Introducing Menstrunormativity: Toward a Complex Understanding of ‘Menstrual Monsterings’

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MEET THE MENSTRUAL MONSTER

You’ve met it before. “The menstrual monster” pops up in popular culture as the stereotypical (pre)menstrual woman, “a frenzied, raging beast . . . prone to rapid mood swings and crying spells, bloated and swollen from water retention, out of control, craving chocolate, and likely at any moment to turn violent” (Chrisler et al. 2006, 371). Many have also used the terms “monster” and “monstrous” to refer to otherized, marginalized, liminal beings, who in one way or another stand outside the realms of “normality” (for example, Hughes 2009; Shildrick 2002). Many critical menstrual scholars implicitly or explicitly argue that menstruators and menstruating have in that more metaphorical sense been positioned as monstrous through communication taboos (Kissling 1999), pathologization and medicalization (Mamo and Fosket 2009; Martin 2001; Gunson 2010; Oinas 1998; Ussher 2006), stigmatization (Kowalski and Chapple 2000; Johnston-Robledo and Chrisler 2013), and concealment imperatives (Wood 2019; Young 2005; Laws 1990). Such menstrual *monstrosity* is often burdensome to the monstrous subject as they are positioned as abnormals, outsiders, deemed less human (more monstrous) than that which adheres to normative ideals. Marion Yong has argued that since menstruating is a stigmatized and monstrous position, menstruators are effectively positioned “in the closet” trying to “pass” as non-menstruators (Young 2005). Correspondingly, Jane Ussher argues that women and menstruators are tasked with controlling the menstrual “unruly” monstrous body, and if they fail they are “at risk of being positioned as mad or bad, and subjected to discipline or punishment” (Ussher 2006, 4). Ussher also argues

that managing this monstrosity is a cumbersome, time-consuming, self-oppressive task (Ussher 2006). Menstrual monstrosity has concrete negative effects, for example impacting body-shame (Johnston-Robledo et al. 2007), increasing sexual risk behavior (Schooler et al. 2005; Rembeck 2008), and even negatively effecting the experience of birth (Moloney 2010). By discussing and deconstructing such consequences, the menstrual countermovement (Persdotter 2013) has shed light on the possibility of alternatives, that it can be otherwise. In this text I seek to assemble, assist, and advance this tradition through trying to make visible the complex ways in which menstrual monsterings work through introducing a concept that I call *menstrunormativity*. Because while menstruation is surely “having its moment” (Bobel 2017) all around the world, it is crucial that we maintain a critical eye on dominations and marginalizations of menstruation and menstruators and explore more ways of understanding how they work.

Through introducing *menstrunormativity* I make four interlinked arguments: (1) that normativities work in clustered, complex, and contradictory ways, (2) the cluster of normativities that surround menstruation produce an impossible ideal subjectivity (the imagined *menstrunormate*) which follows that we are all actually *menstrual monsters*, that (3) normativities are *continuously co-produced* by everyone and everything, which means we are all, always, culpable in creating normativities (and monsters) and lastly (4) embracing ourselves (we scholars, activists, retailers, menstruators, feminists, parents, children) as both Doctor Frankenstein and as monsters carries significant potential: producing more possibilities for livable lives for both the menstrual countermovement (who can see itself and others in more nuance and imagine ever stranger bedfellows) and menstruators (who can imagine more ways of being menstruator, and feel less bad about their inevitable menstrual monstrosity).

