

The Experience of Menarche

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ABSTRACT

Four Canadian females, whose respective ages were 15, 17, 37 and 65 years, were interviewed in order to obtain a phenomenologically based descriptive profile of the experience of menarche. The shared pattern of menarcheal experience was characterized under six thematic categories: Orientation and preparation, initial trauma, cultural context, the body, social relationships, and self image. The data suggested that positive aspects of menarche are lost in continuing taboos and avoidance. The treatment of menarche as an unfortunate intrusion into a woman's life has negative effects upon her social and personality development. The opportunity to situate menarche positively as part of initiation into womanhood is missed.

RÉSUMÉ

On a interviewé quatre Canadiennes, âgées respectivement de 15, 17, 37 et 65 ans, pour obtenir un profil descriptif phénoménologique de l'expérience de l'apparition des premières règles. Les éléments communs à cette expérience ont été caractérisés dans six catégories thématiques: les conseils d'orientation et la préparation, le traumatisme initial, le contexte culturel, le corps, les relations sociales et l'image de soi. Les données semblent indiquer que l'on oublie les aspects positifs de la première menstruation à cause de la persistance des tabous et du silence. Traiter l'apparition des premières règles comme une intrusion regrettable dans la vie d'une femme a des effets négatifs sur son développement social et personnel. On n'a pas su profiter de la possibilité d'intégrer heureusement cette expérience dans l'initiation à la vie féminine.

There is a paucity of psychological literature which discusses the actuality of the experience of menarche. The extant literature has a limited focus. For example, Kestenberg's (1961) paper on menarche, while significant, expresses the stereotypical preoccupation with the problems of menarche and their therapy. On the other hand, Delaney, Lupton and Toth (1976) focus upon the rites of menstruation from a cultural-historical perspective. A broader approach to issues related to menarche is found in Golub's (1983) publication, the only book dealing exclusively with the subject. Books by Washbourn (1977) and Shuttle and Redgrove (1978) make limited reference to menarche and treat the subject in a positive and integrative manner. The existing literature on menarche expresses a compartmentalized focus upon either historical, biological, social or intrapsychic factors. There is a tendency to see menarche as either a process of integration or of disruption, but not a balance of both. Petersen's (1981) biopsychosocial study of puberty is a notable exception to this tendency.

The literature does not adequately capture the fullness of the experience of menarche from the experiencer's perspective. For example, a young woman's first discharge of menstrual blood is usually a

deeply personal, developmentally pivotal experience which may be better understood by gathering descriptions of the meaning of that phenomenon to the experiencer.

Although there are indications that North American society is willing to acknowledge the importance of menarche (e.g., Hart & Sarnoff, 1971; Golub, 1980; Koff, Reirdan & Jacobson, 1981; Greif & Ulman, 1982), discussion of the subject is still couched in euphemisms which often serve commercial interests. Marketing of sanitary products for menstruation encourages the tendency to view a natural feminine process as a blight or, at least, an unnecessary inconvenience. Researchers have found (e.g., Brooks-Gunn & Ruble, 1982; Koeske, 1983; McKeever, 1984) that instructional materials on menarche, designed for young women, communicate inefficiently because of their vagueness and euphemistic language. Personal hygiene presentations to girls emphasize cognitive understanding, proper use of sanitary products, and concealment of unpleasant bodily sensations or emotions (McKeever, 1984; Whisnant & Zegans, 1975). North American culture tends to "ignore the affective importance of menarche" (Whisnant & Zegans, 1975, p. 819). There is a failure to recognise

the interdependence of biological, psychological and social processes. A contextualist view of menarche dictates that compartmentalized, decontextualized studies of menarche present investigators with partial information about a complex of personal processes.

Do we really know how young women experience menarche and how our culture influences this event? While there is an acute tacit awareness of menarche, we lack a full understanding of this crucial developmental event. Mead (1969, p. 57) says, "We prescribe no ritual, the girl continues on a round of school or work, but she is constantly confronted by a mysterious apprehensiveness on the part of her parents and guardians."

Conventional quantitative research has not addressed the meaning of the experience of menarche. Whisnant, Brett and Zegans (1975, p. 809) point out that "few reports have been based on interviews with young girls themselves." Whisnant and Zegans (1975) claim that educational literature avoids controversial and unpleasant topics and dictates what a girl "should" feel rather than help her honestly explore and validate her subjective responses. Koeske (1983) feels that the menstrual cycle has been connected closely with the nineteenth-century battle between "scientific" and experimental conceptions of the body. The result of this antipathy has been a preference for "objectivist," rather than "subjectivist," research methodology. The overemphasis upon negative moods and behaviours during menarche and menstruation requires correction. The phenomenon of menarche should be conceptualized and measured neutrally or in a manner which includes both positive and negative experiences (Koeske, 1983).

