

PERIOD TABOO AND PERIOD POVERTY IN TURKIYE: COHORT  
COMPARISON

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COMPARISON**

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## ABSTRACT

### PERIOD TABOO AND PERIOD POVERTY IN TURKIYE: COHORT COMPARISON

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Menstruation, which is experienced by approximately half of the population, is a stigmatized, hidden, concealed, and unspoken phenomenon despite being a part of daily life. Literature and studies in both the world and Türkiye are limited. This thesis, which aims to fill the gap in the literature, focuses on the concepts of period, period taboo, and period poverty in light of feminist methodology. While examining these concepts, in total 32 semi-structured in-depth interviews were conducted focusing on the experiences of menstruators between the ages of 18-25 and 40 and above in Türkiye. The differences in the menstrual experiences of these two groups were examined. During this examination, feminist methodology, intersectionality, queer theory, and body politics were utilized. The aim of comparing these two groups is to observe how different generations perceive period, to understand how habits have changed, to analyze how age factor shape period experiences and to examine whether period taboo and period poverty are still inherent in society.

**Keywords:** period taboo, period poverty, menstruation, gender, Türkiye

## ÖZ

# TÜRKİYE'DE REGL TABUSU VE REGL YOKSULLUĞU: KOHORT KARŞILAŞTIRMASI

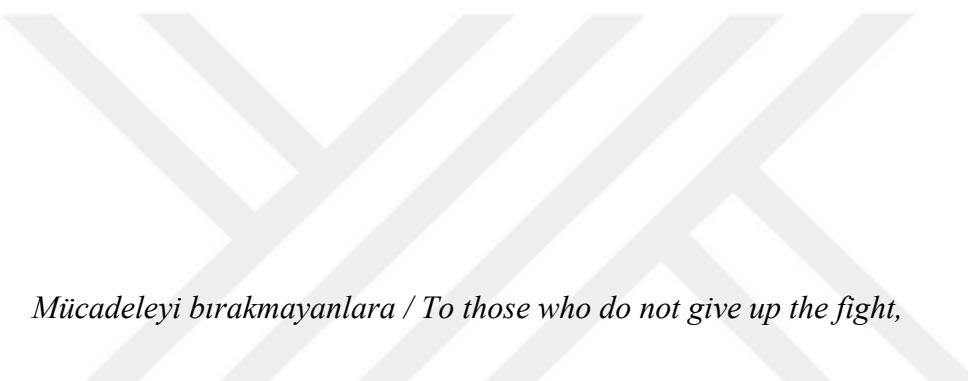
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Nüfusun aşağı yukarı yarısının deneyimlediği regl, günlük hayatın bir parçası olduğu halde stigmatize edilen, saklanan, gizlenen, konuşulmayan bir olgudur. Hem dünyadaki hem de Türkiye'deki literatür ve çalışmalar kısıtlıdır. Literatürdeki bu boşluğu doldurmayı amaçlayan tez, feminist metodoloji ışığında regl, regl tabusu ve regl yoksulluğu kavramlarına odaklanmaktadır. Bu kavramları incelerken Türkiye'deki 18-25 yaş arasındaki ve 40 yaş ve üzeri menstrüatörlerin deneyimlerine odaklanılan toplam 32 yarı yapılandırılmış derinlemesine görüşmeler gerçekleştirildi. Bu iki grubun regl deneyimlerinde ne gibi farklılıklar olduğu incelendi. Bu inceleme sırasında feminist metodoloji, kesişimsellik, queer teori ve beden politikaları olgularından faydalandırıldı. Bu iki grubu kıyaslarken amaç, farklı jenerasyonların regli nasıl algıladığını gözlemlemek, alışkanlıkların nasıl değiştiğini anlamak, yaş faktörünün regl deneyimlerini nasıl şekillendirdiğini görmek ve regl tabusu ve regl yoksulluğunun topluma içkin olup olmadığını incelemektir.

**Anahtar Kelimeler:** regl yoksulluğu, regl tabusu, menstrüasyon, toplumsal cinsiyet, Türkiye



*Mücadeleyi bırakmayanlara / To those who do not give up the fight,*

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## **LIST OF ABBREVIATIONS**

|          |  |
|----------|--|
| AFAB     | Assigned Female at Birth   |
| JMP      | Joint Monitoring Programme   |
| LGBTIQA+ | Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Asexual Plus |
| MHM      | Menstrual Hygiene Management                                       |
| NGO      | Non-Governmental Organization                                      |
| TGD      | Transgender Diverse  |
| WASH     | Water, Sanitary and Hygiene  |

## CHAPTER 1

### INTRODUCTION

At the pole, it is six months night and six months day. The equator is always rainy. Some people live by the sea, some people in the middle of the desert. Some people learn to swim with sharks at the age of five, some people hunt wild boars. In some geographies, ten-year-old children are forced into marriage, while in some places their peers go to summer camps. Some children are slapped when they first menstruate, some children have period parties. Some children hate menstruation and are ashamed, some children overcome all obstacles. Wherever we go in the world, someone is menstruating: about half of the population. In other words, about half of the population mostly feels negative feelings such as shame, control, and pressure related to menstruation. The remaining half of the population never talks about it.

Governments try to control their citizens with politics and pressure. Bodily experiences and practices such as sexuality, fertility, contraception, menstruation, abortion and so on are tried to be restricted according to the political agenda of the states.