INTRODUCING MENSTRUNORMATIVITY

I propose we use the neologism *menstrunormativity* to refer to the hegemonic social system of multiple and contradictory normativities that order and stratify menstruation and menstruating. It is the multitude of entwined social/medical/statistical norms, discourses and imperatives that construct certain ways of understanding and experiencing menstruation as ideal/correct/healthy/normal and morally superior, and others as wrong/unhealthy/abnormal, or *monstrous*. The term *menstrunormativity* draws from conceptual predecessors such as *heteronormativity*, *cisnormativity*, *homonormativity*, and *bodynormativity* that all highlight ways in which dominant social systems stratify certain aspects of life: positioning some sexualities, subjectivities, and bodies as Other, unnatural, abject and some (heterosexuals, cisgendered, et cetera.) as natural, correct, and privileged, that is the norm (Robinson 2016; Nord, Bremer, and Alm 2016). I argue that norms, ideals, and imperatives around menstruation do very similar things: they

position some menstrual subjectivities, some menstrual bodies, some menstrual behavior as ideal, correct and good, and some as abnormal, unhealthy, disgusting. And—I think this is an important accentuation—I argue that these (as all) normativities work in clustered ways: coming at menstruators from all sides, pushing, compressing, and limiting menstrual existence in contradictory and even paradoxical ways. Menstruators are told to simultaneously: Don’t tell anyone you’re menstruating! But be proud of your functional body! It’s perfectly natural to bleed! That’s gross, conceal!

Conceptual Building Blocks

The Latin term *norma*, the root of words such as norm, normal(ity) and normativity, means approximately rule, pattern, precept, or standard (Folkmarson Käll 2009). In everyday life “norm” and “normal” are often understood as “standard” and “usual” in a statistical sense, also called *statistic normality* (Tideman 2000). In the case of menstruation, statistic normality could be the most common way to menstruate in terms of cycle length; an average level of discomfort, or that most women adhere to the local *menstrual etiquette* (Laws 1990). For example:

“most women menstruate”

“the normal menstrual cycle is 28 days”

“most menstruators do not speak of their menstruation”

The terms “normality,” “norms,” and “normativity” have different meanings in different disciplines. In sociology (which is my discipline) norms are understood as socio-cultural rules that regulate appearance and behavior in social systems, sanctioning behavior that goes against the norm (Johnson 2000). That is: norms—in the sociological sense—are always *normative* as they stipulate a right and a wrong way, how something *ought to be*, *should* be done; an endorsed and authoritative moral ideal (Folkmarson Käll 2009). Moreover, the *statistically* normal often becomes *normatively* normal in that the “normal” becomes the “good” as “the normal” turns into “an attractive normative position, which other positions are viewed against” (Niklasson 2014, 13, my translation). Thereby, the most common way to menstruate becomes the “right” way to menstruate whereas other ways are sanctioned:

“most women menstruate” → *“women who do not menstruate are not real women”*

“the normal menstrual cycle is 28 days” → *“the 32-day cycle could be a sign of illness”*

“most menstruators do not speak of their menstruation” → *“menstruators who do speak of their menstruation are weird”*

Importantly, normativity is also intimately intertwined with constructions of the *natural* in producing “bodily imperatives that are deemed socially and ethically acceptable” (Weiss 2014, 106); that it is natural for women to menstruate, that a natural cycle is 28 days, et cetera. Further, constructions of normality within medicine categorize that which is positioned as abnormal as *unhealthy* (Zeiler and Folkmarson Käll 2014, 7) this has been called *medical normality* and is often coupled with an idea of treatment as a technology to achieve normality (Tideman 2000).

Please note that I do not mean to dismiss that deviations from menstrual medical normality might be signs of poor health and a source of much physical and psychological suffering, but instead highlight their social constructions and social and emotional consequences and try to explore how they could be otherwise.