Koeske (1983) claims that a natural science approach focusses upon causality rather than descriptive exploration. Contextual factors such as stress and lifestyle, which have a more immediate temporal impact upon menstrual experience, are often underplayed or ignored. Abstracted traits are reified rather than preserved as contextualized process-like qualities. Abstracted states or traits alleged to be causes of behaviour can be oversimplifications which contradict women's lived experiences. A majority of biomedical researchers prefer laboratory-based investigations which focus on increasingly smaller parts of the full phenomenon by isolating a particular aspect of menarche from its surrounding context. Capturing brief snapshots of time, rather than allowing processes

to unfold in context, represents the most common sampling strategy.

The present study offers a methodological alternative to the study of menarche, which permits wider access to the meaning of the phenomenon through examination of personal descriptions.

How a female experiences menarche in our culture raises important ancillary questions. Do girls and women find their esteem and self-worth enhanced or jeopardized? Does the experience affect the relationship between males and females? Do the images and attitudes that govern women's acceptance or rejection of their bodies and themselves stem in part from menarche? These are the questions we sought to explore phenomenologically with women and girls.

Method

Participants

We chose participants who had salient experience of the phenomenon in their everyday world(s). Since menarche is such a personal subject, it was important to choose females with whom the first author had some prior contact so that there would be enhanced trust and openness. In order to minimize bias, participants also had to be females who had not heard the first author discuss her views on menarche. If there is a deep structure to the phenomenon, it should appear as an invariant across variable individuals with their unique but shared experiences.

Four females of different ages were chosen to see if there were similarities or differences in the structure of the menarcheal experience over time. Two girls who had recently experienced menarche were selected in an effort to obtain experience less influenced by recollection (Jaynes, 1976). Danielle had just turned 15, Laura was 17, Sarah was 37, and Martha was approaching 65. All the women had grown up in Alberta, Canada. Only Martha had a rural background. The above names of the participants are fictitious.

Presuppositions and Bracketing

The following presuppositions underlie the present study. Later interpretations of data need to be framed in reference to these predispositions: Menarche and culture are not independent; they influence each other

reciprocally. The biological and psychological dimensions of menstruation and its cyclic nature connect it with something larger than the self, and this opens up a spiritual dimension. In Western society, the attitude toward the body, the masculine-feminine dichotomy and a disconnection with nature reflect an attempt to control what is feared and not understood, namely menstrual blood. We expect the menarcheal research to reflect evidence of secrecy, shame, fear, embarrassment, bodily limitation, female inferiority, and symptomatology. At the same time, the experience may also be associated with a sense of maturity, responsibility, pride, new social status, belonging, and sexual awareness.

As "human science" researchers, we realize that we are not attempting to conduct "value free" research. We explicitly recognize the ways in which the researcher co-constitutes the larger context of the research project along with the phenomenon of interest. We attempted a bracketing of the above predispositions as part of a continuous process of self-reflection during the course of this study.

Procedure

We made a preliminary telephone contact with each participant, at which time the topic was introduced and the procedure explained. Subsequent interviews were audio taped. Each subject had one in-depth interview beginning with a brief explanation of phenomenological research methodology. We emphasized that there were no right answers and that we wanted them to be in touch with their experiences. They were not to give an account of what they "thought" we wanted. We assured the subjects that they were partners in the exploration of a phenomenon of mutual interest.

In order to minimize task demands, the interviews began with an open-ended question: "Could you describe in as much detail as possible your experience of your first period?" When responses to this question seemed exhausted, a second and less open-ended question was presented: "Could you describe or explain any attitudes, beliefs or practices regarding menarche or menstruation that you were aware of in your environment when you began menstruating?" To conclude, three specific questions were asked:

"How did you feel about your body when this was happening?"

"What were the effects, if any, on friendships and relationships?"

"How did you feel about yourself?"

These questions arose from existential notions of Umwelt (the world of the body), Mitwelt (the world of social relations), and Eigenwelt (the world of self). Participants were asked if they had any final comments about their experiences of menarche. They were encouraged to contact the researcher if they wished to elaborate upon these accounts at a later time.

