though she knew that she could be reprimanded for leaving to do so. It also was not as simple as going to the bathroom as there were none around! Polly's story illustrates key relationships and materials that influences how women described their

experience with menstruation in the military. The power dynamics with her sergeant, the lack of accessibility of bathrooms, the structured nature of military life, the materials that she had at her disposal in the field, all played a role in her self-care and her decision to conceal.

The belief that concealment is better than admitting to a menstruating body was further touched on by Candace who, even through intense menstrual cramps, felt that not completing a task was out of the question. Below, she describes how using period pain as an explanation for not doing physical training risks rendering women different or unable to perform.

You don't wanna be pulling out of something for a girly reason. It's fine for me to say, "I don't want to do physical training today because I've busted my knee," but I wouldn't say "I don't want to do physical training today because it feels like someone's stabbing me in the gut." You kind of almost feel like you're just reiterating that women can't do this because our period is in the way. (Candace)

Candace's phrasing demonstrates the ongoing pressure military women feel to conceal, not just their menstruation, but evidence of their differences to their male counterparts. The following narratives shed further light on why someone in Polly and Candace's situation may be reluctant to reveal their menstruation. Although speaking individually, participants described their experiences as having the potential to affect their colleagues' views of all women, rather than just themselves. There is individual responsibility but collective consequences. Taking the reprimand or going through physical training, even while in pain, was seen to be a better alternative for the individual than bringing attention to the reproductive pain.

You don't want to go up to an instructor and say, "Hey, this is my situation"

because then, one, you're singling yourself out. Everyone's going to go, "What are you leaving the field for? Why are you not sucking it up with us?" You're individualising yourself, which puts more attention on you. Why would you even say anything. (Nadine)

Candace had similar reflections to Nadine and explained that "if you're experiencing really intense lady problems, you don't want to have that conversation. You don't want to be like, 'Right now I've had a cyst rupture and my abdo is so severely sore'". Candace describes a very painful medical condition that is minimised by rendering it a generic "lady problem". Women described pressure to maintain menstrual concealment despite feeling severe pain and discomfort. For many women, this pressure contributed to a sense that having their period was a messy, difficult challenge.

Menstrual concealment was challenging and often came at the expense of participants' wellbeing. As Oxley (1998) described, the social construction of menstruation has framed it as something that requires women to engage in surveillance and control practices to keep it hidden from others. Concealing menstruation was seen as necessary for these individuals but was further amplified by not wanting to draw attention to their gender as a whole, rather than just themselves. It appeared participants had such a high standard for themselves that when others did not live up to that standard, they felt as though they were giving everyone else a bad reputation.

### **The menstrual suppression imperative**

During interviews, most participants discussed contraceptive technologies such as IUDs, the rod or the pill. Through continuous exposure to hormones, these methods suppress menstruation. In the case of the pill, one skips the sugar pills which enable women to experience bleeding that echoes menstruation. Thus, for most participants



in this study, menstrual management was synonymous with menstrual suppression, or at least, menstrual suppression in selected environments. As Rachel explains, the decision to use contraceptive mechanisms was described as one of ease and convenience. “I have just dealt with it by getting rid of it [my period] [...] One of the reasons I got the Mirena [IUD]—was to make it a lot easier for myself” (Rachel). Tamara also suppressed her period for convenience. “Obviously, I didn’t want to have my period while I was in the field, so I went on the pill for that. And then just stayed on the pill. I skipped periods like everyone does while I was on it” (Tamara).

Rachel and Tamara’s narratives both relay an assumption that not having a period is desirable and normalised within their military context. As Tamara described, her use of contraception changed throughout her career. The decision to suppress her period or not, was dictated by the type of work she was required to undertake. Through her story, Tamara has described the contraception paradox within a military context (Gomez et al., 2018). As Morison (2021) described, contraception can be a tool for promoting women’s empowerment while also being a source of oppression for others. While the accessibility of contraception has meant significant economic gains for women and allowed for choice and control over their own fertility (Morison, 2021), these gains have also meant external power and control over women’s fertility (Joffe & Reich, 2015). The decision to use contraception for menstrual suppression was heavily influenced by the military context. As Christine outlines below, especially when joining the organisation, women might be making decisions based on what they have been told or what they believe is best for the organisation, rather than what is best for them.