Conceptual Siblings

Heteronormativity, *Cisnormativity*, *Homonormativity*, and *Bodynormativity* are all concepts similar to how I seek to develop menstrunormativity highlight the ways in which normative powers work in a certain sphere of life. Heteronormativity has been defined as “a hegemonic social system of norms, discourses, and practices that constructs heterosexuality as natural and superior to all other expressions of sexuality” (Robinson 2016). *Cisnormativity*, a related concept (and interlinked system) is in the same way defined as a hegemonic social system but instead of sexuality focuses on the binary gender system that fundamentally assumes two static, stable, and un-mixable gender-categories: man and woman. In doing so, cisnormativity positions all other gendered/sexed identities unintelligible (Nord, Bremer, and Alm 2016). These theoretical concepts share a (trans and queer) feminist interest in understanding, conceptualizing, and critically engaging with social systems “that constitute some subject-positions as recognizable and others as abject” (Nord, Bremer, and Alm 2016, 5) and enable us to see the characteristics of large, complex, multidimensional structures, or networks that position phenomena people and their experiences as either right or wrong, norm-conforming or norm-countering. Sociologist Susan Leigh Star (1990) has described similar systems as sets of conventions or standards that seek to order and stratify life; creating “members” and “non-members” of certain networks or social worlds. They produce standardized modes of existence that create insiders and outsiders, “normals” and “abnormals,” which “often involve the private suffering of those who are not standard” (Star 1990, 94). Queer theorist Judith Butler has written of the “constraints” that produce “intelligible bodies” as well as “unthinkable, abject, unlivable bodies” (Butler 1993, x). Building on Star’s phrasing, menstrunormativity circles something like *sets of menstrual standards and conventions that seek to order and stratify menstrual life*; creating hierarchies of existence; menstrual insiders and outsiders, menstrual “normals” and “abnormals,” regulating what menstrual worlds

come into being, what menstrualities become possible or impossible; which menstrualities become uncomplicated, effortless and easy and which become difficult, burdensome, and painful. Many menstrual scholars have shown how normative pressures work on menstruation. For example menstruating or behaving outside of normative assumptions of menstruality can result in stigmatization and marginalization (Crawford, Menger, and Kaufman 2014; Kowalski and Chapple 2000; Johnston-Robledo and Chrisler 2013) and feelings of disgust and shame (Lee 2009; Schooler et al. 2005; Ussher 2006; Johnston-Robledo et al. 2007; Fahs 2011; Moloney 2010; Young 2005), where for example those who bleed too much, too seldom, or those who fail to conceal their menstruation are socially sanctioned externally (“That’s not normal!” “You’re repulsive!”), and internally (“There’s something wrong with me,” “I feel unfeminine,” “I’m disgusting”).

Menstrunormativity differs from the concepts heteronormativity and cishnormativity in that it does not entail the norm-position within its semantic morphology. Whereas *heterosexuals* and *cisgendered* are the ideal subject positions of the respective systems, *menstruating* is not the sought position in menstrunormativity. The ideal normative subject-position has been called *the normate* by crip-scholar Rosmarie Garland-Thomson (1997). That which I suggest we call the *menstrunormate* is thus the menstrual equivalent. But unlike the cases of hetero- and cishnormativity the menstrunormate is not the menstruator, but *the “right” kind* of menstruator, say: a ciswoman with a regular 28-day cycle, who obscures all evidence of menstruation.

Instead of the norm-position, the initial *menstru-* in menstrunormativity encircles the area in question: menstruation and menstruating. In that sense it is similar to the crip concept *bodynormativity* which refers to ideas about hegemonic notions of the body, that is, social constructions of what is considered normal or deviant embodiment (Malmberg 2008, 2009). Malmberg argues that bodynormativity stipulates that correct/natural/beautiful bodies should not leak, shake uncontrollably, or be asymmetrical. Correspondingly, menstrunormativity stipulate normative (normal/natural/healthy) menstruation, as, for example, controllable and concealed, a menstrunormate that does not leak, show, smell, or tell of their menstruation.