Preliminary Protocol Analysis. The first author listened to the tape of each interview several times in order to form an empathic impression of each person's experience. The subjects' actual statements were then transcribed verbatim into protocols.

Within Persons Analysis. The raw line-by-line descriptions of each participant's experience were clustered according to related thematic units (e.g., orientation, culture, relationships).

Between Persons Analysis. Individual protocols were examined for common elements and these, in turn, were distilled into higher order thematic clusters (e.g., orientation and preparation). Essential elements identified in each participant's description (e.g., previous knowledge, product use, life adjustments) revealed a shared structure to the experience of menarche, which is shown in the appendix at the end of this article.

Each participant listened to a reading of her paraphrased protocol to see if her experience was accurately represented. Any suggestions, corrections or additions made by subjects were incorporated into the analysis. This process is known as "respiralling" (Giorgi, 1975); the researcher interprets the preliminary findings, incorporates the modifications suggested by subjects and continually modifies the themes until they "fit" the experience of the participants. The personal experience of menarche as each woman remembered it was thus confirmed. The women also studied tabular summaries of their protocols (Appendix). Upon reviewing the more global and comparative outlay of data, they made some additions. They found that some

of the experiences expressed by other women reminded them of their own experiences. The structure distilled from across the four protocols "rang true" for each woman and was thus consensually validated as representative of the experience of menarche.

Results

Between Persons Analysis

Themes from individual thematic summaries were clustered the Appendix. Individual thematic analyses are not presented here due to limitations of space. A synthesis of the themes from individual women's protocols suggested the common structure of "what it is like to experience menarche." A narrative of the essential structure of menarche is presented in generic language with occasional illustrative quotes from the protocols. Not all women explicitly experienced all of the themes listed in the Appendix. The written synthesis of themes bear a disjunctive relationship to the Appendix. Nonetheless, all women were concerned that the synthesized thematic structure represented their experience of menarche. The individual protocols were the basis of a respiralling process which took an initial interpretation of a shared experience back to each individual for confirmation of goodness of fit.

1. *Orientation and Preparation.* For all co-researchers, their approach to menarche had both a feeling and knowledge component. None of the women felt fully prepared. Only Laura had "an explanation with a book" from her mother. Danielle and Laura received input at school about the "physiology" and "sanitary products," and Sarah heard some "implicit reference" in Health class. Each of the younger women "picked up" attitudes, feelings and bits of information from advertisements (Danielle, Laura), friends (Sarah), siblings (Martha), and the environment (e.g., "We saw products in stores ... articles in women's magazines"). The emotional, psychological and social dimensions of menstruation were not addressed; Danielle and Martha both felt a need to know more from health professionals. All the women had mixed feelings and some anxiety. Danielle was "shy and embarrassed" about menses; Laura had a sense of both "pride and disgust"; Sarah felt "vague about it," and Martha "became worried, but looked forward to her period."

2. *The Event of Menarche:*

(a) *Initial Trauma.* At the first appearance of blood, most of the younger women were confused about what was happening. Laura wondered if it was "normal" and Martha did not know that "the staining" was her menses. All but one woman hid the evidence and tried to cope alone by washing soiled undergarments. Sarah resorted to secretly using washcloths until it was discovered by her mother. There was some anxiety about products: Laura worried about "leaking" and Danielle was concerned about "lack of protection with thin pads" and the discomfort at feeling like she was "wearing a diaper."

(b) *Emotional Ambiguity.* The onset of menses released a host of emotions which ultimately affected the women's way of being-in-the-world. Each of them felt awkward, embarrassed, and fearful. Martha was afraid of "blood, fainting, and loss of control," while Danielle feared pregnancy. They referred to a sense of strangeness, shame and isolation. Laura felt like an "alien" and Sarah was "no longer in a pure state." Each of the women felt her period was dirty, unclean or messy. With menstruation, each of the participants in some way became private, secretive and reserved. They resorted to using code names (e.g., "my friend ... Santa Claus"). All four women curtailed their activities and experienced bodily limitations. Sarah and Martha refrained from swimming; Martha reported, "I could not be in a room full of people unless I was near a door." The monthly appearance of blood became a nuisance and burden which led to resentment. Laura felt "victimized." Martha thought she may have to "cope with it all through life." For some women there was emotional trauma; in Martha's case, it reached the point of "depression." With the exception of Sarah, each participant reported anger and resentment, particularly toward boys whom they envied for their "luck and freedom." Both Laura and Martha denied menses and ultimately Laura eliminated her period (e.g., "I dropped my weight and became anorexic; my periods stopped"). Some of the participants did not feel ready for menses (e.g., "I was too young ... not mentally ready"). As a result, Danielle and Laura rejected what they felt was the imposition of womanhood and maturity accompanying menarche. Nevertheless, having one's period made the girls feel older and more responsible. The event brought with it "peer group acceptance" and a "bond with other females." Laura felt "proud." Sarah knew it was a "big

event"; she had a sense of "initiation" and reported feeling "part of something bigger." In some way, menstruation was participation in a "normal cycle." For two women, the onset of menses brought with it new security and optimism. Martha reported feeling "closer to independence" while Danielle felt "more confident."