It is important to emphasize that restriction of bodily experiences and practices are not specific to certain countries. These restrictive and controlling actions take place worldwide. The intensity and frequency of the events may vary. However, suppressive governmental and social behaviors are encountered everywhere in the world, in every geography. For example, in a world where capitalism is the dominant factor, income inequality and poverty can be observed in every region.

Although menstruation is a biological process and part of a natural life cycle, it has profound effects on individuals due to the meanings it carries in social, cultural and economic contexts. As is the case worldwide, in Türkiye too, the subject of menstruation is often tabooed, hidden and, in this respect, shapes the experiences of

menstruators. While social norms and cultural perceptions regarding menstruation play a determining role in how menstruators experience this process, economic inequalities lead to the emergence of deep problems such as period poverty. Period poverty is not only a matter of access to menstrual products, but also a reflection of broader economic and social inequalities. Therefore, addressing menstrual experiences is critical to achieving gender equality.

The main purpose of this study is to deeply examine the experiences of menstruators from Türkiye in both individual and social contexts. The research aims to understand the differences and similarities between the age groups by comparatively examining the menstrual experiences of individuals aged 18-25 who are undergraduate students and individuals aged 40 and over who have at least a bachelor's degree. The findings showed that age is not a determining variable on its own, and the main factor shaping menstrual experiences stems from individuals' rural and urban origins. For example, while some individuals aged 40 and over do not encounter the period taboo at all, some individuals in the 18-25 age group still experience traditional practices such as the menstrual slap. This situation indicates that social change does not proceed uniformly, but rather manifest differently in different geographical and cultural contexts.

This study, which critically approaches the assumption that every woman menstruates, is designed within a framework that goes beyond the binary gender system and includes the experiences of transgender and genderqueer individuals. This approach is based on a feminist methodology that aims to understand the diversity of gender and the effects of this diversity on menstrual experiences, not limited to addressing only a biological process. Semi-structured in-depth interviews were conducted in the study, and questions were asked about the menstrual experiences of individuals in five main categories: menarche, menopause, menstrual stories from family members, menstrual products, and menstruation in public spaces. These comprehensive interviews made it possible to understand the life stories and menstrual experiences of individuals from a multidimensional perspective.

This research aims to both fill an important gap in the literature and raise awareness about gender equality by making period taboo and period poverty visible. This study, which covers different age groups regarding menstrual experiences, aims not only to

understand the impact of social norms on individuals but also to create a discussion ground for transforming these norms. In this respect, the research aims to contribute to the struggle for gender equality and ongoing awareness studies on period taboo and period poverty, both theoretically and practically.

### **1.1. Significance of the Study**

This study aims to make significant contributions to both the social sciences literature and social awareness by addressing the menstrual experiences of menstruators from Türkiye in a multidimensional manner within the framework of feminist methodology. Despite being an inseparable part of individuals' lives, menstrual experiences have been a subject that has been ignored or only superficially addressed for many years due to social norms and cultural taboos. Especially in countries where traditional social structures prevail, such as Türkiye, the fact that the subject of menstruation is still seen as a taboo prevents individuals from expressing these experiences freely and from discussing this issue openly in society. In this context, the aim of the study is not limited to making menstrual experiences visible; it is also to understand the pressures and coping strategies that individuals are exposed to during these processes by revealing how these experiences are shaped in the context of gender norms, cultural expectations and economic inequalities. In addition to economic dimensions such as period poverty, a multi-layered analysis will be conducted by examining how individuals' relationships with their social environment and cultural values affect these experiences. The contribution of the study to the literature is not limited to filling the existing theoretical gaps by examining menstrual experiences from a feminist perspective; it also analyzes the concrete effects of these experiences on the daily lives of individuals and the connections of these effects with wider social structures. In this way, it is aimed to take an important step towards breaking the period taboo, combating period poverty and developing more conscious policies on gender equality, both at academic and societal levels.

### **1.2. Research Questions**

This study aims to examine the reflections of period taboo and period poverty in different social, cultural and economic contexts in Türkiye. Menstruation is an

experience that carries deep social and cultural meanings, as well as being a biological process, and these meanings are shaped by the different identities of individuals and the environments they live in. By adopting a feminist methodology, the study aims to understand the impact of different identities and social categories (such as age, education level, disability, sexual orientation, gender identity, class, ethnicity, race, language, religion) on menstrual experiences (Taylor, 1998).

The first research question is determined as follows: *How do sociocultural transmission and economic conditions intersect in the experiences of period taboo and period poverty in Türkiye?* Period taboo and period poverty are not only biological phenomena, but also experiences shaped by the influence of social norms, cultural beliefs, and economic conditions. While sociocultural transmission is related to the familial and societal messages individuals receive about menstruation, economic conditions are related to inequalities in access to and provision of menstrual products. In the context of intersectionality, the interaction between these two factors transforms menstrual experiences in different ways. For example, an individual growing up in a village may face period taboo due to cultural transmissions among family members, while this situation may be different for an individual of the same age living in a city. Similarly, individuals with lower economic means may have difficulty accessing menstrual products, while individuals from higher classes may be more comfortable in this regard. In this context, how sociocultural and economic factors intersect, and shape menstrual experiences will be examined.

