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COMING TO A FULL STOP: AN INVESTIGATION OF MENSTRUAL PERIOD STIGMAS IN COLLEGE STUDENTS

by

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B.A. University of Central Florida, 2016

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Arts in the Nicholson School of Communication in the College of Sciences at the University of Central Florida Orlando, Florida

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ABSTRACT

The focus of this study was to understand perceptions college students have regarding menstruation and if viewing a normalized media message may influence these perceptions. A treatment group of participants was randomly assigned to view an episode of the hit family sitcom *Blackish* that focused on menstruation and then answer survey questions. A control group of participants only answered the survey questions. A mixed methods analysis revealed three primary conclusions. First, these results contradict existing research in that the college students surveyed generally do not hold negative perceptions that may stigmatize menstruation. Second, the treatment that viewed the normalized media message intervention did not report significantly more positive perceptions about menstruation as a natural bodily function than their counterparts in the control group. Third, many participants acknowledged menstruation is a stigmatized topic and media messages not only currently contribute to these attitudes but could be used as a catalyst for guiding society toward normalizing it. These results extend existing research on how people perceive menstruation and on mass media effect research as a means to address stigmatized topics.
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LIST OF ABBREVIATIONS

PMS: Premenstrual syndrome

PMDD: Premenstrual dysphoric disorder
CHAPTER ONE: INTRODUCTION

Perceptions perpetuated by media can affect an individual’s ability to form accurately informed opinions on a topic (Wang & Jiang, 2017). More specifically, without proper literacy, consumers of media may be influenced to believe certain myths about menstruation as facts. Moreover, such misrepresentations about menstrual periods could lead to, among other things, inappropriate body image issues affecting self-concept and self-esteem, a perpetuation of menstruation as a cultural taboo topic influencing interactions among women and men, as well as a stigmatization of menstruating women as unclean or undesirable. A culture’s [mis]perceptions about menstruation can be debilitating to populations of women. In some pockets across the globe, for instance, once young women begin to menstruate, they are no longer allowed to attend school due to a lack of sanitary supplies or other unwarranted period-related health concerns (Grant, Lloyd, & Mensch, 2013). If accurate information regarding menstruation is instead disseminated, perhaps open dialogues about body image, self-esteem, taboos, and stigmatization regarding menstruation would ensue and, ultimately, debunk some of these myths currently stigmatizing menstruation. The following paragraphs highlight in more detail the problem and rationale, operational definitions, project goal, and organization of the thesis.

Problem and Rationale

The term “taboo” has linguistic roots placing its meaning in the heart of menstruation. To clarify, as a taboo, many people fear the idea of bleeding, which is linked naturally to the biological process of menstruation. Yet, half of the world population experiences this regular bleeding as part of a natural biological process, which enables them to sustain a healthy reproductive system. Nevertheless, this natural human function is considered a taboo topic in the
dominant American culture. As a taboo topic, even mentioning menstruation in polite conversation is considered socially inappropriate.

Menstruation is a natural bodily function and it is important to disseminate accurate information surrounding it. Exposure to messages portraying menstruation as anything but natural could lead to negative body esteem. Harper and Tiggemann (2007) explain how immense the pressure is to obtain the perfect appearance of femininity via thinness perpetuated by culture. It should be noted that visual media is often the culprit of creating an unnatural or unattainable aura around periods. Popular advertisements for tampons and menstrual pads portray menstruation in a number of ways. However, until recently, none of them showed the reality of menses. To illustrate the impressive absorbency of a product, for example, Tampax (a company well-known for its menstrual products) has used the infamous blue liquid to demonstrate how absorbent their tampons are compared to their competitor’s products. Yet, menstrual discharge does not come in the form of a bright blue clear liquid. Using the blue liquid may create a false idea about periods. The stories perpetuated in these advertisements do not align with reality in other ways, as well. For example, some show bikini-clad women playing beach volleyball while menstruating and their menstrual bleeding as an evenly dispersed thin liquid that can be trapped perfectly in a sanitary device.

Fortunately, some recent campaigns are attempting to change their messages about menstruation as something unnatural and unclean. Menstrual hygiene equipment brand, Bodyform, released a campaign using a social media hashtag #bloodnormal encouraging people share their menstruation stories as a means to counter the stigmatization of menstruation and menstruating women. In some of these stories, for instance, they show a red liquid to represent menstrual blood and the leg of woman in the shower with what can be assumed to be menstrual
blood running down her leg. These advertisements are the first to use the actual color of blood and to provide an essentially stigma free visual image of menstruation.

Enforcing stereotypes surrounding menstruation can possibly result in feelings of shame toward one’s body. These damaging effects to one’s self-esteem and body image can be dangerous to the health of those who experience menstruation. Websites dedicated to PMS (premenstrual syndrome) and PMDD (premenstrual dysphoric disorder) attempt to educate menstruating individuals on why they feel what they feel and how to avoid or manage these symptoms. Woods (2013) suggests that advertisements for birth control are designed to lessen or eradicate one’s menstruation and push the idea that women are not in control of the bodies while menstruating. This suggests a normal healthy function for women’s reproductive organs is uncontrollable without proper medication. This simply cannot be true for all women. Birth control methods like YAZ, criticized for how it publicized its methods and effectiveness, attempt to frame menstruation as an uncontrollable evil that wreaks havoc on a woman’s body monthly (Woods, 2013). Some birth control advertisements make claim their products will diminish or even eradicate symptoms commonly associated with menstruation such as acne, bloating, and emotional outbursts linked to PMDD. According to Stein and Kim (2009), the list of symptoms assigned to menstruation include lower energy levels, unclear thinking, respiratory issues, emotional outbursts, and binging. Let us not forget that these symptoms are not exclusive to the female sex. Transmen often experience menstruation too. Embedded in such arguments are stigmatization claims that could make men and women with similar symptoms feel guilt or shame for what is a natural occurrence to their bodies. Unlike some taboo topics, menstruation is not a ritual an individual chooses to engage in. Rather, it is a natural biological function of the human body.
Definitions

For this study, certain terms are operationally defined as follows.

1. *Menstruation* is defined as the on-going occurrence of one’s body releasing menstrual blood. This act is not exclusive to people who solely identify as women. Menstruation is the experience an individual has with their body (emotional, psychological, and physiological) while the uterine lining is shed. Peranovic and Bentley (2016), explain this to be “regarded as both [a] biological and sociocultural phenomenon” (p. 113). They explain further that there are a multitude of factors like culture and history that form “truths” about menstruation (Peranovic & Bentley, 2016).

2. *Taboos* are defined as a socio-cultural happening generally frowned upon, perceived as shocking when raised in polite conversation, and/or fosters negative social implications. Taboos, according to Richards (2015), are simply topics that should not be mentioned based on the social norms of a culture.

3. Stigmas are operationally defined as societal and cultural opinions of an illness, bodily function, style, lifestyle, etc., that “other” people (i.e., separate others into “lesser than” and/or unnatural categories). Stigmas affect identity and sense of self. Cusack, Jack, and Kavanagh (2003), explain stigma as distinct markings that “stand for significant deviances from perceived social norms” (p. 295). The “deviances” are divisive and lead to “othering.”

4. *Menarche* is defined as the first occurrence of the menstrual period. Marván, Chrisler, Gorman, and Barney (2017), describe this time as a memorable event the menstruating individual will be able to recall for many years. Menarche often occurs during puberty; however, the age range of menarche may vary from person to person.
Goal

The goal of this research study is to understand college student perceptions about menstruation and to examine whether providing a normalized media message aimed at dispelling myths perpetuated by popular culture (i.e., entertainment media) may influence these perceptions and attitudes.