The linguistic logics of *homonormativity*, another terminological sibling to menstrunormativity, differs somewhat. Homonormativity builds directly from heteronormativity and conceptualizes the ways in which homosexuals conform specifically to *heteronormative* orders and institutions, such as marriage (Robinson 2016). Such interlinkages are an important feat of all the systems of normativity mentioned here. For example, cishnormativity and heteronormativity are part of each other; they interlink and overlap through that which Butler has called the *heterosexual matrix* (Butler 1990): cisgendered women desire cisgendered men. One hegemonic social system intersects with another. Likewise, menstrunormativity is entangled with hetero-, cis, and bodynormativity: the menstrunormate lives up to certain standards of embodiment and “hetero-femininity” (see for example, Ussher and Perz 2013).

THE PARADOXICAL CREATURES OF MENSTRUNORMATIVITY

As illustrated above, the menstrunormate menstruates according to menstrual norms. But what menstrual norms are those? This is where it starts to get complex and contradictory. Viewing menstrunormativity as a cluster of different sets of normativities entails understanding how sometimes wholly contradictory ideas impact a subject in synchronicity. The menstrunormate can thus for example in a paradoxical way both be bleeding regularly and never bleed at all. Star argues (1990) that as we are situated in many different networks we always have *multiple memberships* in many social worlds at once, and as such we are always marginal and monstrous in some regard. Normative ideals come from several directions, and impact the subject in multiple ways, creating a *multiple marginality* (Star 1990). These multiple marginalities can relate to each other in thoroughly contradictory ways. For example, we can take the menstrual suppression debate where (I simplify for clarity) one side argues that modern amounts of menstrual cycles within a lifespan is “unnatural” and potentially “unhealthy,” as menarche comes earlier and menstruators are more seldom pregnant compared to other—“more natural”—historical eras, following that it is right and moral to reduce the number of cycles medically (Coutinho and Segal 1999). The other side argues that menstruation is a natural part of life and therefore healthy, following that it is (potentially) unhealthy (and immoral) to interfere with it medically (see Hasson 2012b), for example constructing “pill-periods” as “not real” (Hasson 2016). The menstrunormate is in these two different discourses two fundamentally conflicting things:

“the menstrunormate is that which does not menstruate”

“the menstrunormate is that which does menstruate”

Many menstruators are part of both discourses exemplified above, as well as many others, simultaneously. Menstruating means being affected by a clustered multitude of different and sometimes conflicting normativities; biomedical ideas of physical normalcy, “Femcare-industry” ideas of “normal flows,” patriarchal ideas of man as norm, feminist ideas of “menstrutalk” as emancipatory, et cetera. When we see all these different normativities working together I argue the menstrunormate is unveiled as a mirage. There is no menstrunormate, only an abundance of menstrual monsters.

The Impossible Menstrunormate

When we see menstrunormativity as a clustered multitude of normativities we can see the menstrunormate as simultaneously non-bleeding (living up to the masculine, non-leaky body as ideal) and bleeding (living up to ideas of what is natural and healthy, as well as of certain femininity); at the same

time “menstrusilent” (according to contemporary local menstrual etiquette) and “menstrutalking” (mirroring contemporary feminist role models). These multiple and contradictory normativities and marginalities produce an impossible menstrunormative space, creates an illusion of a menstrunormate, a non-achievable model-menstruator. Rosemarie Garland-Thomson argues the normate is an illusion and a “phantom figure” outlined by the “array of deviant others whose marked bodies shore up the normate’s boundaries” (2009, 45). Her illustrative phrasing places bodies of abnormals, of monsters, around a void, marking up the boundaries of the ideal. I emphasize that when you view normativities as clustered and potentially contradictory—at least when it comes to menstruation—there is not even a void. There is nothing at all. When you draw it out and put all the “monstrous menstruators” beside each other, there is no empty ideal space in the middle. Menstrunormative ideals are everywhere around us, but the subject-position it propagates is a nothingness as dominant ideals overlap and contradict each other. It is impossible to attain it, as it is nowhere to be found. Instead it morphs to monster at every turn.