3. *Cultural Context.* In the 44-year span between Martha's menarche (1939) and Danielle's (1983), the local community seems (at least superficially) to have come to a more open and informative position about menstruation. All the participants, however, reported that menses in this culture is a subject that is generally guarded and suppressed. Danielle felt that menarche is "culturally unimportant." All the participants were at some time aware that menstruation was considered shameful and distasteful. Martha sensed a "cultural silence" and Sarah felt something "clandestine." In general, there was an unwholesome attitude about menstruation which gave rise to social discomfort and taboo. Most of the women recalled boy's jokes and derogatory terms. Sarah remembers being asked if she was "on the rag." Laura reported "peer horror stories." All four women experienced menarche as something hidden and not shared with boys; Martha even recalls that periods were "rarely mentioned by girls." Although Sarah and Laura remember their first periods as a "social landmark," each woman felt, in her milieu, the messages were mixed and indirect. Martha and Sarah received negative injunctions (e.g., "Do not swim, take physical education or have a bath"); Martha was expected to be "stoic" and Sarah felt a "sense of exclusion." The two women who began menstruating in the 1980s (Danielle and Laura) found the advertisements disturbing. There were "too many." They were "for adults only." They excluded "teens," and "emphasized products." Danielle and Sarah experienced a sense of enhanced social status, female belonging and initiation to "womanhood" at the time of menarche.

4. *The Body.* Menarche brought about bodily changes. All the women experienced their bodies as dirty, unclean and messy. All but one had intense concern about hygiene. Danielle reported "bathing more often" and needing to "keep dry"; Martha worried about becoming "unpleasant" from lack of bathing. For the two youngest women, the menstrual process was "gross"; Laura thought "inserting tampons was a disgusting thing to do to your body." In addition, they both felt "fat and bloated." Once they began

menstruating, the women commonly felt less wholesome in their bodies. Individuals reported being in a "less pure state," "ashamed of the body," and feeling "deformed." Martha equated menstruation with "a bathroom function." Generally, the women were more private and reserved with their bodies. Some of the participants also had positive images. Sarah did not turn against her body and Martha was actually pleased with her looks and developing body. It is problematic as to whether the use of the word "gross" suggests that the younger women were more repulsed by the onset of menarche than the older women. Perhaps the older women are more accustomed to such a feminine function, which no longer seems to be as aversive as it was at onset. The actuality of the experience may be softened by a more distant temporal perspective.

5. *Relationships.* All of the participants found that their relationships were affected by the onset of menses. The most noticeable change was with males, in that none of the women shared or discussed the experience with boys or men. The boundary between the sexes was more marked. Sarah felt "separated from men," while the other women "envied" or "hated" men's freedom. Only Martha sensed "more consideration from boys." Interaction with other women was also altered. They experienced ambivalent feelings towards their peers and other women. Laura and Martha found that they could not discuss the issue with other female generations; as a result, they felt "separated from the older women." At the same time they felt a more firm bond and "sense of comradery" with females. Martha felt very cut off from younger people. When menstruating, she became "uneasy in crowds" and resorted to "covert, evasive behaviour" to protect her vulnerability. Danielle and Laura were "ambivalent with peers." They faced the dilemma of feeling that they had experienced something which separated them from some of their peers, other women and boys; however, they felt "separate yet honored" and were afforded "elevated status and attention" in their group. Danielle felt she had "more experience" than her friends who were not yet menstruating. Sarah felt that getting her period created distance from her mother. In Martha's case, menses influenced family harmony and evoked stricter parental control (e.g., "I was moody and rebellious when I began menstruating"). All of the women experienced some form of constraint and ambivalence in their relationships.

