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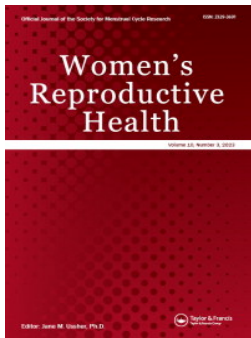
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Taking Charge of the Menstrual Cycle: Discourses of Menstruation and the Menstruating Body in Self-Help Literature

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ABSTRACT

Earlier research has shown that menstruation has often been constructed as a nuisance or a pathology in popular and medical texts. Drawing on poststructuralist discourse analysis of 10 contemporary self-help books on menstruation, 4 of which were chosen for further analysis, this article shows how approaches to menstruation in recent self-help texts diverge from these conceptions. Instead of portraying menstruation as something problematic, self-help texts represent the menstruating body as natural, manageable, and potentially empowering. However, by depicting relentless self-monitoring and self-care as routes to mandatory health and well-being, menstrual self-help texts also construct new norms of menstruating that contribute to individualized responsibility.

KEYWORDS

Menstruation; menstrual cycle; self-help; empowerment; discourse analysis

Introduction

A simple act of revolution is to learn about your body, to get to know the terrain of your cycle, and to take charge of your own health. (...) Our bodies have long been weaponised against us and used to keep us out of positions of influence and power, but the red tide is turning and it's time for us to take advantage of what our hormones can do for us (Hill, 2019, p. 8).

The quote above ends the introductory chapter of Maisie Hill's best-selling book *Period Power: Harnessing the Power of the Menstrual Cycle* (2019). Discussing the menstrual cycle and the hormonal changes steering it, the quote demonstrates how Hill's text establishes menstruation as a potentially empowering process and presents knowledge about the menstrual cycle as imperative for both individual health and social change. But how is the book's approach to menstruation constructed? And why does it matter how we understand the menstruating body?

Half the world's population menstruates for a large part of their lives. Yet menstruation is often considered unpleasant, unhealthy, or a nuisance requiring management (e.g., Bobel, 2010; Fahs, 2020). Historically, both menstruating as well as not menstruating have been considered pathological states (Martin, 1993; Strange, 2000). These

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negative representations of menstruation have been argued to contribute to menstrual stigma and to women perceiving themselves and their bodies as “messy, unruly things” requiring continuous medical and cosmetic modification (Bobel & Kissling, 2011, p. 123). In addition, menstrual stigma has been suggested to hinder women’s willingness to seek medical care for menstrual problems, delaying diagnosis and treatment of endometriosis, for example (Seear, 2009).

This negativity around menstruation has been countered with calls for positive messages and interventions that “promote the body as a source of power, pleasure, and potential” (Bobel & Fahs, 2020, p. 965). Alongside overt forms of menstrual activism, a growing number of books, podcasts, and courses address menstruation as a wrongfully stigmatized part of menstruators’ lives. Advocating self-care practices and lifestyle changes as the means to achieve better periods and a better life, these texts, and the practices around them, are what I call “menstrual self-help.” Following Heidi Rimke (2000), I use the term “self-help” to denote forms of voluntary self-improvement that seek better self-understanding through various expert-suggested techniques.

This article presents a poststructuralist analysis of contemporary menstrual self-help texts conducted in two stages. Exploring 10 recent self-help books on menstruation, 4 of which were chosen for further analysis, the article argues that discourses of menstruation in self-help generally depart from popular ideas and medical depictions of menstruation as problematic. Instead, self-help texts construct menstruation and the menstrual cycle as naturally beneficial, manageable, and potentially empowering processes. The texts assign agency to menstruators and present them as being in charge of their bodies. However, the analysis also shows how menstrual self-help texts participate in normalizing certain forms of bleeding while demonstrating others, such as bleeding on hormonal birth control, as problematic or unnatural. By doing so, they depict sexual and reproductive health as an individual’s responsibility maintained through relentless self-monitoring and self-care.

Although self-help texts have received attention in diverse disciplines (e.g., Rimke, 2000; Riley et al., 2019), including some work on menopause (Lyons & Griffin, 2003) and PMS (Chrisler, 2008), general menstrual self-help has not been previously analyzed. However, the authors of the self-help books chosen for this research are followed on social media by tens of thousands of people (August 27, 2021), and many of the books are bestsellers in menstrual health. Therefore, analyzing this literature is relevant for exposing dominant—and contesting—understandings of women’s bodies (see Lyons & Griffin, 2003). As Katie Ann Hasson (2016) has argued, research has not focused enough on the definitions of menstruation or on how those definitions uphold certain ideals and practices. This study fills that gap by examining the dominant approaches to menstruation in self-help texts and exploring how self-help discourses participate in the reproduction and regulation of menstruating bodies. Because menstruation has been constructed as a defining characteristic of female bodies in both medicine and popular culture (Hasson, 2016), an analysis of the discourses of menstruation aids in understanding broader “discursive struggles over woman’s reproductive body” (Hennessy, 1993, p. xvi).

The article is structured as follows: The next section briefly reviews research on women’s bodies in medicine and self-help. The subsequent section introduces the methodology. The analysis section describes the findings from the two stages of analysis, while

the final section discusses these findings. The article concludes that although the examined self-help texts forcefully depathologize the menstruating body, they also construct new norms of menstruating that demand never-ending self-monitoring and assign responsibility for sexual and reproductive health on individuals.