Yeah, I guess my sort of the counter argument is that women join the organization in a very vulnerable and they’re usually very young. [...] when you’re on recruit course and you’re

terrified and you just do what you’ve been told. You know that if a doctor, even if he’s a civilian doctor and he tells you to go to the pill and you, you’re going to do that [...] you are not making the best choice for your body. You are just doing whatever it is in order to join the organisation and pass your recruit course. (Christine)

Kayla reinforced the contraception paradox as she describes that she got the contraceptive implant Jadelle® inserted as she was worried about the pressures of the military environment. However, the end result was that menstruation suppression led to a more convenient life, where she was able to focus on her training without needing to worry about managing her menstruation. “I was really concerned about it before I joined. And so I got the Jadelle® put in, right before I joined because I was really worried about having it during like basic training [...] Which was great, it made life easier” (Kayla).

The decision-process to use contraception is influenced by a number of actors—from their peers to other women, to medical professionals, to the actual environment. Simple conversations with peers, such as one that Rose had, can become a device and a tool for women to make decisions regarding their care. “I think one of the females was telling me that she managed to skip, and I was like, ‘What? You have this option of skipping? How have I not known this?’” (Rose). For women in the military, the construction of periods as a direct threat to, figuratively, marching like a man, diffused responsibility to conceal menstruation to the individual woman. For Rose, discovering that technologies enabled her to do this more easily was a revelation that demonstrates the important role that communicating with her peers had on redefining her period.

## Discussion

Participants, with little guidance from the researcher, explored stories related to

menstruation throughout their military career. For many, these stories came to mind easily. They described them in detail and easily recalled events. For others, stories did not come so easily as they found it difficult to recall a time where their menstruation left a lasting impression. Nevertheless, there were common threads that weaved in and out of each story. This included their commitment to menstrual etiquette and menstrual concealment while exploring the relief that menstrual technologies can bring to the constant self-surveillance. Participant stories also highlighted the importance of maintaining bodily equivalence with their male counterparts, the pressure they experience to ensure that menstruation does not influence others' perception of them and more broadly, of women in the military as well as the role that the military environment played on their decision-making. These themes brought together unique and valid experiences.

Most participants in this study used a method of contraception for the primary reason of suppressing their period. Eliminating menstruation which, in turn, might eliminate its potential unpredictability and physical symptoms of discomfort and pain remained an attractive option for many participants. Within a military context, the accessibility of contraception for menstrual suppression empowered participants to do their job without the added consideration of managing their period. In contrast, menstrual suppression was not merely an action, but also a tactic employed by participants to avoid being marked as "other" (Jackson & Falmagne 2013; MacDonald 2007). Concealing one's menstruation, and thus gendered body, furthers the project of fitting within established culture without attracting any additional attention. Participants emphasised their individual role to ensure their menstruation was concealed while also policing others to ensure everyone was playing their part to keep menstruation, or more broadly, their womanhood, concealed.

A few questions arise. If the established culture was different, would the choice be different? Is suppressing menstruation empowering and liberating if it is only done in response to a culture that does not allow for another type of menstrual empowerment? The women's narratives described the norms as deeply engrained but contingent on the hierarchical and work context. The empowerment and relief that women experienced when suppressing their period cannot be discredited. However, as the context of the military changed and the participants moved through the ranks, their decisions also changed. If they had access to a bathroom on a regular basis, weren't expected to be in the field often and could manage their own time at the gym, participants were less likely to choose suppression as an option for menstrual management. Participants' stories revealed their desire to fit in within the current military culture while also having control over their own body and decision-making. The decision on how they managed their menstruation was influenced by their peers, their rank, their environment, their past experiences and the information provided to them through briefings and visits with their medical provider.