Organization

This thesis is organized into five chapters. Chapter one explores the concept of a taboo, the possible reasons menstruation is a taboo, and why it is important to break the stigma about menstruating. Chapter two provides the literature review of the topics pertaining to menstruation, taboos, and stigmatization as a theoretical framework for unpacking issues regarding health-related topics generally and menstruation specifically. Chapter three describes the methods used in this study. Chapter four offers results and chapter five provides some conclusions, implications, and suggestions for future research.
CHAPTER TWO: LITERATURE REVIEW

This chapter provides a review of related literature on which the research study is grounded. The chapter begins by providing a succinct explanation of taboos in general and menstruation as a taboo topic specifically, as well as the role popular mass media plays in communicating and perpetuating stigmas about them. Taboos are systemically built upon from generation to generation. Attitudes and behaviors regarding menstruation make the topic a taboo. Exploration of the historical context of taboos may provide a comprehensive understanding of how taboos are shaped, as well as how they may impact people and societies. The role of taboos in health contexts is also examined. Stigmatization as perpetuated through communication is also explained as the theoretical framework grounding this thesis project. Finally, based on this review of literature, a hypothesis and research question are posed.

Taboos

The term taboo is actually rooted in the Polynesian word, tubu, which is understood to be a prohibited social action or behavior (Colding & Folke, 2011, p. 584). In other words, a topic is taboo if it is not socio-culturally perceived as acceptable or normal. Taboos, which are based on cultural norms or standards, influence how we interact with one another. Timing, duration, and exposure are factors playing a role in a taboo’s acceptance or overall severity in a culture. Bentley (2017) posits the use of a taboo in rhetoric can change a narrative if the speaker is using it in an unruly manner. However, taboos can sometimes be used effectively to communicate a concept or an important message. Taboo topics, like menstruation which is the focus of this project, are not overtly forbidden in conversation; however, they do tend to be covertly socially unacceptable. In other words, we are socialized to believe it is not appropriate to bring taboo topics up in conversation. Menstruation as a taboo topic is often dependent on the audience’s
level of acceptance pertaining to a menstrual message. Familial, societal, cultural influences, and social norms can all play a role in determining the acceptability of menstruation as a taboo or non-taboo topic.

Taboos are reinforced and perpetuated in myriad ways. Media portrayals can be particularly persuasive in perpetuating cultural norms and/or influencing a culture’s belief about a topic. Menstruation is a topic subjected to such media portrayals, which may trigger numerous negative consequences for menstruating women. To clarify, these misrepresentations of menstruation may be harmful to the perceptions of audiences concerning what constitutes a normal and healthy period, as well as normal and healthy symptoms associated with the menstrual cycle. Moyer-Gusé, Chung, and Jain (2011) posit, for example, that the influence of a taboo topic very often hinders people’s willingness to discuss important subjects. They explain “traditional sources of education . . . do not necessarily teach social scripts,” which, in turn, leads individuals to turn to messages conveyed in the media to learn about sex and other taboo topics. Thomas (2007) concurs by claiming menstruation is often, if not always, perceived as a taboo subject. Moreover, the author examines how rhetoric about periods, even when attempting to close the divide between taboo and normality, is often ineffective. Thomas explains further how the “rhetoric and arguments” presented in popular culture “uphold the discursive regime” reinforcing the taboo surrounding menstrual messages (p. 75). The dangers of treating menstruation as a taboo topic can be unfavorable to a woman’s health and body image.

Body image and self-esteem are fragile, especially to those in puberty – the typical time in one’s life when menstruation begins. Both women and men fall victim to body shaming. For women, the idea of being thin is consistently enforced by media and often family/friends. For men, the standard is quite the opposite. Males endure having to constantly maintain or attain a
hard muscular body, which consequently demands more space. According to Cho and Choi (2011), men and women seek confirmation about their gender and appearance from their peers. Furthermore, it can be noted an individual’s desire for approval regarding body shape, thinness/bulkiness, feminine/masculine, effects overall body image. Interestingly, Montemurro and Gillen (2013) found that menopause, among their respondents, was not a factor in lower body image. However, the entertainment industry in the United States pushes out actresses who are in the menopausal age group. This causes underrepresentation of women who are no longer wrinkle free, hyper thin, and/or fresh faced. A continuation of the perpetuation of being a “perfect” specimen who has no flaws cannot harvest healthy body image perceptions.

Gendered norms such as a body type created by society which assigns a shape to a gender, could produce dangerous outcomes to one’s health. Kraft, Wilkins, Morales, Widyono, and Middlestadt (2014), examine how gender inequalities can affect health decisions. They claim shame associations with health concerns prohibit women from seeking medical attention, even in dire circumstances. Better, more accepting, media literature on the act of menstruating could provide people the opportunity to seek medical attention when necessary. Fibroids, endometriosis, and other painful ailments associated with a woman’s reproductive organs could benefit from more consumer literacy. With more knowledge comes more awareness, which in turn can provide funding for research. Nazione, Pace, Russell and Silk (2015) claim women are the leading audience researched for health communication journals, secondly, some of the most common medical occurrences for women are the least researched topics. Menopause, birth, pregnancy, and sexual health revolve around a woman’s menstrual cycle, yet these topics receive little to no attention in the scientific community. That said, menstruating individuals experience
growth in an unparalleled way. Menstruation can be brutal for some who experience the issues listed above.

Awareness of gender inequalities, body image issues, and hindrances to human interaction provides an opportunity for growth. This growth could lead to cultural and societal changes regarding perceptions about menstruation. Lessening the taboo surrounding menstruation could encourage more informed health decisions and lessen the stigma surrounding the menstrual process. The more normalized media messages about the menstrual process become, the less stigmatized it may also turn out to be. Furthermore, often excluded from the menstruation population, are individuals of the LBGT+ community. As they may be a sizeable portion of menstruating individuals, this community receives little to no representation or opportunity to hold an opinion on the topic.

Perpetuation of menstruation as an undesirable and even unclean taboo is potentially dangerous not only as it stigmatizes those who menstruate, but also as it negatively influences human interactions and relationships. Relationships of any kind can experience varying levels of stress during the times when an individual is menstruating. This stress can be fed by societal views and attitudes regarding menstruation. According to Peranovic and Bentley (2016), negative views and attitudes toward menstruation can be “related to negative views towards women” (p. 113). Managing perceptions of menstruation through education may destigmatize it and, thus, could encourage more supportive relationships for people who menstruate (Peranovic & Bentley, 2016, p. 120). Not only would relationships benefit from less stigmatization of menstruation, but overall health of menstruating people could increase. The hormonal changes during and surrounding menstrual periods can lead to some menstruating people to experience paranoia and low self-esteem (Brock, Rowse, & Slade, 2016). These occurrences of poor mental
health states, if unaddressed, could be dangerous to the well-being and safety of those experiencing menstruation.

**Communication’s Role in Taboos.** Shock value and cultural standards are prevalent when disseminating information through mass media, particularly entertainment media. According to Koszembar-Wiklik (2016), taboos are topics engrossed in a culture’s sense of embarrassment, shame, and secrecy. Further, taboos are shocking and not often part of a culture’s polite conversation. Koszembar-Wiklik (2016) investigated the use and ramifications of taboos like death, violence, and nudity in advertisements and found using a taboo-grounded approach in an advertisement was not only effective in gaining publicity and achieving memorability but could also be produced at a relatively low financial cost.