The second research question is determined as follows: *How do the period experiences of individuals between the age of 18-25, who are undergraduate students and who have menstruated at least once in their lives, and those who are 40 years and above, with at least a bachelor's degree, and who have menstruated at least once in their lives?* This question examines how factors such as age, education level, and gender identity shape menstrual experiences. Similarities and differences between age groups are related to how social norms and values change over time. For example, while the menstrual experiences of individuals aged 18-25 are shaped by factors such as social media, education, and modern health information, individuals aged 40 and over may have grown up in more traditional social structures. However, beyond this age difference, attention should also be paid to the different identities, family structures,

and economic conditions of these groups in the context of intersectionality. An individual's age is not just a variable; it will help us better understand how menstrual experiences are shaped by factors such as their gender identity, education level, geographic origin, and economic status. In this context, similarities and differences across age groups will also reflect the unique experiences that emerge from the intersection of these different identities.

The answers to these questions aim to reveal how period taboo and period poverty are experienced in different social layers in Türkiye. The study aims to understand how the intersections between individuals' identities and social positions, as well as age and education level, transform menstrual experiences. This approach will enable a deeper analysis of social problems such as period taboo and period poverty and create an expanded discussion area on gender equality, cultural norms and economic inequalities.

### **1.3. Thesis Structure**

This thesis presents qualitative research that aims to examine the period taboo and period poverty in Türkiye within social, cultural and economic contexts. The research aims to understand how menstrual experiences vary and intersect across different ages, education levels and gender identities. The study is conducted in light of a feminist methodology and the concept of intersectionality and investigates how period taboo and period poverty permeate the daily lives of individuals in Türkiye. In this context, the thesis consists of five main sections. The first chapter named *Introduction* begins by explaining the purpose, significance and scope of the study. Focusing on the experiences of menstruators from Türkiye, this study aims to understand how important social issues such as period taboo and period poverty interact with individuals' social identities and living conditions. This chapter defines the key concepts used throughout the study and discusses how these are shaped by gender and social norms. In addition, the study's main research questions are explained. The chapter places the reader in a general framework with the objectives and significance of the study. The second chapter named *Literature Review* comprehensively examines

previous studies on period taboo and period poverty. The literature review details how menstruation intersects with gender, culture, economic inequality, and health policies. It discusses how period taboo and period poverty are shaped by gender norms, cultural beliefs, economic conditions, and family structures. It also includes theoretical explanations on the feminist methodology and intersectionality perspective used in this thesis. The literature review was conducted to outline what kind of gaps the study fills in these areas and what contributions it will make to these fields. The study's connections to literature, comparisons with previous research, and original contributions in this field are detailed. The third chapter names *Methodology* explains the design and methodological approach of the study. It explains that the study is a qualitative study, organized with a feminist perspective, and that in-depth interviews were conducted to understand the menstrual experiences of individuals based on the understanding of intersectionality. Participants were selected from two main groups: undergraduate students between the ages of 18-25 and individuals aged 40 and over with at least a bachelor's degree. In this section, the data collection tools and data analysis methods are explained in detail. In addition, the ethical principles of the study, the regulations regarding the confidentiality and security of the participants, and the limitations of the study are discussed. The section provides a reader with information on how the research was conducted. The fourth chapter named *Findings and Discussion* presents the findings of the study and is based on thematic analysis of data obtained from in-depth interviews. The findings are presented around the main themes that emerged regarding how period taboo and period poverty are shaped in the lives of individuals in different age groups. It also discusses how socio-cultural transmission, and economic conditions intersect and how these interactions transform menstrual experiences. The participants' discourses on their menstrual experiences are examined within the framework of different variables such as age groups, education levels, and gender identities. In particular, the similarities and differences observed in the shaping of menstrual experiences with age are emphasized. The concept of intersectionality is discussed in terms of how the participants experience their different identities and how these identities transform their menstrual experiences. The findings are compared with the literature, contributions are made to previous studies, and meaningful inferences are made in the context of the research questions. The fifth and last chapter named

*Conclusion and Recommendations* summarizes the research findings and discusses how these findings have meanings within the framework of gender, culture and economy. The impact of period taboo and period poverty on the lives of individuals in Türkiye and how these impacts are experienced in an intersectional manner are revealed. The section also evaluates how this study contributes to gender equality, menstrual health and policies. The recommendations of the study focus on creating public awareness about menstrual care and access to menstrual products, improving health policies and breaking the period taboo. In addition, recommendations for future research are made and potential gaps in this area are addressed. This study, which is expected to inspire researchers conducting research on menstruation, also provides an experience of what kind of situations are encountered while conducting research on a taboo subject such as menstruation with a feminist methodology in Türkiye.

## CHAPTER 2

### LITERATURE REVIEW

#### 2.1. Purpose of Literature Review

A literature review in an academic study aims to identify gaps in knowledge in the relevant field by establishing the theoretical and conceptual framework of the research. This section clarifies the basic concepts and approaches on which the research is based, analyzes the results of existing studies, and provides the reader with an in-depth understanding of the subject. In particular, the literature review is of critical importance in understanding how concepts such as period taboo and period poverty, which are discussed in this thesis, are shaped within the framework of individuals' gender roles, economic inequalities, and cultural norms.

In the context of the feminist methodology preferred in this study, the literature review goes beyond the binary gender system and emphasizes a perspective that does not reduce menstrual experiences to womanhood alone. Feminist research is a powerful tool, especially for understanding the effects of social taboos and economic inequalities on individuals. In this context, discussing how the period taboo is historically and culturally constructed and how period poverty is intertwined with economic disadvantages strengthens the theoretical foundations on which the research is based.