Whether suppressing their period or not, the decision on how to approach menstrual management was one of control. In a hierarchical environment like the Army, where much is decided for you, perhaps choosing to have a period, even while keeping it hidden, is just as important as opting for suppression. Despite the positive experiences of menstrual suppression, the notion that if one person can successfully conceal their menstruation while another cannot, perpetuates the idea of only one appropriate strategy when it comes to menstruation: concealment. This isolates and marginalises those who do not want to, or cannot, suppress their period. Therefore, are women empowered to choose how they want to experience their menstruation or are they guided in a way that exploits particularly gendered set of assumptions about female

identity? Within a military context, framing menstrual concealment as an empowering choice might falsely offer women control over their own bodies. Expanding on the “tight-rope talk” identified by Sue McKenzie-Mohr and Michelle LaFrance (2011), where they described the adoption of a “both/and” position to counteract the either/or binaries when it comes to women and menstruation. Their research focused on the notion of pre-menstrual syndrome (PMS) where women are either described as being powerful agents or powerless patients. They argued that we can acknowledge both the materiality and discursive construction of premenstrual distress while also emphasising women’s agency and power in understanding and coping with PMS. Moreover, women’s emotionality is policed differently to men. For example, when a man’s emotions fluctuate during a sporting event, he would be described as “passionate” while a woman whose emotions change would be considered “irrational” (Weigard et al., 2021). Within this context, the both/and is extremely relevant. Participant stories reveal that menstrual suppression is *both* empowering *and* a source of oppression. It is *both* an expectation *and* a choice. Embracing these seemingly contradictory notions allows us to both look towards ways of eliminating the source of oppression, without discrediting the positive experience of menstruation suppression that was described by many. We can explore how to ensure that many choices are offered, without discrediting the ones participants made with the information they were provided and the context they found themselves in.

Although menstrual concealment and suppression was normalised, the ability to conceal was a positive form of agency for many participants. Women described enjoying not needing to think about their period or how they would control it in different environments. Participants described feelings of relief when relaying the comfort of being largely relieved from this requirement of self-surveillance on top of the already complex environment they needed to navigate. Despite

expectations conveyed through their stories, women made it clear that their decision to suppress was mostly for convenience and ease. Therefore, the tension was not whether individuals in the military should suppress their menstruation. It was whether women in the military have reproductive autonomy. Reproductive autonomy is the ability for individuals to make free and informed decisions about their reproductive health (Beddoe, 2022; Moore et al., 2010). As previously stated, from a reproductive justice perspective, suppressing menstruation is not a neutral choice, as it is influenced by so many external factors. As was highlighted in several other studies stemming from the US military (Brown, 2012; Lane et al., 2018; Monteith et al., 2017), to maintain body equivalence, women needed to suck it up and manage any unmet needs and challenges individually. Within a military environment, women can model hyper-masculine traits to fit within the patriarchal hierarchy (Koeberle, 2019). Fitting in within a military context, was often described as being synonymous with being “part of the boys”. The data in this study identifies the emergence of menstrual suppression as an emerging norm aligned with the gendered environment of military operations. As Ross and Solinger (2017) stated, “the reproductive justice perspective draws sharp attention to the social context in which individuals live and make their personal decisions, it aims not for simple inclusiveness but for changing the rules of the game” (Ross & Solinger, 2017, p. 117). In other words, to fully address the expectation of menstrual concealment and autonomy from a reproductive justice perspective, we need to rethink the military environment and established norms rather than focus on creating change on an individual basis.