Advertisers and media influencers use taboos as eye-catching subject matter. These tactics may increase the number of impressions left on consumers, as well as perpetuate the taboo in a negative light. Gurrieri, Brace-Govan, and Cherrier (2016), for instance, conducted a content analysis of advertisements portraying violence against women when selling an unrelated item. They discovered that advertisers may be abusers of taboo topics with no actual intention to create a conversation about the taboo within the advertisement. Moreover, women are often portrayed as objects in the message, rather than human subjects participating actively in the story. Gurrieri et al., (2016) explain what is often coined “shoekvertising” has societal and cultural effects that are difficult to measure but are certainly unavoidable when using this particular tactic.

Honest expression and human interaction can be made more difficult because of perceptions of menstruation. Tshivhase (2015) postulates personhood goes beyond what can be determined by biological factors. Humans are more complex than the cells that make up their
bodies. One social norm in the United States is rooted in the constitutional right of all citizens to engage in ethical self-expression. As social creatures, human beings need social interaction as a means to shape our worldview, which includes our beliefs about what is natural/unnatural and desirable/undesirable. However, taboos can influence people to feel shame and/or guilt about natural biological processes such as menstruation. For instance, if a menstrual leak occurs in public or a menstrual product or device is exposed in front of a group, healthy human interaction might be disrupted. As suggested by Turner and Underhill (2012), guilt is manifested when a situation occurs and the act is not congruent with what are perceived to be “normal” or “appropriate” attitudes or behaviors. As a guilt-driven culture, social norms about a taboo topic like menstruation can lead to negative introspective and feelings of guilt and even failure about appearance, performance, and self-image (Tangney, Miller, Flicker, & Barlow, 1996). When taboos are propagated over time and left unaddressed, they may eventually lead to stigmatization of those embodying a particularly characteristic or behavior (Cusack, Jack, & Kavanagh, 2003). Stigmatization ultimately “others” individuals in negative ways and, consequently, may damage their sense of self-worth.

Findings on Taboos and Communication. Effective communication should be a lot of things, but at its core, it should be accurate, clear, and inclusive. Taboos make achieving this task difficult if not impossible. Communication messages to the masses can be misconstrued or filled with misinformation. With regard to consumer comprehension of communicated taboos, Lawson (2015) conducted a rhetorical analysis seeking to understand how touch is a feminine trait in communication; touch being the taboo. Touch, according to Lawson (2015), creates an empathetic moment between communicators. Cultural norms often form attitudes about touch in conversation and differences in beliefs can may create a perception of touch as a taboo (p. 59).
An individual’s understanding of immediacy and perceptions of touch may hinder their ability to accept the gesture if appropriate.

Taboo topics are to be avoided in conversation. Menstruation falls within this realm of unmentionable themes. Montgomery (1974) explains menstruation may even have been the cause of the initial creation of the term taboo. Additionally, Montgomery (1974) grouped menstrual taboos in categories ranging from the perceived unnatural nature of periods to the superstitions believed about menstruating women being around crops and cooking for men. In an ethnographic study conducted by Montgomery (1974), the author discovered the existence of menstrual taboos correlates to a man’s presence in procreation through the birth process (p. 167). Montgomery’s examination of messages about menstruation sent through a variety of modern communication channels (e.g., television, print/digital ads, social media) revealed bleeding was consistently portrayed as a blanketed experience that “others” individuals who are not witnesses to the advertised experience of menstruation.

**Mass Media Display of Taboos.**

In the United States, taboos often revolve around reproductive health, illnesses contracted from sex, and/or mental health. Moyer-Guse, Chung, and Jain (2011) relay how taboos are often responsible for people evading uncomfortable and unfamiliar topics in conversation. Additionally, avoiding taboo topics in communication puts people at risk for the consumption of misguided understandings about a topic or issue and/or not receiving sufficient information to make an informed opinion (Moyer-Guse, et al., pg. 387). Mass media plays a large role in shaping how receivers interpret taboo topics. Although social marketing techniques are applied with the hope that messages will reach desired audiences, a taboo topic’s portrayal in media could hinder the success of normalizing the topic due to its cultural and societal nuances. An
audience’s readiness and willingness are factors in receiving new information or at the bare minimum acknowledging the differing perspective on lessening the taboo.

As a taboo topic, menstruation is often misrepresented in entertainment media (e.g., television sitcoms). More specifically, television sitcoms often portray menstruating women in one of two ways: as one suffering from a mental illness or as one that is “out of control” in some other socially undesirable way. Kissling (2002) provides examples of televised menarche, examining sitcoms where a woman’s period is part of the storyline. To illustrate, the author describes the male lead in *King of the Hill* as he struggles to understand what is happening, and because of his lack of knowledge about menstruation, his overreactions. Later in the same episode, he is portrayed as extremely uncomfortable while shopping for menstrual supplies. This example illustrates how menstruation is often depicted as an annoying and/or embarrassing experience. In another article, Kissling (2007) examines an episode of *Roseanne*. In it, the parents struggle to help their “tomboy” daughter come to terms with the “unfortunate” onset of her new bodily function, that is, menstruation.

**Role of Communication in Menstrual Taboos.** It is the responsibility of health communicators and entertainment producers to actively advocate for underrepresented populations and taboo health concerns. According to Sundstrom (2014), many health topics concerning women are considered taboos and often stigmatize women who experience them. The taboo nature of menstruation may result in consumers receiving few if any messages about the normality of bleeding. In return, the literacy level regarding menstruation may be low. Moreover, most of the media messages sent today about menstruation tend to perpetuate stigmatization of it in part by creating population segments, that is, those who bleed (women) and those who do not bleed (men). Kavitha (2012), through a descriptive study, determined 32.63% of young girls
lacked information about menstruation prior to menarche. Restrictions on communicating health-taboos run rampant regarding menstruation. The dangers to ensue thereafter can be detrimental to body image and self-esteem.

**Stigmas as a Theoretical/Conceptual Framework**

Stigmas “other” people in ways that caste them as lesser than “normal” people, that is, people that do not embody certain “undesirable” traits or characteristics (Cusack, Jack, & Kavanagh, 203). Essentially, stigmas separate people into desirable/undesirable groups. Goffman (1963) explains victims of stigmatization feel negative social effects because of societal norms and perceptions regarding the characteristic or trait found in the stigmatized peoples. Identity plays a role in stigmas and how they affect one’s sense of self. Stigmas may operate as wedges in social circumstances to divide, for example, the rich from the poor and the healthy from the unhealthy. Goffman (1963) sorts stigmas into three categories: abominations of the body, blemishes of individual character, and tribal (which is any form of identifier to associate an individual with a marginalized group). Based on these categories, then, dominant American norms perpetuated via hegemonic masculinity stigmatize (a) menstruation as an abomination of the body, (b) the enactment of PMS and PMDD symptoms associated with the cycle as blemishes of individual character and, consequently, (c) menstruating women and men as a tribe that is both different from and less than the cultural standard.

**Stigmas in Communication.** The spread of misinformation that leads initially to inaccurate perceptions and ultimately to stigmatization is rooted in communication. Juhila (2004), for example, examined stigmas regarding welfare systems in Finland. Native shelters were categorized by residents and shaped the opinions held about people living in them and how they discussed the topics. She discovered these stigmatized opinions were formed and reinforced
through both interpersonal and mass communication and led to negative consequences in an individual’s self-esteem and relationships. According to Larsen, Patterson, and Markham (2014), tattoos have often been used to stigmatize individuals by differentiating slaves and criminals from other citizens. Today, however, tattoos are a more commonly interpreted as a popular form of art. Thus, tattoos are less stigmatized today, however, they are still not socially acceptable in all arenas (e.g., some businesses and some places of worship). The fact that tattoos are becoming normalized as a cultural norm suggests that similar communication strategies could also lead to a shift in cultural norms about menstruation from a taboo that stigmatizes people to a neutral fact of life about a natural biological function of the body.