This section will also include the concept of intersectionality, emphasizing that individuals have different experiences at the intersection of multiple identities and affiliations. For example, factors that affect an individual's menstrual experience include economic status, age, level of education, and gender. Studies in the literature shed light on how these intersections interact with period taboo and period poverty.

The literature review in this thesis analyzes the multidimensional nature of menstrual experiences by bringing together academic studies from both Türkiye and the international arena. This analysis provides a framework for better understanding the main questions of the study and reveals the gaps in the literature and the contributions

that need to be made to fill these gaps. For example, considering that menstrual experiences are generally limited to women in existing studies, this study's more comprehensive analysis beyond the binary gender system and focusing on the experiences of menstruators in Türkiye is considered an important contribution to the literature.

## **2.2. Period**

Although menstruation is defined biologically as the process of uterine wall renewal, this phenomenon is not only a physical reality, but also contains different meanings and experiences in social, cultural and economic contexts. The meanings that societies attribute to menstruation deeply shape how individuals experience menstrual processes. Menstruation is a cycle that affects not only the biological functions of individuals, but also their identities, social roles and subjectivities.

Throughout history, talking about menstruation has been considered a taboo in most cultures, and this biological process has generally been kept within the boundaries of individual privacy. However, in modern societies, menstruation is no longer associated only with femininity but is also considered as an experience that goes beyond the binary gender system. In this context, concepts such as period taboo, period poverty and social inequality are increasingly finding a place in today's academic literature, and contributions from different disciplines are being made to understand the menstrual experience.

The meaning of menstruation may vary depending on individuals' life experiences and the social context they are in. For example, while this process may be considered natural as a biological cycle for individuals who menstruate, it may also be associated with feelings of shame, secrecy, and exclusion due to social norms. While economic inequality poses a significant obstacle to accessing the products necessary for menstrual care, period poverty emerges as another factor that deepens gender inequalities.

The menstrual experience is not only a matter of menstruators; society as a whole bears responsibility for maintaining or transforming period taboo. Therefore,

understanding menstruation not only as an individual experience but also as a social phenomenon is necessary to overcome the prejudices and inequalities surrounding menstruation.

In this section, a comprehensive framework will be presented regarding the multi-layered nature of menstrual experiences by giving examples from the literature that examines the biological and social dimensions of menstruation.

### **2.2.1 Definition of Period**

In this thesis, menstrual experiences are not only considered as a biological process, but also their social, cultural and economic contexts are examined. However, understanding the biological basis of menstruation is of critical importance in order to grasp the physiological realities at the core of these experiences. Menstruation arises from basic biological processes such as the renewal of the uterine wall in a certain cycle, and these processes have direct effects on the physical health of individuals. There are numerous studies in the literature on the effects of menstruation on hormonal regulation, reproductive health and the general physiology of the individual. These biological perspectives help us understand how social meanings of menstruation are shaped, while also providing the opportunity to analyze the effects of access to menstrual products, period taboo and period poverty on physical health. Therefore, analyzing the biological meaning of menstruation is a fundamental step in reaching a comprehensive framework for this study.

The term *menstruation* is mostly used by medical professionals and authors who have a medical approach. In English speaking societies, *period* is commonly used.

The dominant and widespread understanding is to treat menstruation medically. This medical approach has a risk of reducing menstruation to biology. There is also a risk of overlooking experiences and thoughts of menstruators. Focusing only on the medical and biological meaning of menstruation creates a risk that bodily experiences and practices of menstruators could be overlooked. With the rise of critical menstrual studies, studies conducted within the framework of feminist theory and activist actions,

today we can approach menstruation beyond its medical and biological meaning. For example, the answer to the question of what the experience of menstruation is socially, culturally, communally and individually is sought.

This study will focus on social, cultural and feminist meanings of the menstruation. It is highly important to understand menstruation beyond medical literature and explore different meanings of it.

However, it is crucial to define menstruation biologically and to see the medical approach's ideas on this subject, to realize that menstruators who have different and unique menstrual experiences are trying to be squeezed into a mold.

Firstly, it is important to emphasize that medical approach mostly consider the society as a mix of female and male bodies. In other words, medical approach usually considers people as two categories: male and female. This binary gender approach is not what this thesis adopted but explains other researchers' ideas. For researchers who have medical approach, menstruation is mostly a sign of being female. Menstruation is seen as a symbol of womanhood. It can be considered that medical approach has heteronormative and binary understanding of sex and gender (Frank, 2020). So, womanhood, motherhood, woman body and femininity are highly related to concept of menstruation.

According to the World Health Organization (WHO) (2021), menstruation is a result of hormonal changes and physiological processes in the reproductive system of women. This approach also adopts the binary gender system.

Menstrual cycle is considered as twenty-eight days. Today, studies show that environmental, genetic, psychological and biological factors can affect the duration of cycle.

With the rise of feminist and LGBTIQA+ movements, the claim that women menstruate, which is a normative way of thinking, has been broken. According to Bobel, not all women menstruate, and not all menstruators are women (2010). This way of thinking and conceptualization is more inclusive than the traditional binary gender categorization.