Full visibility of menstruation is not the only alternative to menstrual concealment. As some participants described, if they had a choice, many would not choose to experience menstruation. As touched on in the findings, despite turning to concepts such as menstrual positivity, which is the positioning of menstruation as beautiful,

natural and empowering, it is just as important to maintain a “cranky” approach to menstruation. Menstruation is both empowering and a pain. Przybylo and Fahs (2020) maintained that, just as much as we should celebrate menstruation, we should also invest in social justice, demand access to menstrual products and acknowledge the pain, discomfort and leakiness of menstruation. It is important for women to have access to comprehensive information about the benefits and risks of suppressing their period as well as eliminating the stigma and gender inequalities that lead to menstrual concealment. Suppressing one’s period should be a conscious decision that considers a women’s complete well-being in alignment with a reproductive justice framework (Kissling, 2016; Ross, 2017). It should be an active decision rather than a taken-for-granted norm. Achieving menstrual justice would mean that rather than menstrual concealment and suppression being both empowering *and* a source of oppression as well as an expectation *and* a choice, menstruation and menstrual management would simply be empowering and a choice.

The strength of this research lay in its unique methodology to explore this particular issue. Using stories to elevate lived experiences within the organisational context led to a rich data set that touched on much more than menstruation. A consideration for this study, as Kensinger and Ford (2019) described, is that people remember negative experiences more than positive ones. Therefore, there is a chance that the study has a negativity bias as women recall and share their more negative experiences with menstruation rather than positive ones. Moreover, given the unique context of Aotearoa New Zealand, there is scope for future research to explore menstruation in the military via an Indigenous lens.

### Implications for practice

Social workers in the NZDF are responsive to the complexity of military structures and

the military-related stressors on individuals and, in this way, are in a unique position to work alongside personnel, address the environment, culture and policies that maintain menstrual stigma and gender inequality and promote social change.

The concept of reproductive justice is of core significance to women’s decision-making when it comes to menstrual suppression, but it is also closely aligned with the broader challenges faced by social workers who seek to reduce health inequalities (Beddoe, 2022; Liddell, 2018; Smith, 2017). The language of choice is often linked to empowerment. The concept of empowerment is central to social work practice and, in particular, the model of military social work in the NZDF. Empowerment uses a person-centred focus of support based on holistic well-being and aligns with the Aotearoa New Zealand Association of Social Workers/Te Rōpū Tauwhiro i Aotearoa (ANZASW) Code of Ethics (2019) in relation to the principle of *Rangatiratanga*, which promotes client empowerment and self-determination. In the social work profession, the navigation between choice and empowerment is a difficult one. Especially when navigating the contraception paradox, where menstrual suppression can be simultaneously empowering and controlling.

The findings of this research give voice to the embodied and nuanced experiences of menstruation for women in the military. Social workers have a role to work critically and radically to give voice to structural oppression and its impact on women while working towards normalising menstruation and confronting the practices of gender erasure in the military. Increasing access to nuanced accounts of menstrual suppression may allow social workers to advocate for change while preserving the status of individuals who must navigate their menstruation in a structurally oppressive context. There is also scope for social work to have a more active educative role with women in the military, with medical

professionals and with the NZDF concerning the specific needs of women in the military and the workplace environment they are part of. If a choice must be navigated, and a decision is to be made to take up combined oral contraceptives or long-acting reversible contraception, what are the best options for a woman that take into consideration the present management of her menstruation and longer-term goals about her body? Social workers have a responsibility to advance social justice and human rights issues. The issue of reproductive autonomy is a human rights issue, and it is a key part of the fabric of a restorative justice framework.

## Conclusion

Without viewing the organisation through a reproductive justice lens, this research would have been looking at women's experiences of menstruation in the military in a similar way as past researchers: as an individual experience. To remedy any potential inequities, there should be an emphasis on changing organisational processes and practices rather than individuals within the minority group (Acker, 2012). In 2012, Acker noted that gender practices are often invisible—which makes removing barriers and moving towards equity all the more challenging. This research did not aim to describe and outline the military structure—however, it has highlighted the impact of material structures on women's decision-making when it comes to menstrual suppression. The decision to conceal and suppress is not independent of the military environment. If we do not address menstrual stigma and the military structures, women will continue to choose to conceal or suppress their period as it is presented as the only appropriate choice.

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