The Boundless Menstrual Monster

The monster as a figure has been used with great excellence to discuss female, reproductive, menstrual, and non-normconforming embodiment (Braidotti 1994; Shildrick 2002; Ussher 2006; Young 2005). In a society where man is considered norm “[w]oman, as a sign of difference, is monstrous” (Braidotti 1994, 81); “her seeping, leaking, bleeding womb [stand] as a site of pollution and source of dread” (Ussher 2006, 1), as pathology (Lie 2012; Strange 2000; Johannisson 2005; Martin 2001), and menstruation is—as in the part of the menstrual suppression debate—positioned as unnatural and unnecessary (Hasson 2016; Mamo and Fosket 2009). If menstruation itself is positioned as disease, unnatural, and pollution, then all menstruators are menstrual monsters. Within these discourses the normative ideal is to *not bleed*, to bleed is to be Other. As such menstruation is a foil to femininity, to modernity, to the docile, controllable body. But simultaneously, other hegemonic ideas stipulate that women *should bleed*. Strong “menstrual imperatives” positions menstruating as part of womanhood and natural, real, correct, healthy, natural, and normal aspect of life. The assumption that all healthy women should menstruate renders those who do not outside the bonds of correct femininity/womanhood, thus all women who do not menstruate are menstrual monsters. In other words, women cannot escape the status of being “menstrual monsters” regardless of whether they menstruate or not. So, from the get-go and fundamentally, the menstrunormate is non-achievable and the menstrual monster is boundless. But the cluster of menstrunormativity encompasses many more paradoxes and contradictions.

I have already touched upon medical normativities which sets up specific standards for menstrual non-monstrosity. Defining what constitutes

normal menstruation is imperative and ubiquitous for contemporary medical scientists and clinicians as well as their patients (see for example, AAoP and ACoOaG 2006; Hasson 2012a). In their striving to identify, demarcate, and categorize (and ultimately cure) illness/pathology the medical sciences set up crucial (narrow) standards of menstrual existence. For example the idea of the normalcy of the 28-day cycle can be argued to be a medico-social construct (Oudshoorn 1994) as can the idea of the healthiness/naturalness of reliable regular menstrual cycle (Martin 2001), and the definition of normal amounts of menstrual fluid as more than 20 but less than 80 milliliters per period (see Janson and Landgren 2015) is often described as the normal scope but is by some argued to be too narrowly defined (Clancy 2016). These medical normativities however effectively draws out boundaries of menstrual existence, stipulating that the menstrual monster bleeds incorrectly, simultaneously bleeding too little and too much, too often and too seldom, and irregularly, as the medical construct of the normal becomes the ideal. The menstrual monster also feels incorrectly: is in too much pain (diagnosed with dysmenorrhea) or it is too angry, too sad, too depressed (diagnosed with PMDD). Yet, menstruating with too much ease or even pleasure is also monstrous, because while pain and suffering are often categorized as menstrual disorders (and as such pathology, anomaly, monstrous, treatable) they are simultaneously understood as part of what constitutes a normal menstruation. Menstrual pain, severe PMS, and other menstrual problems are normalized by health care practitioners (Oinas 1998)—as well as pop culture (Rosewarne 2012)—as normal aspects of healthy menstrual bodies, implicitly arguing that “menstruation should be a little painful” (Malm 2014). So, the menstrual monster has painful gut-wrenching period cramps and simultaneously take little notice of their periods. Continuing along the line of emotions, the paradoxical creature that is the menstrual monster is neither appropriately ashamed nor proud enough of their periods. On the one hand, it violates menstrual etiquette and does not perform menstruation as social stigma; talks openly and proudly about their menstruation, carries their menstrual products openly, and does not adhere to the concealment imperative (Wood 2019; Young 2005). On the other hand, and at the same time, the menstrual monster violates (menstru)normative ideas of the menstrual countermovement: it is not proud enough of their periods, does not want to talk publicly about periods.