It is useful to understand queer approach on this specific topic. Period taboo is widely experienced all over the world. Period taboo is in short, avoiding all topics and discourses about menstruation, such as not telling or conveying the experience, is an action that can create extremely risky consequences for menstruators. Period taboo will be discussed in detail in the following sections. There is another taboo in period taboo. Who is menstruating? Who has period? Most of the studies that have binary sex understanding claimed that girls and women have period. Today, it is more freely stated that period has no gender. People are experiencing to having period without necessarily being girl or woman. Also, not all the girls and women have not period. There can be different health conditions, lifestyle habits that can affect menstruating or not.

In the study of Shazia Ahmad and Matthew Leinung (2017), it is stated that there is a relation between bodily dysphoria and menstruation for transgender men. The aim of their study is that understanding the impact of hormonal therapy towards transgender menstruators. Their study revealed that menstruation can be challenging for transgender men, and hormonal therapy can end their cycle in order to fight against negative body image.

Joan C. Chrisler et al. (2016) claimed that in their study queer identities who has experienced menstruation is commonly negative. Having menstruation as a queer individual is hard to manage because of taboo. Menstruators mostly hide their period for safety issues. This results in medical problems and health issues. For example, health issues such as menorrhagia and endometriosis are mostly overlooked, and menstruators with these health issues cannot even get a diagnosis.

Sarah E. Frank (2020) stated that menstruation is seen as a symbol of womanhood historically. It is seen as a function of female body that affects women. They mentioned that in an interaction, genitalia, chromosomes and hormones are not visible. Mostly, make-up, body hair, clothes give the hint to people. Non-normative bodies are marginalized and seen as other. The issue of otherness is real. So, the transgender and genderqueer experiences of menstruation is seen as other side of the coin: unwanted and ignored side.

According to Eric Weiselberg (2022), menstruation is a female normative process. It is a symbol of fertility, womanhood, motherhood and so on. Menstruation can be

celebrated in some societies but for transgender males and other gender diverse individuals, there is nothing to celebrate. It triggers gender and body dysphoria. Menstruation and menarche mostly mean anxiety, depression and suicidal thoughts for transgender individuals. Weiselberg emphasized that menstrual dysphoria is not happening for all the transgender-diverse (TGD) and Assigned female at birth (AFAB) individuals but for some, it has been experiencing and triggering different mental and physical issues.

Meral Salman Yıkmiş also mentioned symbolic meaning of menstruation similar to Eric Weiselberg's example. Salman Yıkmiş stated that period can be seen as the symbol of fertility, motherhood, womanhood, femininity, health etc. Also, it can be seen as dirty, supposed to be hidden, supposed to be ashamed of. This is very contradictory. According to Simone de Beauvoir, menarche is experienced like a crisis. Women experiences their own body like an obstacle. Teenage girl disgusts of period because it is the symbol of femininity that not the part of natural masculine body. In other words, normal body is not-bleeding body. If a person wants to be normal, should hide their period. Because the period is disgusting, abnormal, and dirty (2020).

Hiding period should be a norm in patriarchal, capitalist, controlling world order. Salman Yıkmiş explains it as there are both religious and secular practices toward period. Mystical, spiritual, supernatural practices have existed. Period etiquette (*regl adabi* in Turkish) is a term that consist of all the manners about period, how to hide, how to stay silent, how to not share experiences, how to dispose used products, and so on (2020).

Merve Yılmazbilek mentioned that in many cultures, period seen as a symbol of womanhood, sexuality, femininity, fertility (2022).

In their very recent study, Jodie Bigalky et al. (2024) mentioned that historically, menstruation has been researched and considered as a female bodily process. Transgender and genderqueer individuals' experiences with menstruation also exists. Menstruation itself is a natural and physiological process, but the experiences related to it are mostly negative and undesired. Transgender and genderqueer individuals' experiences is overlooked and even more negative. They need to keep their state of menstruation as something secret.

According to Bobel (2010), classical approach to menstruation which mostly claim that only girls and women have menstruation neglects some facts. There are transwomen and non-trans women who do not bleed because of different reasons. Saying that menstruation is a symbol of womanhood is exclusive statement for queer individuals and individuals who assigned female at birth.

The Student Environmental Actions Coalition (SEAC)'s campaign which named *Tampaction* also emphasized the fact that not all women menstruate and not all people who menstruate are women. Their motivation behind the campaign was informing people about menstruation as a non-gender topic. They summarize the issue of who is menstruating with the answer of lots of people menstruating. So, it is important to consider menstruation as a non-gendered topic rather than a symbol of femininity and womanhood.

In 2020, S. E. Frank and Jac Dellaria conducted a study called "Navigating the Binary: A Visual Narrative of Trans and Genderqueer Menstruation". In their work, they stated that the historical approach to menstruation is highly related to the concept of femininity. Social norms about menstruation expect from the society to act in the limitations of femininity roles and stereotypes. The same social norms also pathologizing transgender and genderqueer bodies and the experiences of them. So, it is essential to use inclusive discourse about menstruation that non-pathologizing queer bodies.

Miren Guilló-Arakistain (2020), explained the term menstrual normativity in their study. Transgender men, genderqueer individuals, women who experience menopause, pregnant or breastfeeding individuals, people who are taking hormonal contraceptives, athletes, people who lose weight in a short time, some people with eating disorders, and people who have various of disorders that prevent menstruation do not experience menstruation. Also, some people may have period irregularly. Saying that menstruation is a kind of validation of becoming woman is conflictual. Guilló-Arakistain also mentioned that the normative way of thinking menstruation causes normativizing female bodies in a certain way. This results in setting apart man and woman into a binary position. Thus, injustices and inequalities gain legitimacy.