Literature Review

Healthy menstruation is often characterized in both medicine and popular culture by regular, monthly bleeding (Hasson, 2016). Yet numerous studies show how medical texts frame menstruation as inherently problematic or pathological (e.g., Bertotti et al., 2021; Martin, 1993). Historical accounts of women's bodies in medicine have demonstrated how both menstruation and the lack thereof have been presented as disorders (Martin, 1993; Strange, 2000). Equally ambiguously, both heavy and scanty menstrual flow have been considered disorderly (Crawford, 1981; Strange, 2000). What popular and medical beliefs have shared over time, however, is the view of the female body as "a field for the definition of 'difference'" (Strange, 2000, p. 625).

Medical texts have compared the female body to malfunctioning manufacturing machinery by portraying menstruation as "failed production" or "production gone awry" (Martin, 1993, pp. 45–46). As Emily Martin (1993) has argued, representing menstruation not as something that women do but as something that happens to them has strengthened the idea of the woman as passive and the self as separate from the body. Additionally, the construction of premenstrual distress in medicine and popular culture has sustained the idea of women as "out of control" prior to or during menstruation (e.g., Martin, 1993; Ussher & Perz, 2019). Furthermore, the recommendation model of contraceptive methods that focuses on eliminating "user-error" continues to portray women as "vulnerable to their reproductive bodies" (Bertotti et al., 2021, p. 5). By depicting menstruation and ovulation as risky, hormonal contraceptives are shown to protect women from their own bodily processes (Bertotti et al., 2021). Similarly, various studies have demonstrated how period product advertising and the popular press have presented menstruation as a negative obstacle that women must overcome or need protection from (e.g., Kissling, 2006).

To counter negative discourses of menstruation, feminist movements and activists have introduced several methods ranging from gynecological self-help to educational pamphlets and zines (Bobel, 2010; Copelton, 2004; Fahs, 2016). For example, the women's health movement in the late 1960s and 1970s encouraged self-help practices such as vaginal self-examination to demystify the female body and to transfer power from medical authorities to women (Copelton, 2004; Murphy, 2004). Self-help served to reframe variations from averages or so-called normals as "accidental, not pathological" (Murphy, 2004, p. 134) and aimed to give women more control over their bodies and lives (Bobel, 2008).

Knowledge of menstruation is now gained largely through diverse period and fertility applications (e.g., Hamper, 2020; Lupton, 2015). Depicted as increasing women's self-understanding (see Lupton, 2015), "[d]igital fertility tracking relies on the idea that 'better data' offers a means for gaining control over reproductive health and lives" (Hamper, 2020, p. 7). However, gaining control through tracking also requires constant

self-surveillance, which necessitates time and effort (Hamper, 2020). Nikolas Rose has argued that the requirement of self-surveillance is characteristic of contemporary Western society placing responsibility for health and well-being on citizens themselves (Rose, 2001). By stressing women's personal responsibility in recognizing ovulation (Hamper, 2020) and in "managing" menopause (Lyons & Griffin, 2003), forms of self-tracking and self-help contribute to the demands of constant self-monitoring in the pursuit of well-being (Lupton, 2015; Lyons & Griffin, 2003; Rimke, 2000).

This study explores menstrual self-help literature in relation to these contemporary demands for self-care and the negative constructions of women's bodies in medicine and popular culture, while acknowledging the important role of self-help in feminist movements. The article argues that contemporary menstrual self-help forcefully contests the idea of menstruation and the menstruating body as disorderly. However, its discourses also construct new norms of menstruation that require constant self-monitoring and that naturalize certain forms of periodical bleeding while pathologizing others.

Poststructuralist Theory and Methodology

The study takes a poststructuralist approach to the analysis of discourse. I follow Nicola Gavey (2011, p. 187) in understanding poststructuralist discourse analysis not as a straightforward method or theory but as "a process of asking theoretically informed questions." This section describes those theoretical premises and the methods used to pursue the answers.

The study adopts a view of the body and its processes, including menstruation, as socio-political, cultural, and historical products reproduced and regulated through diverse norms (Bordo, 1993; Grosz, 1994). The poststructuralist approach seeks to demystify the naturalness of these norms and uncover ways in which the production of knowledge about menstruation and the menstruating body may encourage and/or discourage certain thoughts and modes of action (Foucault, 1988; Rose, 1999). Regardless of the intentions of the authors of menstrual self-help, the language applied in discussing the menstruating body has an impact on "how we understand, experience, and intervene in it" (Hasson, 2016, p. 959).

The focus of the study is on discourses understood as the systematic ways in which texts "form the objects of which they speak" (Foucault, 1972, p. 49). Discourses contain the potential for change, yet they also entail certain dangers as they may build on exclusionary standards for what is normal or necessary (Foucault, 1984). As Susan Bordo has argued, the key to understanding how the body can both "serve dominance" and function subversively comes from Foucault's conceptualizations of power as both a productive force encouraging voluntary "self-correction to norms" and a network containing the potential for resistance (Bordo, 1993, pp. 191–194). Exploring the discourses of menstruation in self-help therefore enhances understanding of forms of self-management and potential resistance to medical and popular views on the (dis-)functioning of the menstruating body.

The study is guided by two questions:

1. What are the dominant discourses of the menstruating body in contemporary menstrual self-help texts?

2. What kind of knowledge do contemporary menstrual self-help texts produce about menstruation and the menstruating body, and how?