The menstrual monster also has the wrong body. Its vagina is too small, too large, it smells too much, it is too moist and too dry, it is too deep and too shallow; it is allergic to cotton, and silicone, and rubber; and it doesn't have a vulva, vagina, or a uterus. The transwoman (Berg 2017) and women with ambiguous female genitals (Guntram 2014) become menstrual monsters herein. Relatedly, the menstrual monster identifies incorrectly, or rather, though it menstruates, it identifies as other than ciswoman (for example, transmen, non-binary). Recent scholarship highlights how transgendered menstruators become monstrous as their bleeding bodies conflict with their non-woman identities (Chrisler et al. 2016). The menstrunormate is

cisgendered, but the cisgendered (woman) menstruator is also monstrous as that subject-position is positioned as wrongfully privileged in many feminist spaces. Therein, you are monstrous if you menstruate and do not identify as woman, *and* if you menstruate and identify as woman.

The menstrual monster is thus simultaneously menstruating and non-menstruating, feminine and un-feminine, bleeding too much and too little, too early and too late, in too much and too little pain, is too proud and too embarrassed, transgendered and cisgendered. All these are features of this paradoxical creature. When we see it laid out, in a cluster of conflicting normativities, it is clear that the menstrunormate is not only unattainable, but non-existent. It is simply not possible to be both non-bleeding and bleeding, and so on. Crip-scholar Mary Shildrick has argued the importance of undoing the singular category of the monster (Shildrick 2002) contending that the monster is not a singular but a multitude. Others have underlined that the dichotomies of absolute standards—no standards, or monstrous—normate, are false (Law 1991, 5). No one is standard, no one is normate, we are all multiply marginal (Star 1990). Viewing normativities as clustered positions the menstrunormate as chimera and makes monsters of all, but it also, importantly, makes visible that we are all culpable of creating monsters.

We Are All, Always, Doctor Frankenstein

Let me share a personal experience. When the menstrual countermovement began to gain momentum in Sweden, we Swedish menstrual activists were eagerly opposing ideas of menstruation as abject (“menstruation can be fun and beautiful!”), pathologized (“PMS doesn’t have to be negative!”), medicalized (“menstrual suppressants shuts of the signal-system that is your natural cycle!”), and silenced (“break the communication taboo!”). But in the process of dismantling these normative powers we also created new menstrunormativities where for example talking about menstruation was positioned as better than not talking about it; loving one’s period was more feminist than hating one’s period; cups were cooler than pads; and not using hormonal birth control was healthier than “pill-popping.” In that, the movement created many a menstrual monster: those who think periods are gross, who have serious problems with cyclical depression, who use menstrual suppressants, et cetara. Monstering was never our intent but it was a consequence all the same. Some were, and are, left out, rendered less “real,” less “feminist,” less “possible.” With this example I want to say that we all, even grass-root menstrual activists with the best of intentions, create monsters.

Menstrunormativity is not a so called uniform “homogeneous, global external entity that exists outside of us” (Brown 2012, 1066) that represses menstruators from above/outside but a multiply paradoxical and diverse cluster that is continuously co-produced by us all: the medical sciences; the hygiene product industry, the kids in the hallway; the public health informants, the movie industry, the scholars by their computers; and the activists

in their red tents: we all create menstrunormativity, all the time. It is also important to consider that it is not only human actors that take part in the co-production. Several critical menstrual scholars have shown how technologies matter in the configuring of menstrual correctness and normalcy (Hasson 2012b; Malmberg 1991; Vostral 2008). Menstrual technologies co-produce “boundaries of health and illness;” “subjectivities and gendered forms of embodiment;” “cultural ideas about bodies and identities” (Mamo and Fosket 2009, 925). Menstrunormativity is built into menstrual technologies such as pads, tampons, cups, toilets, pharmaceuticals, and menstrual charting apps. The ways these technologies function and malfunction, fit and chafe, produce (illusions of) normates and (actual) monsters. The menstrunormate use “normal sized” tampons, they don’t make menstrual messes in the toilet, their menstrual cup does not leak. The menstrual monsters’ tampons do not stay in place, the cramps become worse when they use the cup, the sponge leaks, the pad slips, the menstrual charting apps give faulty suggestions on when their next period is due. All these technologies carry menstrunormativity within them and position all who cannot use them with ease as menstrual monsters. Menstrunormativity is co-produced by *everyone* and *everything*.