*Stigmas in Mass Media.* Stigmas are perpetuated through messages conveyed in a variety of media outlets from traditional media to social media to entertainment media (e.g., Juhila, 2004; Kisslin, 2002, 2007; Moyer-Guse, Chung, & Jain, 2011; Yeh, Jewell, & Thomas, 2017). As discussed throughout this literature review, stigmatization of menstruation and menstruating people is also reinforced and perpetuated through mass media (e.g., advertisements, sitcoms, blogs, social media campaigns) (Cusack, Jack, & Kavanagh, 2003; Johnston-Robledo & Chrisler, 2011; Kissling, 2002, 2007; Peranovic & Bentley, 2016; Sundstrom, 2014).

Although these channels often perpetuate stigmas, some research also suggests they can be used to alter stigmatized perceptions about different topics. Fadnis (2017) examined how digital media may be used to change the way stigmatized topics and people are portrayed, which may lead to a shift in cultural attitudes about them. In another example, Beach (2017) explored the hashtag trend #breffies—a space where people may share self-portrait photography of themselves breastfeeding babies—as not only normal but beautiful. The photos chained out to appear on other Internet forums, blogs, and news pages, as well. As such, they have begun to
normalize a heteronormative stigma about breastfeeding and people that breastfeed as undesirable. If follows that mass media may be an effective channel to convey messages and campaigns designed to normalize the stigma of menstruation. As Fadnis (2017) argues, more media exposure to taboo and/or stigmatized topics such as menstruation may shift cultural perceptions from that of negative stigmas to natural processes and, in the case of menstruation, desirable and necessary processes for procreation.

This review of related literature illustrates some of the negative perceptions about menstruation and the menstrual process currently held as a norm in the dominant American culture and perpetuated in part through mass media messages. Moreover, these negative perceptions about menstruation as a taboo topic result in the stigmatization of menstruating people, which may lead to negative consequences such as negative body image and self-concept, as well as feelings of guilt and shame. Some research suggests that mass media also may be used to convey messages that could ultimately alter such negative perceptions and stigmas. Thus, this research study poses the following hypothesis and research question.

**Hypothesis and Research Question**

Based on this review of literature, this thesis proposes the following hypothesis and research question:

**H:** College students hold negative perceptions of the menstrual process.

**RQ:** To what degree does a normalized message about the menstrual process presented in a television sitcom influence college students’ perception of the menstrual process?
CHAPTER THREE: METHODS

This study examined college student perceptions about menstruation and the degree to which viewing a normalized media message might influence such perceptions. A post-test only quasi-experimental cross-sectional survey design was employed to address the hypothesis and answer the research question. This chapter describes the participants, procedures, and data analysis methods used in this study.

Participants

The sample consisted of 161 participants recruited from several sections of a basic oral communication course at a large southeastern university. Participants were offered class credit for participating in the study. In total, 47.2% of the participants (n=76) were randomly assigned to the treatment group that viewed the menstrual message conveyed on an episode of Blackish before answering the survey questions and 52.7% of the participants (n=85) were assigned to the control group that only answered the survey questions. Of the participants, 62.7% (n=101) were female, 35.4% (n=57) were male, less than 2% (n=3) of participants identified themselves as transgender, agendered, or chose not to disclose gender identity. Most participants were between the ages of 18 and 20 (79.5%; n=128). In total, nearly half of the participants (44.7%; n=72) identified themselves as White non-hispanic. The remainder of participants were Hispanic/Latinx (19.7%; n=40), Asian/Pacific Islander (11.2%; n=18), African American (10.5%; n=17), Multi/Bi-racial (>1%; n=10) and other/I do not wish to disclose (>1%; n=4).

Procedures

Once IRB approval was obtained (see Appendix A), a pilot study was conducted to ensure reliability (α=.78) of the instrument items. For this pilot study, participants (n=39) were recruited through undergraduate speech courses. The students who partook were given extra
credit for participating. Next, participants were recruited via email. Only students 18 years of age or older were allowed to participate in the study. Once participants accessed the online survey through Qualtrics.com and provided consent to participate, the survey system randomly assigned each individual to either a treatment group that viewed the episode of *Blackish* before responding to the survey items or to the comparison/control group that merely answered the survey questions.

**Instruments**

**Survey Questionnaire.** The instrument was comprised of ten Likert-type scale questions ranging from 1 (strongly disagree) to 5 (strongly agree) and three open-ended questions regarding perceptions of and attitudes about menstruation (see Appendix B). The Likert-type scale questions were piloted prior to survey distribution (*n*=39) to determine the reliability of the instrument (*α*=.78). The items on the survey were used to measure perceptions of menstrual process.

**Intervention.** Respondents were randomly assigned to the control or treatment group. Those in the treatment group watched an episode of *Blackish*, an Emmy and Golden Globe award nominated family sitcom airing on ABC during primetime (see Appendix C). The sitcom follows an upper middle class African-American family through their daily interactions, sometimes surrounding socio-political occurrences in current news. The episode used for this intervention, *First and Last*, revolves around youngest daughter Diane’s experiences with menarche (the initial onset of menstruation). Through conversations and support from the women on both the matriarchal and patriarchal sides of the family unit, Diane comes the realization she is not alone in her experience with menstruation and to embrace it as a natural
biological process. This video was selected because of its attempt to normalize the menstrual process through familial dialogue and storytelling.

**Analysis**

The survey responses were examined to discover perceptions college students have about menstruation generally, as well as attitudinal differences among those that viewed the intervention and those that did not. More specifically, the Likert-type scale questions were analyzed using a series of *t*-tests. The open-ended responses were examined using a grounded theory constant comparative approach as originally conceived by Glaser and Strauss (1967) to discover emergent themes. Moreover, these themes were guided by what Lindlof and Taylor (2011) describe as an etic approach which uses established “conceptual categories provided by our disciplinary knowledge and theory” (p. 95). In this case, responses were examined using NVivo, a software designed for coding assistance in qualitative and mixed method studies. The each of the open-ended responses were uploaded into NVivo to determine common themes and popular word choices. Participants discussed menstruation and were framed with a positive or negative valence. Finally, this examination followed Ritchie and Spencer’s (1994) approach to thematic analysis, which affords researchers the ability to analyze data using a priori codes while also remaining open to unanticipated emergent themes. These themes are reported and supported with “illustrative examples” in the results chapter (Gibbs, 2007, p. 33).
CHAPTER FOUR: RESULTS

This chapter reports the results from the analysis of this experiment regarding college student perceptions of the menstrual process and the role of a television sitcom as an intervention to influence them. First, results from the quantitative analyses are offered followed by an account of the themes that emerged from the qualitative examination of responses to the open-ended questions.

Quantitative Analysis

Two sets of t-tests were conducted to test the hypothesis regarding college student perceptions of the menstrual process. The goal was to learn whether their perceptions confirm existing research suggesting people perceive menstruation negatively and, thus, stigmatize menstruating people. Responses from all participants (n=161) in both the control and treatment groups were considered first in aggregate form and then comparatively.

First, the ten 5-point Likert-type scale questions (α =.78) were analyzed based on the assumption that these college students in total hold a negative perception of menstruation and the menstrual process. As illustrated in the descriptive statistics displayed in Table 1, participants do not hold a negative view about menstruation overall since the mean scores ranged from 3.08 to 4.82 on a scale of 1 to 5. Thus, the hypothesis was not supported.
Table 1.