The Analyzed Materials

The material for the study consists of 10 recent self-help books on menstruation, 4 of which were chosen for further analysis. The books were located through online searches for popular books on menstruation. In addition, I checked the references of the books that I found through the online searches. I conducted the searches on WorldCat.org, Google.com, Amazon.co.uk, Amazon.com, and Goodreads.com with the following search words in different combinations: “menstruation,” “periods,” “menstrual cycle,” and “self-help.” My focus was on literature from the past 10 years, as I wanted to explore the contemporary context in which menstruation has become more prominent in the media and public debates (e.g., Bobel & Fahs, 2020). To qualify as menstrual self-help, the books needed to indicate life improvement, whether physical, emotional, or spiritual, through addressing the menstrual cycle or offer advice and tips on how to manage menstruation. I excluded books that focused on a particular moment or problem related to menstruation (such as menarche, menopause, or polycystic ovary syndrome). These criteria provided me with a list of 10 books for first-stage analysis (Table 1).

A major limitation of the material is that all the books are in English and written by people living in majority English-speaking countries. The analysis is therefore specific to that sociocultural sphere. Five of the books were from the UK and Ireland, three from

Table 1. The analyzed texts.

Books	Authors' self-descriptions
Baker, C. (2020). <i>50 THINGS YOU NEED TO KNOW ABOUT PERIODS. Know your flow and live in sync with your cycle.</i> Pavilion Books.	Period coach
Briden, L. (2018). <i>Period Repair Manual. Natural Treatments for Better Hormones and Better Periods</i> (2nd edition). Greenpeak Publishing.	Naturopathic doctor
Hendrickson-Jack, L. (2019). <i>The Fifth Vital Sign. Master Your Cycles & Optimize Your Fertility.</i> Fertility Friday Publishing Inc.	Expert in fertility awareness
Hill, M. (2019). <i>Period Power: Harness Your Hormones and Get Your Cycle Working for You.</i> Bloomsbury Publishing plc.	Women's health specialist
Jardim, N. (2020). <i>Fix Your Period. Six Weeks to Life-Long Hormone Balance.</i> Vermilion.	Women's health coach
Laird, A. (2019). <i>Heavy Flow. Breaking the curse of menstruation.</i> Dundurn.	Holistic health practitioner
Lister, L. (2020). <i>Code Red: Know Your Flow, Unlock Your Super Powers and Create a Bloody Amazing Life. Period</i> (2nd edition). Hay House.	Former journalist, “witch,” life expert
Pearce, L. (2015). <i>Moon Time. Harness the Ever-Changing Energy of Your Menstrual Cycle</i> (2nd edition). Womancraft Publishing.	Author and expert in women's work
Pope, A., & Hugo Wurlitzer, S. (2017). <i>Wild Power. Discover the Magic of Your Menstrual Cycle and Awaken the Feminine Path to Power.</i> Hay House.	Psychotherapists and trainers in “menstruality”
Vitti, A. (2014). <i>WomanCode: Perfect Your Cycle, Amplify Your Fertility, Supercharge Your Sex Drive, and Become a Power Source.</i> HarperOne.	Holistic health coach

North America, and two from Australia. All the authors identified as women. The authors' descriptions of themselves ranged from experts in nutrition and women's health to psychotherapists and life experts in menstruation (Table 1).

The Analytical Procedure

The analysis was carried out in two stages. In stage one, I read the 10 books carefully, underlined passages defining menstruation and the menstrual cycle, and answered a set of 10 questions on each book, including "How is menstruation defined?", "How and why should one track the menstrual cycle?", and "What is the stated purpose of the book?" The objective of the first-stage analysis was to identify the main approaches to menstruation in the texts. By approaches, I mean the general and explicit conceptualizations of menstruation and the menstrual cycle. For example, books on menopause have either focused on their subject as a biomedical process or stressed women's own voices, while placing less emphasis on medical treatments (Lyons & Griffin, 2003). I searched for analogous differences and found that the books generally approached menstruation as a psychophysical or a psychospiritual process.

Based on the first-stage analysis, I chose four texts, *Period Power* (Hill, 2019), *Wild Power* (Pope & Hugo Wurlitzer, 2017), *Moon Time* (Pearce, 2015), and *Period Repair Manual* (Briden, 2018), for a second-stage analysis of language and structure to identify the dominant discourses of the menstruating body in the texts. By discourses, I mean the more systematic and nuanced ways in which the texts construct the menstruating body (Foucault, 1972). The texts were chosen based on the following criteria. First, I wanted them to represent both approaches to menstruation identified in the first-stage analysis. Second, I sought the most popular or influential texts. Since I was unable to retrieve the sales figures for the books, I used the number of reviews that the books had received on online platforms combined with the number of followers each author had on social media platforms as an indicator of the reach and impact of the texts (as of August 27, 2021). Additionally, I noted whether or when the authors had quoted each other. From the first-stage analysis, and having participated in menstrual self-help courses and familiarized myself with their materials online, I concluded that the four books chosen represented the field as accurately as possible.