6. *Self-Image.* At menarche, the self-image of each participant was altered; there were simultaneous conflicting images. Most of the women experienced some kind of negativity. Often they felt "dirty"; Martha experienced guilt, personal inadequacy and was "ashamed of being a woman." Laura felt "worthless." Each woman experienced personal restriction. At the same time, participants found that self-image was enhanced to some degree. Some women felt older and more mature. Individually, they felt privileged, important or proud. Danielle and Martha both had a clear sense of increased confidence and optimism (e.g., "I could conquer all ... I was sure I could make my own way"). Emotional ambivalence characterized their experiences.

Discussion

1. *Orientation and Preparation.* The fact that the girls who reached menarche in the 1980s received instruction and information at school suggests a more open handling of the subject in society. Twenty to thirty years before, Sarah and Martha experienced much more of a dilemma; much less was said and they were left to cope on their own. Despite the trend toward a more liberal handling of the subject, all of the participants felt that they had incomplete knowledge, and three of them hid the evidence of their first menstrual blood. It is worth noting that, in this age of open advertisements concerning menstruation, the younger women both felt that the onset of menses was too early; this was not expressed by the older women.

2. *The Experience of Menarche.* Reaching menarche, whether in the 1930s or 1980s, brought with it embarrassment and some form of limitation for all of the participants. Essentially it was a disconcerting and negative experience. The fact that the older women recalled their experiences so clearly reinforces the view that menarche is a difficult transition. All of the women talked about being shy and self-conscious. Interestingly, only the girls reaching menarche in the 1980s felt that they wanted to delay both menses and its accompanying responsibility until later. The younger girls also felt humiliated with their first period. Only 25 percent (nine of 37 themes) could be construed as positive. Individual negative experiences included shame, depression, worthlessness, pressure, fear of fainting and pregnancy, and anorexic behaviour. Of the nine positive aspects (see Appendix), seven were mentioned but once. Coming to a sense of womanhood,

being part of a bigger, natural cycle, and feeling optimistic and relieved were singular experiences. For some of the women, the landmark of menses afforded more security and independence; they felt older and more grown up. Essentially, the onset of menstruation for a young girl in this community has been, and seems to be, personally and socially uncomfortable.

3. *Cultural Context.* The present study suggests that our understanding of menarche is largely due to the extraspective approach of natural science to the phenomenon. Women experience menarche as an exclusively female event. However, from a North American cultural perspective, menarche has consistently evoked mixed messages. The common themes that emerge from the women's experiences show that this society, over the years, has avoided dealing openly with menses, has surrounded it with silence and even interpreted it as somewhat shameful and unwholesome. All of the women felt that the subject is guarded and suppressed. Boys' jokes and derogatory terms reinforced these attitudes. Martha (1939) and Sarah (1960) experienced more negative instruction, taboo and clandestine activity than did the younger women. A survey of their responses (shame, trauma, impurity, fear of blood, depression) suggests that a greater degree of stigma and moral constraint were present in the culture at that time. However, Danielle and Laura both found the prolific advertisements of the 1980s disturbing, in that they romanticized and glossed over the real experience and excluded teenage girls. These same girls felt confusion and rejection because the subject was presented at school but denied as an adolescent reality in the larger society. In general, the women found the cultural atmosphere negative.

4. *The Body.* For all of the women, dealing with menstrual blood in this society is dirty and/or messy, and there is a great deal of concern about hygiene. In addition, they believe menstruation to be a bodily function about which one does not speak with men and boys. The girls in the 1980s seem much more concerned with their body image, describing themselves as fat, bloated and gross. Although not all of the participants expressed the same nuance of feeling, each of them reflected (in some way) displeasure with the body because of menses. Only one woman had the positive reaction of being pleased with her newly developing body.

5. *Relationships.* The demarcation of menarche in this society clearly means that a woman's relationships are no longer the same. Simultaneously, she feels drawn to some people and distanced from others. Generally, the women felt ambivalent about their social relationships. They felt separate from some of their peers and other women and yet felt a sense of identity with women through initiation into womanhood. For some women, menses brought new status and attention, honour or ambivalence from peers (especially in the 1980s), a sense of division from other age groups, and different expectations and restrictions from parents. In extreme cases, social behaviour became covert, crowds induced discomfort, and relationships were strained. The differentiation of the sexes was more acute. To have begun bleeding meant more distance and shyness with males; the older women particularly attested to this.

6. *Self-Image.* Although the onset of menses created, for the women, conflicting views of themselves, several of the images were affirming. At menarche, some of the participants felt less positive about themselves because of the dirt, guilt and shame associated with menstrual blood. However, they also felt older and had a solid sense of maturity. This landmark in female adolescence brought with it responsibility, privilege and pride. Despite the aura of negativity which surrounds menarche, self-image seems somewhat enhanced.