Additionally, menstrunormativity is a perennial and inescapable. Menstrual monsters will always be created. Now, when the menstrual countermovement celebrates so many successes, this proposition of the continuance of normativities is perhaps particularly indispensable as it offers an important reconfiguration of how we perceive the goal and role of the movement.

Since the early days of menstrual scholarship, the idea of “the menstrual taboo” has been very pervasive in social studies of menstruation (see for example, Frazer 1922; Douglas 1966; Delaney, Lupton, and Toth 1976; Buckley and Gottlieb 1988) as well as in menstrual activist accounts (Bobel 2010; Persdotter 2013). The prevalence of the idea of the menstrual taboo is problematic in several ways. Some for example argue it is too often accepted as fact rather than challenged as theory (Newton 2016, 42), others argue it is often wrongly thought of as a homogenous universal entity (Buckley and Gottlieb 1988). I would like to stress that the idea of the menstrual taboo is problematic because it creates a false narrative of there being a post-taboo society that is completely “free and inclusive.” As the “fight to end period shaming is going mainstream,” (Jones 2016) and some menstrual communication taboos rapidly (finally!) deteriorate in front of us we risk concluding prematurely and without caution that we are done. Because what happens when those taboos are gone? When we can indeed talk openly about menstruation? What remains? There are still forces at play that have negative effects for menstruators, to which we need to attend to critically: new or persistent ideas with the power to create livable and unlivable lives.

Furthermore, the idea of the menstrual taboo also carries with it a risk of positioning other cultures, contexts, and actors (the Global South; the product industry; the conservatives) as still left in that objectionable, pitiful state of tabooing menstruation. But in fact, we find repressive ideas

of correct menstrual behavior in all camps, both before and after the fight to end period-shaming went mainstream. I say it again: we will all, always, create menstrual monsters. “We” are just as Frankensteinian as “they” are. Thus, I argue the idea of the menstrual taboo builds in false dichotomies of us–them, good–evil, repressed–emancipated, and risks masking the continuance of mensturnormative constructions that go on around us. In this duality of being both Frankenstein and monster I argue there are transformative potentials through which we can view—and craft—the world a little differently.

MONSTROUS POTENTIALS—THE TRANSFORMATIVE FUTURES OF MENSTRUNORMATIVITY

We need the power of modern critical theories of how meanings and bodies get made, not in order to deny meanings and bodies, but in order to build meanings and bodies that have a chance for life. (Haraway 1988, 580)

If we see mensturnormativity as a cluster of multiple normativities that surround menstruation we can see how it comes at us from all sides. Wherever we try to fit we get excluded; pushed away, expelled, turned monstrous. Mensturnormativity produces an ideal that is thoroughly impossible, a non-space of menstrual existence. No one can menstruate (or have a uterus and not menstruate) in accordance with mensturnormativity. Menstruators, women, the menstrual countermovement, as well as the menstrual product industry, work hard to pass as non-monstrous, as “right,” as “good,” as “normal,” “real,” and “emancipated.” The multiply paradoxical nature of the mensturnormative ideals reveals the menstrual experience as always already monstrous (we all are menstrual monsters), and the creation of monsters as inevitable (all are Frankenstein, none of us are innocent bystanders). Within that there is substantial transformative potential. Star argues that “refusing to discard any of our selves . . . refusing to ‘pass’ or become pure” and acknowledging our multiple marginality is a source of power (1990, 82). Thus, recognizing our shared inescapable monstrosity and monstering could transform the way menstruators and the menstrual countermovement view themselves and each other. Through making visible the multitude of conflicting ideas of the mensturnormate it ceases to be idol/standard/model and sought-after position. Through highlighting the impossibility of doing menstruation “correctly” and instead making visible the multiplicity in the menstrual experience we can lessen the pressure on what it is to be menstruator, allowing more of a polyphony and dissonance in our menstrual and embodied experiences (cf. Nord, Bremer, and Alm 2016, 6). It makes it possible to build meanings and bodies that have greater chances for livable, recognizable life (Haraway 1988). Because while we are all inevitably monsters, some monsters suffer more from their monstrosity than others: “some monsters find it so easy that they scarcely look like monsters at all; . . . some monsters are truly wretched,