From the four texts, I extracted all passages in which menstruation or the menstrual cycle was described. I also explored how the reader was addressed and how self-care suggestions were made. I used Atlas.ti to code, categorize, and analyze the excerpts (77 pages). The analysis consisted of an iterative process of comparing earlier research on menstruation and poststructuralist discourse analysis with the extracted passages from the material. In particular, I found Lyons and Griffin's (2003) work on self-help texts on menopause highly useful for structuring the analysis. Finally, I drew the findings from the two stages of the analysis into a framework that illustrates the main approaches to menstruation in the 10 books, and the discourses of the menstruating body identified in the 4 books that were subjected to further analysis (Table 2).

Because poststructuralist analysis does not seek objective truths about the materials (Foucault & Colin, 1980), self-reflexivity formed an important part of the analytical procedure (Gill, 1995). To ensure a high level of self-reflexivity, I kept a research diary in

which I noted my initial thoughts about the texts and regularly checked that—where possible—my analysis included counterarguments to my own responses (see Nadin & Cassell, 2006). That said, my own position as a White, able-bodied, menstruating cis-female social science scholar in my 30s contributes to how I approached the texts. For example, I took the perspective of someone at whom the texts are explicitly directed. The texts address their reader mainly as a woman and suggest treatment methods and lifestyle changes that are within my reach. If I were nonbinary, postmenopause, or unable to choose what I eat and when, I may have chosen to explore more critically the texts' (de)construction of appropriate femininity in relation to age or certain bodily functions, for example, or focused on inequality in the texts' recommendations about foods and supplements. The analytical choices also stem from my interest in the individual and the social impact of self-monitoring. This interest has arisen from my experiences in menstrual self-help courses and from keeping a period diary on and off for years. Ultimately, the study does not assess the scientific quality of the examined books or their self-help methods. Instead, my background in social sciences directed me to explore how the texts construct menstruation and the menstruating body.

Analysis

The first stage analysis of all 10 books enabled the separation of two main approaches to menstruation. On the one hand, menstruation was portrayed in the texts as a vital psychobiological process and, on the other hand, as an important psychospiritual process. The second-stage analysis focused on four books and allowed the identification of three distinct but interlinked discourses of the menstruating body: a naturalness, a management, and an empowerment discourse. The next section presents the two approaches to menstruation, and the section after that details the three discourses of the menstruating body identified in both approaches.

The Two Main Approaches to Menstruation

All the texts advocate a holistic view of the menstrual cycle, of which menstruation is only a part—albeit a central one. The texts present cyclicity as a defining characteristic of menstruating bodies and stress that menstrual issues can only be addressed through rigorous menstrual cycle tracking or awareness that takes place throughout the menstrual cycle. Furthermore, although almost all the texts acknowledge that not all women menstruate and not only women menstruate, most of the texts address their reader mainly as a woman, with notable exceptions in Hill (2019) and Laird (2019).

However, two main approaches to menstruation can be identified in the texts. In the first approach, menstruation is presented primarily as a psychobiological process, described as “a vital sign” of health (see also The American College of Obstetricians & Gynecologists, 2015). In the second approach, menstruation is depicted as primarily a spiritual process. Although the biological aspects of menstruation are acknowledged, this approach focuses more on the psychospiritual features of menstruation. The two approaches are not mutually exclusive; although many of the texts focus on one

approach over the other, they also combine insights from the other when discussing different aspects of menstruation.

The key idea of the first approach is that the menstrual cycle is a vital sign comparable to heart rate and blood pressure, for example (e.g., Briden, 2018, p. 4; Hendrickson-Jack, 2019, p. 2; Jardim, 2020, p. 3). A consistent menstrual cycle signals the presence of a healthy reproductive system that mirrors the menstruator's—most often, the woman's—overall health. The texts describe a normal menstrual cycle as lasting between 24 and 35 days (in some 21–34 days), including “successful” ovulation, two to seven bleeding days, and minimal symptoms before or during the period. Any regular deviations from one's own normal or, in some cases, a general “optimal” (Hill, 2019, p. 270) are considered at least somewhat problematic and as warranting treatment (e.g., Briden, 2018; Hendrickson-Jack, 2019). Instead of seeing period pain or premenstrual symptoms as normal in a phenotypical female body or as pathological conditions necessitating medications, they are presented as indications of hormonal imbalances (e.g., Hill, 2019, Vitti, 2014), deficiencies, or underlying health conditions that need to be treated (Briden, 2018, p. 87).

The main idea guiding the second approach is that the menstrual cycle is a powerful spiritual process (Lister, 2020; Pearce, 2015; Pope & Hugo Wurlitzer, 2017) that guides and protects the menstruating individual. It functions as a “compass” that helps one to understand diverse psychological, physical, and spiritual changes and to adjust to them (Pearce, 2015, p. 1, 18–23). In this approach, menstruation is presented as a defining characteristic of women by describing it as central to their “psychological and spiritual architecture” (Pope & Hugo Wurlitzer, 2017, pp. xxvi) or by depicting menarche as an “entry into womanhood” (Pearce, 2015, p. 111). Menstrual pain and premenstrual symptoms are understood as ways for the body to signal suppressed feelings or a lack of respect for the cycle (Pearce, 2015, p. 81; Pope & Hugo Wurlitzer, 2017, pp. 198–199). Menstrual problems are also considered to demonstrate Western societies' denial of the power held in women's bodies (Pope & Hugo Wurlitzer, 2017, p. 201).