*Overall Mean Scores Regarding College Student Attitudes of Menstruation*

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>N</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean</th>
<th>Std. Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Natural Bodily Function</td>
<td>161</td>
<td>1</td>
<td>5</td>
<td>4.82</td>
<td>.688</td>
</tr>
<tr>
<td>Erratic behavior</td>
<td>161</td>
<td>1</td>
<td>5</td>
<td>3.26</td>
<td>1.148</td>
</tr>
<tr>
<td>Disgusting process</td>
<td>160</td>
<td>1</td>
<td>5</td>
<td>3.71</td>
<td>1.225</td>
</tr>
<tr>
<td>Disclosure of one’s menstruation</td>
<td>161</td>
<td>1</td>
<td>5</td>
<td>3.84</td>
<td>1.030</td>
</tr>
<tr>
<td>Talking about menstruation</td>
<td>161</td>
<td>1</td>
<td>5</td>
<td>4.11</td>
<td>1.112</td>
</tr>
<tr>
<td>Understanding</td>
<td>161</td>
<td>1</td>
<td>5</td>
<td>4.42</td>
<td>.892</td>
</tr>
<tr>
<td>Loneliness</td>
<td>161</td>
<td>1</td>
<td>5</td>
<td>3.08</td>
<td>.981</td>
</tr>
<tr>
<td>Sharing experiences</td>
<td>160</td>
<td>1</td>
<td>5</td>
<td>3.11</td>
<td>1.013</td>
</tr>
<tr>
<td>Mood swings</td>
<td>161</td>
<td>1</td>
<td>5</td>
<td>3.90</td>
<td>1.130</td>
</tr>
<tr>
<td>Avoidance</td>
<td>161</td>
<td>1</td>
<td>5</td>
<td>4.37</td>
<td>.966</td>
</tr>
</tbody>
</table>

Second, to answer the research question regarding the influence of watching a normalizing message about menstruation, an independent samples t-test compared the mean scores of responses reported by students in the treatment and comparison/control group (see Table 2). There were no significant differences on any item other than the first one. To clarify, students in the treatment group did report significantly higher means for “The menstrual process is a natural bodily function” than those in the comparison/control group (see Table 2). However, although the scores by the treatment group ($M = 4.88, SD = .541$) were significantly higher than those in the comparison/control group ($M = 4.76, SD = .797$), both sets of mean scores were generally quite high. Thus, these results reveal that viewing a normalized message about menstruation did not significantly alter participants’ generally positive perceptions about menstruation. The mean score comparisons between groups is provided in Table 3.
<table>
<thead>
<tr>
<th>Survey Item</th>
<th>Equal variances assumed</th>
<th>Equal variances not assumed</th>
<th>F</th>
<th>Sig.</th>
<th>t</th>
<th>df</th>
<th>df</th>
<th>Mean Difference</th>
<th>Std. Error Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Natural bodily function</td>
<td>4.222 .042 1.076 159 .283</td>
<td>.117 .109</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Erratic behavior</td>
<td>1.099 148.679 .274 .117</td>
<td>.106 .157</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disgusting Process</td>
<td>.541 .463 .435 159 .664</td>
<td>.079 .182</td>
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<tr>
<td>Equal variances assumed</td>
<td>.437 158.722 .663 .079</td>
<td>.181 .162</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>Equal variances not assumed</td>
<td>.437 158.722 .663 .079</td>
<td>.181 .162</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disclosure of one’s menstruation</td>
<td>1.166 .282 -.314 158 .754</td>
<td>-.061 .195</td>
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<td></td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>Equal variances assumed</td>
<td>.316 157.667 .753 -.061</td>
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<td>.194 .163</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Talking about menstruation</td>
<td>.137 .712 -.417 159 .677</td>
<td>-.068 .163</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Equal variances assumed</td>
<td>-.418 158.725 .676 -.068</td>
<td>.162 .142</td>
<td></td>
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<tr>
<td>Equal variances not assumed</td>
<td>-.418 158.725 .676 -.068</td>
<td>.162 .142</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Understanding</td>
<td>1.154 .284 .071 159 .943</td>
<td>.013 .176</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Equal variances not assumed</td>
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<td>.175 .153</td>
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<td></td>
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<td>Equal variances assumed</td>
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<td>.142 .122</td>
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<td>-.128 .155</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equal variances assumed</td>
<td>-.815 141.625 .417 -.128</td>
<td>.157 .135</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sharing experience</td>
<td>.291 .590 1.083 158 .281</td>
<td>.174 .160</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Equal variances assumed</td>
<td>1.082 155.942 .281 .174</td>
<td>.160 .146</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Equal variances not assumed</td>
<td>1.082 155.942 .281 .174</td>
<td>.160 .146</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Mood swings</td>
<td>.002 .965 -.062 159 .950</td>
<td>-.011 .179</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Equal variances assumed</td>
<td>-.062 156.745 .950 -.011</td>
<td>.179 .158</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Equal variances not assumed</td>
<td>-.062 156.745 .950 -.011</td>
<td>.179 .158</td>
<td></td>
<td></td>
<td></td>
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</table>
### Survey Item

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>F</th>
<th>Sig.</th>
<th>t</th>
<th>df</th>
<th>Mean Difference</th>
<th>Std. Error Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avoidance</td>
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<td>.256</td>
<td>-.792</td>
<td>159</td>
<td>-.121</td>
<td>.153</td>
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<td>Equal variances</td>
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<tr>
<td>assumed</td>
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</tr>
<tr>
<td>Equal variances</td>
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<td>150.106</td>
<td>.433</td>
<td>-.121</td>
<td>.154</td>
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</tr>
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<td></td>
</tr>
</tbody>
</table>

Table 3.

Descriptive Statistics Between Treatment and Control Group Responses

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>1 (yes)</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Natural bodily function.</td>
<td>1</td>
<td>76</td>
<td>4.88</td>
<td>.541</td>
<td>.062</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>85</td>
<td>4.76</td>
<td>.797</td>
<td>.086</td>
</tr>
<tr>
<td>Erratic Behavior</td>
<td>1</td>
<td>76</td>
<td>3.30</td>
<td>1.108</td>
<td>.127</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>85</td>
<td>3.22</td>
<td>1.189</td>
<td>.129</td>
</tr>
<tr>
<td>Disgusting Process</td>
<td>1</td>
<td>76</td>
<td>3.68</td>
<td>1.176</td>
<td>.136</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>85</td>
<td>3.74</td>
<td>1.274</td>
<td>.138</td>
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<tr>
<td>Disclosure of one’s menstruation</td>
<td>1</td>
<td>76</td>
<td>3.80</td>
<td>.994</td>
<td>.114</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>85</td>
<td>3.87</td>
<td>1.067</td>
<td>.116</td>
</tr>
<tr>
<td>Talking about menstruation</td>
<td>1</td>
<td>76</td>
<td>4.12</td>
<td>1.032</td>
<td>.118</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>85</td>
<td>4.11</td>
<td>1.185</td>
<td>.129</td>
</tr>
<tr>
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<td>1</td>
<td>76</td>
<td>4.47</td>
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<td>.110</td>
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<td>.090</td>
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<td>1.101</td>
<td>.126</td>
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<td></td>
<td>2</td>
<td>85</td>
<td>3.14</td>
<td>.861</td>
<td>.093</td>
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<tr>
<td>Sharing experiences</td>
<td>1</td>
<td>76</td>
<td>3.20</td>
<td>1.020</td>
<td>.117</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>84</td>
<td>3.02</td>
<td>1.006</td>
<td>.110</td>
</tr>
<tr>
<td>Mood swings</td>
<td>1</td>
<td>76</td>
<td>3.89</td>
<td>1.138</td>
<td>.131</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>85</td>
<td>3.91</td>
<td>1.130</td>
<td>.123</td>
</tr>
<tr>
<td>Avoidance</td>
<td>1</td>
<td>76</td>
<td>4.30</td>
<td>1.033</td>
<td>.118</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>85</td>
<td>4.42</td>
<td>.905</td>
<td>.098</td>
</tr>
</tbody>
</table>

Qualitative Analysis

Of the 161 participants, in total, 152 responses to the open-ended questions were coded in this analysis of all three questions. Using NVivo, an application designed to explore open coding
themes, the word “natural” appeared more than any other perception descriptor \((n=64)\). That is, consistent with the quantitative results, the thematic analysis of the open-ended responses suggests most participants believe the menstrual process is natural.