Medical approach and pathologizing a certain group of people in a society support inequality.

Klara Rydström conducted a study in 2020 named “Degendering Menstruation: Making Trans Menstruators Matter”. In their study, Rydström mentioned an important point that is the literature of menstruation is growing yet there are very few studies include genderqueer experiences. Studies mostly focus on cis women and their experiences. Transgender and genderqueer experiences are overlooked or even ignored.

Intersectional and inclusive discourses and studies are very important in order to bringing to the fore that menstruation experiences of queer individuals. Heteronormative and cis-centered studies also should be challenged and criticized by these studies. Otherwise, transformation to the good in menstruation literature is not possible.

### **2.2.2 Understanding the Cycle**

Menstruating bodies, namely cyclical bodies, are the bodies most affected by the gender-based inequality created by the capitalist patriarchal order. It has been very difficult to access accurate, transparent and scientific information about menstruation. For this reason, menstruating bodies may not understand the cyclicity in their bodies and the phases they experience.

According to some studies, there are three phases of menstrual cycle: follicular phase, ovulation phase and luteal phase (Varışoğlu & Vural, 2022; Fehring et al., 2006).

These three phases of menstruation affect menstruators directly both psychologically and physically. According to Sims and Heather’s study about women athletes, they discover that changes on hormone levels during menstrual phases could affect women athletes’ performances directly (2018).

Body and water regulation, exercise capacity, performance, metabolism and sleep cycle are affected by the hormones that are excreted during different phases of

menstruation (Sims et al., 2007, 2008; Stachenfeld et al., 2001, as cited in Sims & Heather, 2018).

There are several methods that individuals can use to understand and follow the cyclicity in their bodies. First of all, it is important to listen to the body and keep a journal. There are also some applications specifically designed to understand menstrual cycle. These applications, which can be downloaded to smartphones, allow individuals to mark their calendars, enter start and end dates of their period, measure the amount and density of period fluid, and frequency of discharge, note emotional symptoms, and process data such as sexual intercourse and pregnancy tracking.

Güner and their friends stated in their study that individuals use applications to track their period. The third most used applications are period tracking applications according to their study (2018).

As it listed in Worsfold and their friends' study, Clover Period Tracker Calendar, Clue-Period & Cycle Tracker, Femometer-Period & Fertility, Flo My Health & Period Tracker, Glow Period, Fertility Tracker, Maya-My Period Tracker are some of the popular applications that helps tracking period and fertility (2021).

DeMaria and their friends mentioned Flo, Glow, iPhone Health, My Calendar, P-Tracker, Clue, and the Fitbit application as examples of period tracking technology applications (2023).

According to Fox and Epstein, period tracking apps are not working perfectly to predict menstrual phases and dates. Because the human body could be affected by different factors such as nourishment, climate, environment and so on. Also, they criticize the aesthetic of the period tracking applications. As most of the period products have, also these period tracking applications have feminine aesthetic. For example, there are flowers, pink and purple colors, sparkling or glittering fonts and so on (2020). But it should be considered that not only women have period and transgender, or genderqueer individuals should be included as a target or potential customers of these applications. Fox and Epstein also criticize the period tracking

applications because of their fertility-focused approach. Being a menstruator does not mean always wanted to be pregnant. These applications usually have heteronormative and reductive assumptions.

### **2.2.3 Not Only Women Have Period**

For years, menstruation was seen as an essential part of women's health. Nowadays, scholars and healthcare providers realize that also transgender men and people with masculine gender identities also menstruate (Chrisler et al., 2016).

Menstruation itself does not have a positive meaning. Even though menstruation is considered by society as taboo and should be hidden, the meaning of having period is different for transgender and genderqueer people. Menstruation is sometimes a topic of celebration. But for transgender males and other gender diverse individuals it is not a topic of celebration. It triggers gender and body dysphoria. Menstruation and menarche mean anxiety, depression, and suicidal thoughts for transgender individuals (Weiselberg, 2022). According to Weiselberg, when it comes to the transgender or non-binary adolescents, pediatricians should be aware of different conditions, needs, behaviors. Dysphoria, anxiety, depression, and suicidality are quite common. Pubertal development such as menstruation is one of the reasons for mental issues. Because individuals must experience pubertal changes with the gender that they do not belong to.

Using male bathroom can cause stress, victimization and exposure for these individuals. So, managing menstruation is hard for them.

It is important to note that menstrual dysphoria is not happening for all the transgender and genderqueer individuals but for some people, it has been experiencing. Because menstruation is historically, culturally, socially, psychologically related to womanhood, fertility, motherhood, reproductive health and so on.

## **2.3. Period Taboo**

In many cultures, menstruation, beyond being a biological phenomenon, has been given various social meanings, and these meanings have often been shaped around a

silence or taboo. Although it is a scientific fact that menstruation should be seen as a natural process, this process has been associated with the concepts of privacy, shame and secrecy in many societies throughout history. The period taboo not only prevents individuals from openly sharing this experience; it also limits access to information, access to menstrual products and basic rights in terms of gender equality. The roots of this taboo are based on gender norms, religious and cultural value judgments and the misperception of biological processes. The literature draws attention to the psychological, economic and social effects of the period taboo on individuals; it addresses how this taboo is maintained and can be broken from different perspectives. The basic approaches and findings of the existing literature in this context will be presented below.