The Three Main Discourses of the Menstruating Body

The second-stage analysis enabled the identification of three main discourses of the menstruating body in the 4 texts examined. These discourses present the menstruating body, first, as a marvel of nature (the naturalness discourse); second, as an object of and tool for management (the management discourse); and third, as a source of embodied knowledge and power (the empowerment discourse). Table 2 illustrates how these three discourses intersect with the two approaches to menstruation described above. These intersections are further examined in the following subsections.

Table 2. Approaches to menstruation and discourses of the menstruating body.

Discourses of the menstruating body	Approaches to menstruation	
	Menstruation as a vital sign	Menstruation as a spiritual process
Naturalness	Menstruation as naturally beneficial for the body	Menstruation as natural and necessary for the soul
Management	Menstrual cycle as an object of management	Menstrual cycle as a tool for self-management
Empowerment	Taking charge of one's health	Surrendering to the cycle

The Naturalness Discourse

This book is my message to you that you are lucky to be in a female body and have female hormones (Briden, 2018, p. vii).

The first and most easily distinguishable discourse in all the four texts is the naturalness discourse. Here, menstruation is constructed not only as natural but also as inherently beneficial due to its naturalness. The two approaches to menstruation emphasize slightly different aspects of naturalness. On the one hand, the approach that considers menstruation a vital sign of health stresses the physiological benefits of the hormonal changes related to the menstrual cycle. For example, ovulation appears here as naturally beneficial, contrary to the view of incessant ovulation as wasteful and damaging (see Bertotti et al., 2021). The process of ovulation is claimed to have so many benefits that “When it comes to period health, it’s all about ovulation” (Briden, 2018, p. 10). In addition, menstruation is presented as “a natural time (...) to rest and recharge” and, as such, a psychophysically restorative process (Hill, 2019, pp. 70–74).

On the other hand, the approach that focuses on the spiritual aspects of menstruation considers menstruation necessary for the soul and spirit of the individual. It is described as “a normal, healthy process *and* our original spiritual practice” (Pope & Hugo Wurlitzer, 2017, p. 196). The menstrual cycle is depicted as a natural part of being a woman, with each part of the cycle enabling access to a particular form of power. Lucy Pearce states that:

Our menstrual cycles connect our female bodies directly to nature. Our cycles ensure that we do not live static lives. Instead they demand that we live dynamically, constantly exploring the different gifts of feminine power that each portion of our cycle holds (Pearce, 2015, p. 18).

The natural benefit of both ovulation and menstruation is also reflected in how both approaches forcefully oppose the use of hormonal contraceptives. Hormonal birth control is said to “distort your hormonal rivers” (Briden, 2018, p. 16), to “shut down this important natural cycle” (Pope & Hugo Wurlitzer, 2017, p. xxxi), and to create “an artificial state of being” (Pearce, 2015, p. 53). Whereas the approach that focuses on menstruation as a vital sign stresses the problems of hormonal contraceptives for physical and emotional health, the approach that emphasizes the spiritual aspects of menstruation highlights how the use of hormonal contraceptives may prevent the menstruator from accessing the spiritual powers of menstruation and/or their true self. All the texts stress that only bleeding that follows ovulation should be considered menstruation. Bleeding on hormonal birth control is not considered “real” menstruation, as hormonal contraceptives often impede ovulation. In her research on menstrual suppression, Katie Ann Hasson (2016) found that the separation of “pill bleeds” from “real periods” functioned as a tactical move to make menstrual suppression more acceptable for women. In menstrual self-help, this separation functions in the opposite way: Not accepting pill bleeds as real periods is used to argue that since the medications impede the natural functioning of the body, the use of hormonal contraceptives is unnatural and harmful.

The texts also emphasize the naturalness of menstruation by linking it to diverse natural phenomena. Periods are presented as evidence of the menstruating body’s “internal tides” (Hill, 2019, p. 62), and hormonal patterns are described as “hormonal rivers” (Briden, 2018,

p. 11). Menstrual bleeding is described as a vital part of the “whole-body ecosystem” (Briden, 2018, p. 307). The approach that stresses the spiritual aspect of menstruation also relies on the seasons of nature as an analogy for the menstrual cycle. Each season is said to carry its natural superpowers and vulnerabilities that should be considered when organizing life (e.g., Pope & Hugo Wurlitzer, 2017, p. 7). Describing the abilities of menstruating individuals as both natural and supernatural demonstrates how the cycle is depicted as allowing access to a higher power through its ability to ground the menstruator in nature.

Finally, the naturalness discourse is constructed through the remedies and treatments suggested for period problems. The texts advocate “natural period repair” (Briden, 2018, p. 9), “real nourishment” (Pearce, 2015, p. 97), and “natural remedies” (Pope & Hugo Wurlitzer, 2017, p. 223) instead of pharmaceuticals. However, the texts also recognize that certain difficult period-related illnesses such as endometriosis and adenomyosis may need medical treatment. To summarize, although the two approaches to menstruation present slightly different views of the benefits of menstruating, both rely on and sustain the idea that “real” menstruation, only taking place after ovulation, is beneficial and necessary since it is a natural process of female bodies. Any medical intervention that impedes ovulation is considered unnatural and often unnecessary or harmful for the menstruating person’s body and/or spirit.

The Management Discourse

Cycle awareness helps you to feel and respond to your changing mood and energy, which creates an inner stability and flexibility that allows you to be kind towards yourself. It gives you a way to create a menstrual map of your month and a way to plan your diary. It gives you instruction on how to care for yourself and capitalise on each phase of your cycle (Hill, 2019, p. 51).