subjected to pain, deprived of all hope and dignity” (Law 1991, 18). All those actors that take part in the co-production of menstrunormativity have the potential to reduce the effects of monstrosity; lessen the load and ease the pain, expand the space for menstrual existence, making more lives more livable.

Hopeful Frankensteins

In late 2017, the pad-brand Libresse (known also as Bodyform, Saba and Nosotras) launched a campaign called “#bloodnormal,” including a YouTube-video in which they showed a red liquid (at last!) and portrayed a wide array of ways to do and be menstruator: menstruators doing hard-core sports; talking publicly about periods; swimming; partying; laughing, crying; having painful periods; reading period poetry, et cetera. “I wanted to posit a view unfettered by judgement” tweeted the add creator David Wolfe. Long gone seems the blue liquid, the white pants, and their immeasurable monsterings of menstruators. Similarly, in the moment of writing there is on my desk, beside my computer, a pair of pink underwear from H&M-owned clothing company with a text that says “Periods are cool. And painful. And messy. And great.” The text joyfully allows for a heterogeneous complexity, ambiguity and paradoxicality of thought and experience. These two examples show periods have indeed gone public, that the fight to end period shame has gone mainstream. And as is clear here: not only civil society and hard-core menstrual activists but even large corporate actors, with a wide reach and consequent power, seem to grasp the importance (and of course potential goodwill, legitimization, and profit—but I leave that to others to disentangle) of depicting inclusive and diverse experiences. In this they assist in loosening menstrunormativity’s grip on the menstrual experience, making menstrual monstrosity less miserable. That these destabilizations of normativities come from corporate actors might be unexpected by menstrual activists and critical scholars as we have long positioned “the industry” as the “bad guy” behind the scenes of the construction of the menstrual taboo (see for example, Kissling 2006). But “they” need not be worse than “us.” While seemingly strange bedfellows to the menstrual countermovement these corporate actors play a crucial role in increasing space for menstrual life. If we see all as both Frankenstein and monster—as the dichotomy of “us-them” and “good-evil” wither—companionships between “them” and “us” (as if we could ever make such distinctions) may have greater chances of making greater things.

As the menstrual scholarship, activism, and politics grow stronger, it is more important than ever that we keep a keen eye on processes of exclusion and restriction that go on within and alongside our work. We need to try and understand the complex and multiple ways in which menstrunormativities are *still* and *always* developed and enacted—even when they seem to be “unfettered with judgement” and look like universal emancipation. Menstrunormativity is changing continuously, but there will always be sets

of standards, rules, and ideas that order and stratify menstrual life. I hope that thinking with the concept menstrunormativity, along with the attached principles discussed in this paper, strengthens critical menstrual scholarship to employ a continuous critical gaze on the normativities and how they are (re)created in all menstrual practice and discourse; in medicine, industry, activism, and critical menstrual studies alike. I hope that the concept helps us ask continuously: What is constructed as menstrunormative and ideal? Who are excluded, marginalized, or invisibilized in the commercials; in the menstrual counter-movement; in Kathmandu; Gothenburg, and New York; in our research practices, and for that matter: in this book? And—most importantly—*what can we do to change that?*

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