The women involved in this study were interested, grateful and relieved to talk about their experiences of menarche. Upon reading the analyses, the participants were amazed at how intensely and completely they were able to re-live the experience — "Oh yes, this is the way it was." They found themselves able to empathize with other women's descriptions in Table 1 and claim many as their own during the process of validating the six major themes which delineate the structure of the phenomenon.

General Discussion

Menarche as Physical

Menarche initiates physiological processes which may affect a woman's body image. The present study revealed that the physical appearance of first blood was problematic: the girls attempted to hide the evidence. Symptomatology was common. It is worth noting that only the menarcheal woman of the 1930s was expected to endure physical pain stoically (e.g., "I fainted one

morning ... and got up and went to school"). The contemporary attitude, as expressed in television commercials, encourages the use of medicine to eliminate discomfort.

According to this study, unlike women in earlier decades, menarcheal girls in the 1980s have a definite sensitivity to body image; they worry about being "fat and bloated." We might ask if this is influenced by the "slender is beautiful" image in modern-day advertising. Koff, Reirdan and Silverstone (1978) report that postmenarcheal girls display a better-defined body image and clearer sexual identification. Again, in this study, females reported feeling a clearer demarcation between boys and girls. It would be important, in future research, to determine if this is primarily a physical or psychological change.

The girls of the 1980s are much more knowledgeable about development, physiology and products. However, they stress that knowledge about the body and menstrual products is insufficient. All of the females had serious concerns about hygiene, but even the younger, better-informed females felt a need for more knowledge, professional input, and support with regard to what was happening to their bodies, their emotions and their roles as females (e.g., "I was not mentally ready. Information should come from a professional who knows about the body").

The physical experiences accompanying menarche, in this study, tend to be disconcerting and primarily negative. The women seem ashamed and uncomfortable with the blood, odour and discharge (e.g., "It seemed like an unclean thing ... I was shocked at the sight of a used napkin"). This may be due in part to the thesis expressed in our presuppositions, namely, that Western culture values mind over body. The preoccupation with hygiene underscores our preference for an abstract, idealized image of the body: some of the less controlled aspects of our physicality are disparaged and denied. On the other hand, some females also experience their bodies as participating in a normal biological cycle and they are quite pleased with their maturing looks and developing bodies.

Participants in this study reported both distance and closeness from peers, personal integration (confidence, optimism), and loosening of family ties, especially with parents. They expressed concern about being in step with everyone else; being early (Danielle, Laura) or

late (Martha) caused anxiety. Danielle and Laura reached menses before their peers and both reported distress at that point, but felt more secure and experienced later. Several quantitative studies have confirmed this pattern of experience (Jones & Mussen, 1958; Peskin, 1973).

This study suggests that the experience of menarche is not exclusively negative or positive but is ambivalent in emotional tone (honour, shame). Quantitative researchers exploring the psychological dimensions of menarche have focused on specific variables: self-concept (Garwood & Allen, 1979), identity (Greif & Ulman, 1982), and insecurity (Smith & Powell, 1956). Some of these studies (Smith & Powell, 1956; Stone & Barker, 1939) draw opposing conclusions. What may be important, from a psychological point of view, are the differences expressed between the decades. The earlier part of the century evidenced more taboos. The 1980s are apparently less secretive, yet it is in this era that women seem more intent on delaying or denying the experience of menarche, especially as it is tied to femininity, maturity and womanhood (e.g., "I didn't want to turn into a lady"). Could it be that, in the move toward increased male-female equality, the feminine way-of-being has been sacrificed? The present research suggests that menarche is a time of psychological fear and favour (e.g., "Would I always be depressed? There was more consideration from the boys"). One of our challenges is to foster an attitude and context which will permit girls to own and integrate the various energies accompanying menarche.

Social Recognition

Our study suggests that girls approaching menarche face a time of potential crisis. They receive little or no social acknowledgement (e.g., "I sensed a cultural silence"). Ignoring the importance of menarche leaves individuals alone with their fears and feelings and provides no means for their expression. Washbourn (1977) claims that a girl in our culture has two contradictory and psychologically limiting possibilities: she either identifies her new self with her body in its negative or positive aspects, or she tries to ignore the body completely by adopting a business-as-usual attitude toward it. The participants in this study tended to choose the latter option (e.g., "I pretended my period was not there ... I was supposed to go serenely through the days without being afraid of fainting").