The management discourse constructs the menstruating body as both an object of management and a tool for self-management. In the approach that focuses on menstruation as a vital sign, the menstrual cycle and menstruation function as signaling systems that can be used to detect problems in health and well-being. Periods are managed through tracking the cycle and committing to self-care practices and lifestyle changes. As Lara Briden (2018, p. 7) argues, “It is always like this: fix your health, and you will fix your period.”

In the psychospiritual approach, the menstrual cycle is presented as an in-built management tool that helps one become happier and more efficient. By organizing one’s life according to the cycle, one can feel more energetic, more productive, and more at peace with oneself. For example, discussing the physiological and psychological changes related to the menstrual cycle, Lucy Pearce states that:

These changes are biological. Measurable. They are most definitely not “all in your head” as many would have us believe. That is why it is so crucial to honour these changes by adapting our lives to them as much as possible (Pearce, 2015, p. 11).

Similar to Oinas’s (1998, p. 64) findings on menstruation in medical advisory columns, the management discourse presents the menstrual cycle as a somewhat autonomous “thing.” On the one hand, the texts describe the cycle as an object that can be monitored and optimized (e.g., the cycle as “a monthly report card” [Briden, 2018, p.

4]). On the other hand, the cycle is presented as an entity that sets the rhythm for the menstruating person's physical, emotional, and spiritual state (e.g., the cycle as a "container" [Pope & Hugo Wurlitzer, 2017, p. 20] or "a compass" [Pearce, 2015, p. 1]). In both cases, attention to the cycle enables increased productivity through better understanding of the cycle and the self.

Both approaches to the management discourse stress that since each cycle is unique, attaining knowledge of one's body and mind requires detailed and continuous attention to various signs and symptoms. The four texts discuss this as menstrual cycle tracking or menstrual cycle awareness depending on their approach. Both approaches emphasize that one can choose any method of tracking: an app, a journal or, for example, a moon chart if it allows one to observe and note down changes in the body, mind and, in some cases, spirit. Typical of self-help more generally, menstrual cycle tracking or menstrual cycle awareness is presented as a method for obtaining a better life (see Riley et al., 2019).

On the one hand, the texts that stress the physiological aspects of menstruation present menstrual cycle tracking as detective work in which knowledge of health is pieced together from small, detailed pieces of information. Like other forms of self-help, the information gained through self-tracking can or should then be compared with given parameters for what is considered normal and used to assess the need for treatment (see Ebben, 1995). For example, Briden (2018, p. 73) asks her reader: "How is your monthly report card looking? If it's different from what I described in this chapter, then you need treatment." In this case, treatment means modifying one's diet and exercise routine or supplementing it with vitamins and minerals to ensure consistent ovulation. Deviations from the suggested normal are not depicted as pathological but, when consistent, as clues to underlying pathologies.

On the other hand, the approach that focuses on the spiritual nature of menstruation argues that rather than striving for normality, one should practice menstrual cycle awareness to appreciate one's cycle as it is and to manage daily life. Charting is said to reveal internal patterns and to make one more aware of one's "eating, self-care regime, energy levels[,] and fertility" (Pearce, 2015, p. 42). However, it is also suggested that awareness of the cycle can lead to the regulation of periods, presented as a positive development (Pope & Hugo Wurlitzer, 2017, p. xxx). In both cases—as in other forms of self-help—self-examination is presented as a method of becoming "an expert in one's own selfhood" (Rimke, 2000, p. 62).

Finally, the management discourse depicts the menstruating body as highly responsive to adjustments and understandable when sufficient attention is paid to the cycle. This view diverges from popular or medical depictions of women's bodies as risky or unruly. By discussing fertility and signs of fertility as an expression of health (e.g., Briden, 2018, p. 17; Hill, 2019, p. 31), fertility is presented as something that women should harness for their own benefit rather than suppress with hormonal contraceptives. As Lara Briden (2018, p. 39) puts it: "You are a modern, smart woman. (...) Avoiding pregnancy is not as mysterious or difficult as it has been made out to be." Although the statement stresses women's ability to prevent pregnancy without resorting to medical expertise, it also somewhat denies the experiences of those who have become unwillingly pregnant even when following all necessary

precautions. Furthermore, constructing fertility as an expression of health that needs maintenance establishes infertility as, to some extent, a result of insufficient attention to health and well-being.

To summarize, when the menstruating body is considered an *object* of management, the texts suggest a range of self-care practices to support ovulation and the more general health of the body and mind. These methods range from vitamin and mineral supplements to the avoidance of and preference for certain foods to ailment and stress relief. When the menstruating body is understood instead as a *tool* for self-management, the focus is on utilizing the cycle and the knowledge gained from cycle awareness to manage daily life. In both cases, being constantly aware of which phase of the cycle one is in is depicted as essential for maintaining health and well-being.

The Empowerment Discourse

In order to reclaim our full selves, to integrate each of these aspects through which we pass over the course of our lives, we must first learn to embrace them through our cycles (Pearce, 2015, p. 25).