**Positive Perceptions**

The first question, which focuses on positive perceptions participants have about menstruation and the menstrual process, yielded a total of 149 responses. The thematic analysis of these responses revealed two main themes. These themes focused on menstruation as a natural process and womanhood/women’s health.

**Natural Process.** Participants \((n=64)\) seemed far more understanding of the nature of menstruation as a natural process than ignorant or disgusted by menstruation. For example, Participant A responded to the positive thoughts or feelings item by claiming that the “menstrual cycle is healthy and natural. It prepares one's body for conception and carrying a baby. Nearly every cisgender woman and some transgender men experience it. Because of this, these people can have a connection with one another.” Many other respondents seemed to agree with this sentiment. Participant B stated:

I have positive thoughts such as it encourages education among individuals and it also is a natural process that occurs within the reproductive system thus, helping the body fully function to its highest potential. It is a good thing to have because it is the reason people can have children.

Similarly, Participant C also specified that “it is part of a normal female body cycles and there shouldn't be a negative connotation to it.” Participant D took their age and gender into consideration, stating their opinion as follows:
As an adult male over the age of 30, I understand that it is a natural process of a woman's body. It is an important process because it enables reproduction (something none of us would be here without). She should not feel bad about or feel the need to disclose details about it, but she should feel secure because it is a sign of a healthy body. I think that mood swings, while potential the by-product of hormonal imbalances, should be managed with a level of maturity.

As is reflected in these comments, most respondents view menstruation as a natural process. It should be noted, Participant D stated the menstruating individuals should not “feel the need to disclose details” and an aspect of the menstrual process should be “managed.” Table 4 offers additional illustrative examples.

**Womanhood and Women’s Health.** Participants \((n=46)\) related the menstrual process to becoming a woman or as a badge of honor women hold. Participant H stated, “I feel like a woman's first menstrual cycle symbolizes her womanhood because she is now able to conceive and give life to another human being.” Participants noted that not being pregnant and/or knowing that they can get pregnant were positive thoughts they held about the menstrual process. Participant E said, “I know I am not pregnant and that is a good thing because I am too young to be a mom.” Further support of the theme of pregnancy appeared with participants explaining how menses is a reminder they can bear children. For example, Participant F said, “I believe that is a gift as a woman to be able to create life and from my own experience my son has been the best thing that has ever happened to me.” Table 4 offers additional illustrative examples. When participants responded to their positive thoughts about the menstrual process, some stated that it was a sign of a woman’s
health. Participant G said, “well, it's a good indication that my girlfriend isn't pregnant, and that she's healthy and regular.”

Table 4.

**Positive Themes**

<table>
<thead>
<tr>
<th>Natural</th>
<th>Illustrative Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant I</td>
<td>“It is a natural process that happens and is healthy.”</td>
</tr>
<tr>
<td>Participant J</td>
<td>“I'm a cis guy and don't experience menstruation but I understand that some people do and will not treat someone differently for something that is out of their control.”</td>
</tr>
<tr>
<td>Participant AM</td>
<td>“I think its as natural as breathing and there's no reason it should be looked down upon. I'm totally comfortable with it because I grew up with a twin sister.”</td>
</tr>
</tbody>
</table>

| Womanhood/ | Illustrative Examples                                                                 |
| Women’s Health |                                                                                     |
| Participant K | “It is a necessary process that illustrates our fertility; women’s ability to reproduce is amazing. I like that new products have come out like diva cups to help women deal with their cycle. What’s really beautiful to me about my period is it tells me I’m not pregnant and can continue school without the responsibility of a child.” |
| Participant L | “it's an indication that your body is functioning properly, and it can also give women relief to know that they are not pregnant.” |
| Participant M | “I think it is good to know that you are not pregnant, and also when my period is regular I feel healthy.” |
| Participant N | “It's a beautiful part of coming into womanhood and discovering yourself.” |

Overall, the positive themes presented in the open-ended responses supported the quantitative findings regarding menstrual process perceptions. The themes of viewing the menstrual process as natural and a part of becoming/being a woman support not only the non-neutral and non-negative perceptions they also enforce support for positive perceptions.
Negative Perceptions

The second open-ended question asked respondents to discuss negative thoughts and feelings about menstruation and yielded a total of 151 responses. The thematic analysis of these responses revealed three emergent themes. These themes focused on the pain associated with menstruation \((n=55)\), emotions and mood swings \((n=23)\), and menstruation as a taboo/stigmatized topic \((n=27)\).

**Pain.** A number of participants \((n=55)\) mentioned pain as a negative thought and feeling about the menstrual process. Participant O said, “the menstrual process is messy, uncomfortable, and painful. It can be annoying and I feel this way because it is unavoidable unless you take birth control.” Along this same sentiment, Participant A stated, “as a woman, periods can be very painful, annoying, and sometimes can affect my hormones and cause side effects.” Additional illustrative examples of pain associated with menstruation are offered in Table 5.

**Emotions and Mood swings.** Psychologically related negative thoughts were also display among participants \((n=23)\). These negative perceptions related to the variability of emotions that menstruating individuals experience while experiencing PMS and the menstrual process. For example, Participant Q said, “the most overwhelming negative experience concerning the menstrual process consists of the different mood swings certain people experience as well as the pain involved for certain individuals.” Participant A stated, “periods can cause a woman to feel ashamed and awkward, even though it is normal and out of her control. Additional illustrative examples of emotions and mood swings associated with menstruation are offered in Table 5.

**Taboo/Stigmatized Topic.** In support of the literature, participants \((n=27)\) mentioned they perceived the topic of menstruation as a stigma or taboo. Participant A relayed, “there is
definitely a stigma surround periods. I think this may have to do with the fact that it involves
blood and can be "squeamish" or that it involves a woman's genitals.” Participant T stated:

Menstruation is painful, sometimes even debilitating for some. For a long time I believed
it was a shameful process. My mother even taught me to hide my pads in the back of the
grocery cart and avoid male cashiers during checkout. There is such a stigma around it
and even though such a large part of the population goes through menstruation, it is easy
to feel shame and isolation. Not to mention the effects that lack of access to pads and
tampons has on poor communities.

Some participants who viewed the topic as taboo or stigmatized related it back to personal
experiences. Participants also displayed a sense of disgust about the menstrual process.

Participant J related it to other bodily functions stating:

It’s a natural body process, but I think its gross in the same way that defecation or
urination is gross. I would not say this to a person’s face and would respect their privacy,
but I don't think menstruation should typically be brought up in polite or casual
conversation unless there is some sort of emergency or crisis.

Participant G said, “Regularly bleeding from anywhere is kind of inherently disgusting. I don't
really enjoy hearing about menstrual expulsions. Menstruation can cause mood swings for some
people.” Additional illustrative examples of the menstruation as a taboo/stigmatized topic are
offered in Table 5.
## Table 5.