In order to understand the concept of period taboo, previous chapters focused on what period is, what does period means, and how it is perceived. In this chapter, I will first explain the concept and word taboo. The concept of taboo is embedded in the different fields of our lives. Then, I will explain the concept of period taboo and provide examples from studies in literature. The term period taboo is universally used by researchers especially for recent years. Both in studies from different countries and Türkiye touch upon the topic period taboo lately. Then, I will touch on how the concepts shame, dirt, pain, and disgust are connected to period. These basic words are the results of period taboo which embedded to the society.

Myths and traditions related to menstruation appear as powerful cultural structures that form the cornerstones of the period taboo in many societies and feed this taboo. These myths often manifest as rules and restrictions that shape the lives of individuals who menstruate. Beliefs that associate menstruation with dirtiness or malfunction deeply affect individuals' perceptions of both their own bodies and their social roles. For example, in some cultures, individuals who menstruate are prohibited from entering temples, while in others, it is considered inappropriate for them to cook or engage in certain social interactions. Such traditions place menstruation in a controversial position within social and moral boundaries, removing it from being a solely biological process.

However, only some of the myths and traditions related to menstruation carry positive meanings. For example, in some communities, menstruation is celebrated as a symbol of an individual's fertility and regenerative power. However, such positive meanings are usually in the minority and are insufficient to transform the stigmatizing discourses associated with menstruation. Myths and traditions affect both individual experiences and social structures, perpetuating the cycle of silence and shame surrounding menstruation. Therefore, understanding the origins and impacts of these beliefs and practices associated with menstruation is critical to resolving and transforming the period taboo. In this context, the following sections will examine in detail the common myths and traditions surrounding menstruation.

So, understanding the dynamics behind the taboo is important in order to understand how society as a whole and individuals by themselves perceive period and bodily experiences of the menstruators.

### **2.3.1 Definition of Taboo**

Taboo means that a certain subject, behavior or situation is seen as untouchable, unspeakable or forbidden by society. It is usually associated with cultural, religious or moral values and is reinforced by social norms in order to protect these values. Taboos are powerful tools that shape individuals' behaviors, thoughts and communication styles. While a taboo sometimes represents a hesitation mixed with fear and respect, it can sometimes turn into a pressure mechanism that completely prevents individuals from speaking or taking action on a certain subject. The origins of taboos are based on the history, belief systems and power dynamics of societies; therefore, the same subject may be considered taboo in one society while being considered normal in another. The concept of taboo deeply affects not only the personal experiences of individuals, but also social relations and power balances.

Gould and Kolb stated in their study titled "A Dictionary of the Social Sciences", taboo in general means that restriction and prohibition of certain rituals (1964). Taboo is not just a matter of not doing something or making something happen. It is more of a prohibition and a blocking a certain event or action. Taboo is a system of imposing

prohibitions and restrictions on certain activities in a society (Vargün, 2021). In their very recent dated study, Shalini stated that in a society, some norms and traditions are waiting to be followed by the individuals. By these norms and traditions, ruling power can easily control the whole society, at least a certain group (2024). In this case, this certain group is called menstruators. Fershtman, Gneezy and Hoffman describe the concept taboo in their study as strong social norms which are supported by various sanctions and restricted individuals one by one or as a group. They also state that even criticizing or thinking about violating the existing taboo is very problematic (2009). In 2010, Trudgill explained the term taboo as irrational way of inhibiting an activity. These restrictive ideas come from supernatural ways, there is no existing logic behind the taboos.

The irrational nature of taboos makes it difficult for individuals to fight against them. The basis of this situation is that taboos are often based on cultural, religious or moral norms that are accepted without question. For people to fight a concept, they need to deeply understand the causes and consequences of that concept and develop a logical critique. However, behind taboos, there are usually not rational explanations, but rather ingrained beliefs, fears or social control mechanisms. This turns taboos into social knots that are difficult to untangle, even if they seem simple and meaningless on the surface.

Taboos have the power to shape individuals' behaviors, thoughts and even identities. For example, a taboo can limit an individual's right to free expression or action, leading to marginalization and stigmatization in social life. Furthermore, the irrational nature behind taboos causes individuals to encounter emotional and social barriers when criticizing them. When people try to question a taboo, they may have to face not only individual resistance, but also fear of social oppression and exclusion.

This shows that taboos are not only an individual issue, but also a social issue. The lives of individuals affected by a taboo are often shaped in a much deeper way than is apparent; it constitutes a serious obstacle to demands for freedom, equality and rights.

Therefore, the struggle against taboos reveals that not only individuals but also society needs a general transformation process.

### **2.3.2 Definition of Period Taboo**

In this section, the concept of period taboo will be briefly explained. Taboo refers to activities, actions or situations that are prohibited, untouchable or inappropriate to talk about in a society. Period taboo, on the other hand, occurs when menstruation is treated within the framework of privacy, shame and secrecy in society. This taboo is a mechanism of oppression that deeply affects both the private lives and social roles of individuals who experience menstruation.