Firmly linked to both the naturalness and management discourses, the empowerment discourse constructs the menstruating body as a source of embodied knowledge and power. Unlike in the management discourse, where the cycle functions as an object of or a tool for daily life management, the empowerment discourse depicts the cycle as communicating a deeper physical, emotional, and spiritual power. Again, this discourse comes into being in two slightly different ways depending on how menstruation is conceptualized. Within the approach that presents menstruation as a vital sign of health, the menstrual cycle is presented as the body's unique way of communicating health, stress, joy, and other needs or imbalances. Being aware of diverse changes in the body is described as being "in the driver's seat of your health and life" (Hill, 2019, p. 50). People with periods are shown to gain control by improving their "body literacy" (a term coined by Laura Wershler and quoted by both Briden [2018] and Hill [2019]). Empowerment means being able to decipher the messages conveyed by the body and to express oneself to medical professionals (e.g., Briden, 2018, p. 11) or fight against various forms of discrimination (Hill, 2019, pp. 153–157). This empowerment follows from rigorous charting followed by self-help practices that repair imbalances and allow more self-understanding.

The approach that focuses on the spiritual aspects of menstruation similarly acknowledges the menstrual cycle as a communicative system. However, whereas the first approach represents the cycle as something that can or should be repaired, the second approach stresses the importance of surrendering to the cycle. By accepting the so-called "natural limits" of the cycle, one can use it to find one's "Wild Power," described as "a holy intelligence that holds the blueprint of who you are and your highest potential," that is, a higher power guiding one's path in life (Pope & Hugo Wurlitzer, 2017, p. xiii; 7). Similar to Heidi Rimke's (2000, p. 64) findings on self-help texts, power is represented as an independent property located within, which can be accessed through self-exploration. And since the menstrual cycle is presented as unique to each person, changes in the cycle must be identified by self-examination. As one text describes the

process, “I cannot lead you towards self-knowledge. Only you can do that. I can offer candles and matches. But you must light them” (Pearce, 2015, p. 4). In both cases, the idea of the cycle as embodied knowledge and a path to empowerment presents (a certain kind of) femininity as non-pathological (cf. Ebben, 1995; Riley et al., 2019).

The two approaches stress the communal aspect of empowerment in slightly different ways. The psychophysical approach constructs empowerment mainly as an individual process, although it suggests that appreciating menstrual changes can help to build “camaraderie” with other women (Briden, 2018, p. 286; see also Hill, 2019, p. 5). In the spiritual approach, the importance of community is more pronounced. The texts recommend organizing so-called red tent gatherings or women’s circles to “discover that we’re not mad and that the deep and powerful states possible in all phases of the cycle are real and normal” (Pope & Hugo Wurlitzer, 2017, p. 197). The red tent, meant for “all who identify as women,” is presented as “a forum for sharing knowledge, creative activities, ceremony[,] and interaction” (Pearce, 2015, pp. 138–140). Although there is a certain resemblance to earlier feminist self-help practices that relied on women coming together and working in groups (Murphy, 2004), the practices suggested in the texts mainly focus on personal transformation and improving one’s own life conditions rather than advocating structural social change (e.g., Pearce, 2015, p. 139; cf. Copelton, 2004).

Finally, the empowerment discourse is constructed in relation to menstrual stigma in Western societies. Both approaches use positive words and metaphors for menstruation that actively challenge the view of menstruation as problematic. The menstrual cycle is, for example, presented as “a highly potent, potentially liberating process” (Pope & Hugo Wurlitzer, 2017, p. xiii) and the corpus luteum formed after ovulation as “dynamic, vital tissue” (Briden, 2018, p. 63). The texts describe how the endometrium is actively “shed” (Briden, 2018, p. 67) during menstruation and how after the start of the period, the womb starts its “grand remodelling process” (Hill, 2019, p. 32). Both approaches also argue that the menstrual stigma is maintained by complex social practices which, on the one hand, frame women as disabled or crazy due to hormonal changes and which, on the other hand, deny women’s experiences of hormonal changes during a cycle (see also Bobel & Fahs, 2020; Martin, 1993). In the first approach, the redefinition of menstruation as “a vital sign” questions this stigma by comparing menstruation to other bodily processes that sustain life. Moreover, as period problems are presented as important health issues, women are empowered to seek treatment when it is needed (e.g., Hill, 2019, p. 271). In the second approach, the stigma is challenged by presenting menstruation as a place for creativity and premenstrual symptoms as arising from society’s inability to account for women’s anger (Pearce, 2015; Pope & Hugo Wurlitzer, 2017). Being aware of the psychospiritual changes during the cycle and surrendering to arising emotions instead of suppressing them are then suggested as a path to empowerment.

To sum up, the texts suggest that becoming empowered necessitates actively accepting the impact of one’s cycle on one’s health and well-being—whatever that may be—and taking care of oneself in accordance with the cycle. Tracking menstruation allows access to embodied knowledge, which enables the menstruator to acquire appropriate medical treatment, stand their ground in their work and personal life, and/or find their calling in life.

Discussion

The analysis demonstrates how self-help literature simultaneously constructs menstruation as naturally beneficial, as an object of and tool for self-management, and as a potential source of empowerment. Taken together, the discourses forcefully question the idea of the menstruating body as problematic or negative. Instead, monthly menstruation is presented as evidence that the body is functioning correctly. Ovulation is depicted as a naturally beneficial active process of menstruating bodies that should be supported with natural supplements and remedies. The hormonal changes related to the menstrual cycle and the effects of those changes are presented as essential parts of the well-being of menstruating bodies. Accepting and appreciating those changes is depicted as empowering. However, although stressing the naturalness and the potentially empowering aspects of the menstrual cycle serves to depathologize the menstruating body, these discourses are not entirely unproblematic.