Perhaps the most unfortunate part of menarche for a girl in this culture is the failure to facilitate this important life passage. There is no ritual and her "wise wound" is not attended to. We could learn from some of the aboriginal cultures who have a naturalistic wisdom concerning the implications of first menstruation. They "recognize" and celebrate the occasion in such a way that the girl is supplied with a symbolic interpretive framework within which to find resources for her questions of meaning. Her identity as a woman can be worked out within the context of the community; her crisis is not a fragmented, solitary struggle (e.g., "I hid the first evidence"). As the younger participants in this study pointed out, intellectual knowledge does not constitute emotional support. Even after exposure to the Health curriculum units, Laura still felt like an "alien."

To emerge gracefully from the pivotal experience of menarche, according to Washbourn (1977), a young girl must own both the negative and positive aspects of her body. The participants who fainted, hid, became anorexic, or avoided menses showed repressive, denying behaviour. We are left with a serious question: Is it possible for a female in this culture to explore the various effects of menarche and integrate them?

Historical-Cultural Recognition

Sexuality. Western society is more liberal in its attitudes towards sexuality than it used to be (e.g., earlier and greater frequency of sexual intercourse, premarital co-habitation, etc.). Despite increased exposure to such changes in attitudes, the data of this study suggest that menarche is not seen as a natural sexual transition, and girls experience an absence of emotional, psychological and professional information and support in this area of their sexuality.

The silence. Menarche is still covered with a pall of silence. Socially and culturally, there seems to be a norm about the unacceptability of this topic; free discussion of menses is avoided and suppressed. The silence itself carries a message; often it is one of fear and disdain.

Status of women. Women in our society are experiencing increased equality and status. However, it is interesting to note that, in the area of menstruation, the participants still found a need to be secretive about the event, ensure it did not interfere with daily life and

even denied it as a part of their female being. Is it possible for a woman to have dignity and self-expression when an integral part of her identity is essentially ignored? In some respects, the derogatory remarks and jokes about menses suggest the female body is inferior.

Menstrual beliefs and taboo. This culture, like others, has certain beliefs about menstruation. In spite of our scientific approach to human biology, the co-researchers reported feeling shame, embarrassment and fear at the onset of menses. Blood and bodily discharge are equated with uncleanness. Advertisements subtly underscore the taboo and, although there is a sense of momentousness at menarche among peers, the common feeling is one of restraint. Even with sophisticated rational and medical explanations, this society has a strong, and often negative, emotional reaction to menstruation.

Education. In terms of education, girls in the 1980s said that the technical information in school presentations was helpful, but it was not sufficient to allay fears. It did not provide an interpretive framework for a meaningful passage through this major female life experience. A moral question is raised: Who has the main responsibility in preparing girls for menarche? If this task falls to public education, what values and interpretation does the school system give to the experience?

Conclusion

The descriptions given by the participants in this study suggest that, within the North American culture, the phenomenon of menarche is not valued, and tends to be avoided. Although menstruation is now mentioned socially, particularly through the media, a subtle and sophisticated taboo prevails. The younger participants point to the use of wispy images, romanticized language, up-beat clothing and "super" women in advertisements. Menses inhabits the realm of fantasy; anything that may be negative, limiting, uncomfortable or messy is glossed over. The meaning and reality of menstruation in its totality is denied.

The present study provides a contextual picture; the co-existence of isolation, shame, fear and wonder are concretized. Menstrual behaviour, such as emotional fluctuation, can be seen as a natural movement in the ebb and flow of a much larger cycle rather than a

dysfunction. Women are able to sense the innuendoes, the emotional complexity and the conflicting dimensions of this life event. Silence, embarrassment, sexual discrimination, power and control, pride and feminine identity are intimately connected to menses. Finally, a sense of the experience of menarche emerges from the common themes. The phenomenological perspectives of the participants provide insight, broaden the base of interpretation and point to our need to address menarcheal study and women's issues from a more holistic framework. The validity of the present study depends not upon statistical generalizability, but on the extent to which the structure of menarche, expressed in these data, resonates with the experiences of other women (empathic validity).