**Negative Themes**

<table>
<thead>
<tr>
<th>Pain</th>
<th>Illustrative Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant U</td>
<td>“It can be very painful and make every day tasks more difficult, frustrating, or uncomfortable. I’m frustrated about the myths surrounding menstruation, especially among men who don’t understand the process and don’t bother to get educated or make the experience easier for women.”</td>
</tr>
<tr>
<td>Participant V</td>
<td>I honestly hate the idea of a menstruation process. Don’t get me wrong, I understand why a menstruation process is necessary, and I’m a guy, so I don’t necessarily have a menstruation cycle, but I’ve read what happens when someone is going through the menstruation cycle (i.e. the pain they felt, the unexpectedness of a menstrual cycle beginning, etc.), and I honestly believe that there has to be a better way speaking in terms of evolution. Like is the pain necessary? Does it really need to be unexpected? Why has evolution failed us in this regard?</td>
</tr>
<tr>
<td>Participant AO</td>
<td>The menstrual process is extremely uncomfortable and painful, often time causing women to be upset and not happy for an entire week.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Emotional/Mood Swings</th>
<th>Illustrative Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant W</td>
<td>“I hate how people assume that because I’m on my period that I’m just uncontrollably moody or craving chocolate. I also think the process kind of sucks because people don’t experience their periods the same way so even though half of the population has a period at some point in their life there’s nothing uniform about it, but that is just me complaining that the human body is ridiculously flawed.”</td>
</tr>
<tr>
<td>Participant X</td>
<td>“The menstrual process sometimes makes women's moods change randomly. Sometimes their feelings are taken out on others. I say this because I grew up with sisters and have experienced when they take out their emotions on me.”</td>
</tr>
<tr>
<td>Participant AP</td>
<td>The menstruation tends to change your mood swings rapidly.</td>
</tr>
<tr>
<td>Taboo/Stigma</td>
<td>Illustrative Examples</td>
</tr>
<tr>
<td>-----------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Participant AN</td>
<td>“There is a negative stigma, but in reality there is nothing that can be changed about this natural process.”</td>
</tr>
<tr>
<td>Participant Y</td>
<td>“Some men deem this process as disgusting and I believe this is wrong. A man should welcome an open relationship with this topic. Some women I know might use this as an excuse to be rude which I don’t support but this is often times not the case. Mood swings are bound to happen.”</td>
</tr>
<tr>
<td>Participant Z</td>
<td>“My negative feelings are related to the negative stigma surrounding the menstrual process, its a part of life and should not be used a insult or a weapon against the women.”</td>
</tr>
</tbody>
</table>

**Media Messages**

The third open-ended item was posed to better understand college student perceptions of entertainment television’s portrayal of the menstrual process. It yielded a total of 152 responses. Unlike the previous data, which tended to place a fairly positive lens on the menstrual process, participants were more critical about the menstrual process’ representation in entertainment media. In fact, 87 of the 152 responses talked about negative portrayals of menstruation in entertainment media and advertisements. For example, Participant AA described menstrual hygiene advertisements as follows:

Tampon and pad commercials always depict women on their periods as happy, doing cart wheels, or jumping. A bit of reality would be beneficial. This false advertisement can prove as a standard for young girls or men as to how a period is ‘supposed’ to be.

The thematic analysis of responses to this item revealed one dominant theme. All the illustrative examples provide insight on how media perpetuates the cisnormative cultural norm that stigmatizes menstruation and people that menstruate.
Stigma. Items coded into this category \((n=87)\) included those where the portrayal of menstruation and its symptoms were stigmatized through exaggeration, comedic relief, and/or cisnormative behavior by characters in media. Participant AB stated, for example:

I see PMS in the media as being offensive because they inflate women's pains to be seen as comedic and as women being dramatic and taking advantage of their circumstances when in reality the menstrual process would be too much for many men to bear. It continues the cycle of women being portrayed as "less than" men.

In support of the exaggeration opinion, Participant AC said:

The majority of times that I've seen the menstrual process on TV, it is highly exaggerated. It makes the female look like she is out of control with her emotions and basically a train wreck. The TV shows take the symptoms and blow them way out of proportion for the comedy of it.

Media representation of the menstrual process, according to participants, seemed to be used for the purpose of comedic relief in the show. Participant AD said, “the menstruation/PMS/the menstrual process on TV are usually exaggerated for comedic effect or television/rating purposes.” Also, Participant AE added:

For one thing, it's really rare that I see it on TV. Last time I remember it was being mentioned was kind of annoying though. It was being joked about, which is totally cool, but it was just playing along stereotypical jokes like, "Someone's on their period" because a girl was upset.

Participants also mentioned men in television as being perpetrators of the enforcing of the stigma around menstruation. Participant AF stated, “the portrayal is mainly a woman being moody and
in pain, causing an uncomfortable reaction by a male character.” Supporting this theme even more, Participant AG said:

Every time I see someone going through their period on TV they're extremely moody, craving a ridiculous amount of food, and/or kind of just stay in bed the whole time. Or when women in a work place speak up their male coworkers assume they're on their period and dismiss what is said.

Additional illustrative examples can be found in Table 6.

Table 6.

**Media-Based Themes**

<table>
<thead>
<tr>
<th>Stigma</th>
<th>Illustrative Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant AH</td>
<td>“I don’t believe tv portrayal is actually the way PMS truly is for some women. Often over exaggerated, nonrealistic, and demon-like.”</td>
</tr>
<tr>
<td>Participant AI</td>
<td>“It is usually exaggerated, but it is understandable because most of the things/shows on the TV is portrayed for entertainment.”</td>
</tr>
<tr>
<td>Participant AO</td>
<td>“Menstruation is often portrayed as much worse and much more disgusting than it truly is, which I believe is for dramatic effect, but may end up scaring younger girls.”</td>
</tr>
<tr>
<td>Participant AJ</td>
<td>“Usually in media this is something I see handled for comedic effect. I believe this might make it more likely that it is something to address or discuss seriously.”</td>
</tr>
<tr>
<td>Participant AK</td>
<td>“I have seen TV shows make jokes about woman on their periods.”</td>
</tr>
<tr>
<td>Participant Y</td>
<td>“The television often times treats the menstrual cycle as a secret matter that men will not tolerate to hear. This often occurs on family guy where the men make fun of the women for this. I don’t support this type of behavior.”</td>
</tr>
<tr>
<td>Participant AL</td>
<td>“It is usually a male asking a female ‘are you on your period.’”</td>
</tr>
<tr>
<td>Participant AR</td>
<td>“Guys usually think it's gross”</td>
</tr>
<tr>
<td>Participant AQ</td>
<td>“PMS is what is mostly brought up and always in a negative way.”</td>
</tr>
</tbody>
</table>
Summary

These results suggest that college students generally do not have negative perceptions of the menstrual process. The normalized media message did not influence perceptions about menstruation or people that menstruate. Students perceive the media to be perpetuating messages that continue to portray menstruation and people that menstruate in ways that perpetuate stigmatization of them. The next chapter offers conclusions and recommendations for future research.
CHAPTER FIVE: CONCLUSIONS, LIMITATIONS, AND RECOMMENDATIONS

Conclusions

The goal of this thesis was to investigate the perceptions held by college students regarding menstruation and whether a normalized entertainment media intervention could influence those perceptions. There is a gap in the current literature regarding the possible linkages between menstrual process perceptions and normalized media representation of the stigma.

The hypothesis posed for this study sought to confirm existing research claiming that people perceive the menstrual process negatively. However, the perceptions reported by college students in this study were not negative and, in fact, were generally positive about menstruation as a natural bodily function whether or not they viewed the media message. This conclusion was born out in both the quantitative and qualitative results. Thus, this conclusion contradicts existing research suggesting that menstruation is perceived negatively as a taboo topic that leads to stigmatization (e.g., Brock, Rowse, & Slade, 2016; Cusack, Jack, & Kavanagh, 2003; Montgomery, 1974; Peranovic & Bentley, 2016; Sundstrom, 2014; Tangney, Miller, Flicker, & Barlow, 1996; Thomas, 2007; Wood, 2003). Perhaps accurate information about menstruation is both available and being sought today, at least by college students.