For example, linking the menstruating body to nature is neither a new nor a necessarily progressive idea. As Julie Strange (2000) has demonstrated, the insistence on the naturalness of menstruation was used in 19th-century medical texts to exclude women from education. Since regular and complete menstruation signaled a woman's well-being, any activity that might disturb it (such as education) was discouraged (Strange, 2000). In addition, the view of menstruation as a natural process was used to argue that period pain was a natural result of women not having adapted well enough to the environment (Strange, 2000). Although all the texts forcefully deny that period pain would be natural or necessary, the idea that premenstrual symptoms, for example, can or should be eliminated with natural remedies is problematic in the sense that it downplays the impact of culture and societal expectations on menstruators' perceptions of premenstrual distress (see Ussher & Perz, 2019).

Furthermore, conflating what happens naturally in the body with what is beneficial needs critical examination. As Jessica Shipman Gunson (2010) has shown, for example, women's consideration of what is natural does not necessarily merge with what they find desirable or feel safe with. Moreover, the risks related to hormonal contraceptives should be understood as relational, meaning that "specific risks may appear either as minor or unbearable" to different people in different situations (Irni, 2017, p. 112). And although the texts stress that they do not judge women for taking hormonal contraceptives, the overwhelming message that hormonal contraception is detrimental to one's well-being since it harms the *natural* functioning of the body overlooks the sociocultural construction of "naturalness" as an aspect of the female body (see Grosz, 1994). Furthermore, although the texts explicitly state that not all women menstruate and not only women menstruate, the recurring deployment of the menstrual cycle as a defining characteristic of women's well-being, and the stress on menstruation as a natural female process, marginalize to some extent both those women who do not menstruate and those people who menstruate but do not identify as women. Therefore, even if the texts' discussions on the risks related to hormonal contraceptives are extremely important and people using hormonal contraceptives should be better informed of those risks and offered better options, arguing against hormonal contraceptives based on how they disturb the presumed naturalness of female bodies is risky.

Nevertheless, the three discourses together question the idea of women as “vulnerable to their reproductive bodies” (Bertotti et al., 2021, p. 5). Instead, contemporary self-help texts on menstruation present women as potentially in charge of their bodies and hormones. Similar to earlier forms of feminist self-help, self-study is presented as a method for exercising control over one’s body (Copelton, 2004; Murphy, 2004). The texts also recognize the importance of women’s collectivities. However, instead of arguing for organized collective action against structural social injustices—even when those injustices are mentioned and denounced—empowerment and transformation are presented mainly as personal endeavors. The focus on effecting change “woman by woman” may help to normalize menstrual bleeding to an extent, but it also fails to criticize the socially constructed category of woman (see Bobel, 2010, pp. 66–73). Change becomes primarily about personal transformation enabled by rigorous tracking of physical, emotional, and spiritual feelings and needs.

Unlike popular and medical conceptions of the female body as complicated or necessitating medical intervention, self-help texts present the body as manageable and uncomplicated when sufficient attention is paid to it. Fertility is not something dangerous that women should be protected against but rather a signal of health that should be preserved (cf. Bertotti et al., 2021). The menstrual cycle is presented as an active process of the female body that women themselves can analyze and use to optimize chances of conception or contraception with or without technologies designed for fertility tracking. The texts assign agency to menstruators as the best experts on their bodies and provide methods for communicating that expertise to medical professionals, for example.

However, while presenting “ovary owners” (Hill, 2019, p. 301) as being in charge of their menstruating bodies, the discourses also assign responsibility for sexual and reproductive health to individuals. Tracking and charting are presented as ways of building self-knowledge and becoming empowered, but they are also time-consuming processes that guide toward self-regulation according to the norms set by the texts (e.g., Bordo, 1993; Hamper, 2020). These norms include numerical norms such as the optimal quantity of menstrual flow and duration of a menstrual cycle as well as more general norms on whether or how one should try to fix the cycle or organize one’s life around it. Because the proposed norms are at times contradictory and often relatively vague as they require knowing “one’s own normal,” the incessant self-monitoring suggested by the texts may result in anxiety rather than empowerment. And even when self-tracking leads to the feeling of being in control, it may also strengthen the idea of the female body as something that needs surveillance and improvement (see Bordo, 2003 and Sanders, 2017).

Since the analysis is limited to self-help texts from dominant Anglophone countries, it cannot reveal changes in discourses of menstruation in other social and cultural settings. Furthermore, since the material consists of texts, the analysis does not address questions regarding the uses of those texts. Two important questions arise for future research. First, future research should explore discourses of menstruation in other languages and cultural settings to understand whether and how they may be changing and who may be benefiting from those changes. Second, there is a need to analyze how diverse menstrual self-help texts and practices are adopted by people with periods. What does “taking charge” of one’s body mean for the variety of people who

menstruate, and when does it become synonymous with internalizing forms of social control? The analysis suggests that presenting the menstrual cycle as something that menstruators can “take charge of” may be useful in resisting the idea of the menstruating body as weak or flawed. However, the construction of “taking charge” as never-ending self-monitoring and self-care downplays the role of structural injustices and continues to frame sexual and reproductive health and well-being as above all else an individual’s responsibility to herself.

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