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APPENDIX
DISTRIBUTION OF THEMES: ACROSS PROTOCOLS

THEMES Age in years	Danielle 15	Laura 17	Sarah 37	Martha 64
1. ORIENTATION AND PREPARATION				
No preparation in family	X		X	X
Incomplete knowledge	X	X	X	X
Physiological information	X	X		
Psychological information				
No professional help	X			X
Onset too early	X	X		
Hid first evidence		X	X	X
Dilemma, alone to cope			X	X
2. THE EXPERIENCE OF MENARCHE				
Physical pain, cramps	X		X	X
Fainting				X
Disgusting		X		
Shameful				X
Unfair, felt victimized		X		
No longer in pure state		X		
Secretive, private	X	X	X	X
Burden, nuisance	X	X		X
Awkward, anxious		X	X	X
Shy, self-conscious	X	X	X	X
Embarrassed	X	X	X	X

APPENDIX (continued)
DISTRIBUTION OF THEMES: ACROSS PROTOCOLS

<i>THEMES</i> <i>Age in years</i>	<i>Danielle</i> <i>15</i>	<i>Laura</i> <i>17</i>	<i>Sarah</i> <i>37</i>	<i>Martha</i> <i>64</i>
<i>2. THE EXPERIENCE OF MENARCHE (continued)</i>				
Scared	X	X		X
Trauma				X
Humiliated	X	X		
<i>3. CULTURAL CONTEXT</i>				
Culturally unimportant	X		X	
Subject guarded, suppressed, undiscussed	X	X	X	X
Caused social discomfort		X		X
Considered shameful, hidden	X	X		X
Peer horror stories		X		
Code name, euphemisms	X		X	
Boys' jokes, derogatory terms	X	X	X	
Exclusively female subject	X		X	
Indirect and mixed messages		X	X	
Clandestine, cultural silence			X	X
Unwholesome, negative injunctions, taboo			X	X
Enjoined to be stoic				X
Sense of exclusion			X	
Social landmark		X	X	
Disliked advertisements, disturbing	X	X		
Commercials for adults excluded teens	X	X		
Commercials emphasized products	X			
<i>4. THE BODY</i>				
Hygienic concerns	X	X		X
Gross feeling; fat/bloated body	X	X		
Dirty, unclean, messy	X	X	X	X
Tampons disgusting		X		
Felt deformed, disliked appearance		X		
Ashamed of body		X		X
Bodily changes			X	
Body more private, reserved		X	X	
Pleased with looks and developing body				X

APPENDIX (continued)
DISTRIBUTION OF THEMES: ACROSS PROTOCOLS

<i>THEMES</i> <i>Age in years</i>	<i>Danielle</i> <i>15</i>	<i>Laura</i> <i>17</i>	<i>Sarah</i> <i>37</i>	<i>Martha</i> <i>64</i>
5. RELATIONSHIPS				
Evasive, uneasy behaviour in public		X		X
Sexes more distinguished	X	X	X	
Females comradery, bond		X	X	
Separated from older women and peers		X		
Not discussed with boys/males		X	X	X
Envied men's freedom, luck	X	X		X
Hated boys		X		
More consideration from boys				X
No cross-generational discussion				X
Stricter parental control				X
Status and attention	X	X		
More experienced than peers not menstruating	X			
Separate, yet honoured		X		
Strange		X	X	
Angry, resentful	X	X		X
Felt worthless		X		
Feared blood, loss of control				X
Fear of pregnancy	X			
Denied or rejected menses		X		X
Wanted menses and responsibility only later	X	X		
Felt pressure		X		
Controlled blood flow, anorexic		X		
Depressed				X
Limited activity	X	X	X	X
Rejected womanhood		X		
Not dangerous	X			
Felt older, grown up	X	X	X	X
More security, closer to independence	X			X
Big event		X	X	
Sense of initiation, womanhood			X	
Bonded with females and peers	X		X	
Part of something bigger, normal cycle			X	

APPENDIX (continued)
 DISTRIBUTION OF THEMES: ACROSS PROTOCOLS

<i>THEMES</i> <i>Age in years</i>	<i>Danielle</i> <i>15</i>	<i>Laura</i> <i>17</i>	<i>Sarah</i> <i>37</i>	<i>Martha</i> <i>64</i>
<i>5. RELATIONSHIPS (continued)</i>				
Felt more optimistic				X
Relieved the anxiety of waiting	X			
Divided from younger people				X
Moody, rebellious				X
Created distance from mother			X	
Ambivalent with peers	X	X		
<i>6. SELF-IMAGE</i>				
Enhanced self-image	X			
Privileged	X			
Important and proud		X		
Older	X			
More mature	X		X	
More responsible	X			
Inadequacy and guilt of not coping				X
Ashamed of being a woman		X		X
Dirty	X	X		