Moreover, the analysis of responses to the third open-ended question points overwhelmingly to the perception of college students that the media perpetuates stigmatization with regard to menstruation. This confirms existing research about how media portrays menstruation and menstruating people (e.g., Fadnis, 2017; Kissling, 2002, 2007; Wood, 2013). These combined results are encouraging because they suggest that, although college students believe that menstruation is a stigmatized topic and that media perpetuates it, they do not appear
accept it as such in their personal norms and values. Perhaps college students today have been
educated effectively in secondary school and through interpersonal conversations with family
and friends so as to both recognize and discount stigmatizing messages offered in entertainment
media. This conclusion extends research by Moyer-Guse, Chung, and Jain (2011) who argued
that, when people do not learn about taboo topics such as menstruation accurately from credible
sources, they turn to messages offered in media. Perhaps college students are learning from
credible sources, which may afford them the ability to critically analyze stigmatized messages in
media.

The research question aimed to investigate possible changes in perception regarding the
menstrual process if a normalized entertainment media message was provided as an intervention.
The findings from this research study revealed that the media example did not significantly alter
perceptions concerning menstruation. This conclusion may be due at least in part to the fact that
all participants came to the event with perceptions of menstruation as a natural bodily function in
the first place. Thus, there was no need for perceptual/attitudinal change. An intervention
designed to influence perception from negative to positive is not likely to produce such results
when participants do not come to the experience with negative perceptions to begin with.
Perhaps identifying a population that perceives menstruation negatively in stigmatized ways at
the outset would produce different results.

Limitations

Due to time and access constraints, this study only scratched the surface of perceptions
toward stigmatized messaging in entertainment media. The sample of college students could be
problematic because of their general openness and willingness to accept new ideas. That is, all
participants came to the experience with fairly positive perceptions about menstruation as a
natural biological function. Thus, it may have been more fruitful to identify a purposive sample to ensure that participants came to the experience with negative perceptions at the outset. Doing so might provide more interesting insight about the utility of a television sitcom such as the Blackish episode to positively influence negative perceptions and stigmatized beliefs.

In addition, more than half of the participants were women. Although not directly relevant to the hypothesis or research question, perceptions regarding the menstrual process may appear more positive because most of the participants are women that experience menstruation themselves.

Another limitation of the sample was the subject matter for which they were disclosing their opinions. Taboo in nature, menstruation possibly caused participants to feel slight psychological discomfort. This in turn may have resulted in several face-saving tactics to hide what the participant could believe is a shameful or embarrassing topic to discuss.

Another possible limitation may have been the time spent with the intervention itself. Since the experiment did not take place in a controlled environment, there was no way to determine whether or not participants watched the video in its entirety (i.e., fast forwarding, skipping).

Finally, the Blackish episode used as a normalized media sample could be considered a limitation of the research. The episode is well established, however there may be strong opinions held about the cast, the title of the show, and the shows regular socio-political driven content. It should be noted this was taken into consideration when vetting content for the normalized entertainment media example.
Recommendations

Any good research study ought to give rise to future research questions. Several ideas came about through the process of conducting this project. Broadening the scope of research in terms of methods, as well as sample population could produce richer data. Allocating more time to the two items that did not have significance possibly due to their more personal nature could allow for a new avenue of research regarding menstrual process perceptions. Communication researchers could further this investigation by analyzing perceptions held by all genders in more intimate settings (i.e., interviews or focus groups). Exploring outside the college-sphere could enrich the data too. Demographics connected to socio-economic factors alluding to privilege (i.e., ethnicity, gender, etc.) may be worth investigating regarding stigma and media representation. Perhaps examination of adolescents’ perceptions about menstruation in general and an intervention such as this one could counter negative stigmatization from the outset of menses.

Future exploration of the menstrual process in media from a health communication perspective could benefit all. A proactive application of these findings combined with more formative research for targeting a market could be used for a social marketing campaign to lessen the stigma surrounding the menstrual process. Finally, future research should acknowledge the role of entertainment media messages to shape perceptions, both positive and negative, as well as focused on other taboo and stigmatized topics.
APPENDIX A: IRB APPROVAL
Determination of Exempt Human Research

From: UCF Institutional Review Board #1
FWA00000351, IRB00001138

To: Mary Jane O'Toole and Deanna Sellnow, PhD

Date: February 16, 2018

Dear Researcher:

On 02/16/2018, the IRB reviewed the following activity as human participant research that is exempt from regulation:

Type of Review: Exempt Determination – Category 2 – Adult Participants
Project Title: Coming to a full stop: an investigation of menstrual period stigmas in college students
Investigator: Mary Jane O'Toole
IRB Number: SBE-17-13703
Funding Agency: N/A
Grant Title: N/A
Research ID: N/A

This determination applies only to the activities described in the IRB submission and does not apply should any changes be made. If changes are made and there are questions about whether these changes affect the exempt status of the human research, please contact the IRB. When you have completed your research, please submit a Study Closure request in IRIS so that IRB records will be accurate.

In the conduct of this research, you are responsible to follow the requirements of the Investigator Manual.

This letter is signed by:

[Signature]

Signature applied by Jennifer Neal-Jimenez on 02/16/2018 08:56:52 AM EST

Designated Reviewer
DEMOGRAPHICS

Please select one option per question.

1. Age 18-20 21-23 24+

2. Ethnicity
   a. White (non-Hispanic)
   b. Hispanic or Latino
   c. African American or Black
   d. Native American
   e. Asian/Pacific Islander
   f. Multi/Bi-racial
   g. Other
   h. I do not wish is disclose

3. Gender
   a. Female
   b. Male
   c. Transgender
   d. Agendered
   e. I do not wish to disclose

4. Sexual orientation
   a. Heterosexual
   b. Bisexual
   c. Homosexual
   d. Other
e.  I do not wish to disclose

**SURVEY**

On a scale with being 1 - Strongly Disagree, 2 - Disagree, 3 - Neither Agree nor Disagree, 4 - Agree, 5 – Strongly Agree reply to the statements below:

1. The menstrual process is a natural bodily function. 1 2 3 4 5

2. Menstruating people behave erratically. 1 2 3 4 5

3. The menstrual process is disgusting. 1 2 3 4 5

4. It is not appropriate to disclose that one is menstruating. 1 2 3 4 5

5. It makes me uncomfortable when people talk about menstruation. 1 2 3 4 5

6. Being more knowledgeable about the menstrual process makes people more understanding. 1 2 3 4 5

7. Very often, people tend to feel alone because of menstruation. 1 2 3 4 5

8. It is important to share personal menstrual experiences with friends and family. 1 2 3 4 5

9. PMS is just an excuse people use for controllable mood swings. 1 2 3 4 5
10. I avoid people when I know they are menstruating. 1 2 3 4 5

Please provide answers to the following questions.

Describe your positive thoughts and feelings about menstruation and why.

Describe your negative thoughts and feelings about menstruation and why.

Think about a time you saw menstruating/PSM/the menstrual process on TV. If you can recall where you watched the portrayal, please provide those details. In a few adjectives, how you describe the portrayal you witnessed?
APPENDIX C: INTERVENTION
Intervention I. **Link to *Blackish Episode:*** Season 4, episode 6 titled *First and Last.* Hyperlink:

[Blackish episode 4-6 First and Last](#)
REFERENCES

Assessment of an Electronic Intervention in Young Women with Heavy Menstrual Bleeding.


doi:10.1007/s00737-015-0558-4

doi:10.1080/10510974.2011.577500