The binary gender perspective further strengthens this taboo; women are defined as menstruating and are subject to a social restriction through this bodily experience. Menstruation has been used as a tool to restrict women's sexuality, productivity and bodily freedom throughout history. The period taboo makes it a social norm for individuals who menstruate to hide their bodies, avoid expressing this experience and even limit their access to information about this process.

Controlling the body and sexuality in this way facilitates the broader control of individuals in a society and their positioning within the social hierarchy. The period taboo reveals a power dynamic that directly affects not only the individual freedoms of individuals but also their access to education, health and economic rights. Therefore, the period taboo is a critical concept that needs to be discussed when talking about not only an individual experience but also a mechanism that ensures the continuity of gender inequality.

In their book called “Kırmızı Kar” (Red Snow), Aylin Dikmen Özarslan states that the taboo around the menstruation can follow individuals until death. This taboo emerged in old times; primitive people associated menstruation with evil spirits. So, there is a great fear as a reason for this taboo (2004).

As Trudgill mentioned above, there is not a rational explanation behind taboos (2010). So, Dikmen Özarslan stated that period is associated with evil spirits.

According to Beauvoir, men disgust by women's reproductive features and fertility. Menstrual fluid, in different description menstrual blood is symbol of fertility. So, menstrual blood is also the symbol of the dirtiness of women (1993). In some cultures, after menopause women gain value in contrast to their fertile years.

Shalini emphasized that period taboo is very common in different cultures. According to them, incorrect information related to menstruation support period taboo even more. Lack of education and information reproduce period taboo and worsening the situation (2024).

Gottlieb mentioned the period taboo in their study that is still embedded to the society. Even though scientific studies are increased by quantity and quality, period taboo still stays strong in people's minds. Gottlieb mentioned that people even avoid saying menstruation, period cycle. For example, in the United States, it is a very common habit to say *the curse* instead of menstruation. This avoidance of the word menstruation sheds light on many points (2020). Menstruators are taught that they should be distant from the non-menstruators. They should be distant both physically and verbally.

### **2.3.3 Shame, Dirt, Pain and Disgust**

Period taboo is a phenomenon shaped by the influence of cultural and social structures and reinforced by social norms. The concepts that form the basis of this taboo include shame, dirt, pain and disgust. Menstruation is seen as a shameful process in many societies; menstruators are forced to hide this natural biological process or live it with shame. This sense of shame plays an important role in coding menstruation as something that should not be shown to the outside world. The concept of dirtiness is also associated with the idea that the menstruating body is dirty. Menstruators can experience this biological process as both a physical and moral degradation. Pain is directly related to the physiological difficulties of menstruation, and this pain is sometimes constructed as a kind of punishment in social discourses. Individuals who

experience menstruation may have difficulty talking about their pain, and this becomes a factor that reinforces the secrecy of menstruation. Finally, the concept of disgust is associated with the fact that menstruation is often depicted as something ugly or disturbing. This situation increases the prejudices and stigmatization surrounding menstruation, causing individuals to develop a negative perception of their own bodies and experiences. Concepts of shame, dirt, pain and disgust feed the period taboo, transforming this process into a social and cultural obstacle for menstruators.

The period taboo is a powerful factor that causes menstruators to become estranged from their bodies. This makes it difficult for menstruators to recognize their own bodies and understand the experiences associated with this process. Perceiving menstruation negatively prevents menstruators from knowing their bodies, noticing the effects of menstruation and possible threats to their physical health. Since the menstrual experience has become a taboo in society, menstruators often avoid expressing this situation or seeking a solution, even if they have a problem with it.

As a result, the period taboo can cause a person to ignore the negative changes in their body. For example, health problems such as menstrual irregularities, severe pain, or heavy bleeding are either accepted as normal by individuals or are hidden out of shame. This delays early diagnosis and treatment processes. In addition, the estrangement created by the period taboo can disrupt people's healthy relationship with their bodies, negatively affecting both physical and emotional health. Taking action against health problems, taking care of oneself, or seeking appropriate medical help are often neglected under the influence of this taboo. Therefore, the social pressures of the period taboo may lead menstruators to neglect both their bodies and their health, thus encountering more serious health problems.

Gottlieb emphasized that sharing an issue or statement even with medical staff may produce shame for menstruators (2020). So, there is high health risk because of period taboo. Menstruators may face serious health issues such as infections, cancer and so on.

Painful period, as known as dysmenorrhea, is quite a common health issue. Menstrual pain can lead to school absenteeism and even school dropping. It can affect physical, psychological, social and sexual health. It may cause low life quality (Angelhoff & Grundström, 2023).

One of the serious health conditions related to menstruation is endometriosis. Endometriosis is one of the inflammatory diseases which up to hormones. It is a chronic illness that affects daily lives and bodily practices of menstruators. Some symptoms of endometriosis are shorter cycle length than the average, longer length of bleeding, heavier menstrual fluid, pain and suffering during period and so on (Laux-Biehlmann et al., 2015). In their book “The Vagina Bible”, Jen Gunter mentioned some symptoms of endometriosis such as pain in general, but especially pain during menstruation and painful sexual intercourse. Gunter also included some other diseases and health-related conditions such as fungus, bacterial vaginosis, vulvodynia, urinary tract infection, pelvic prolapse, vaginismus and so on (2021).

Medical staff should be informed and aware of health conditions related to menstruation. Also, it is important that they use inclusive and friendly language about menstruation and put their clients at ease. Especially younger generations can be shy and timid while there is an issue about reproductive health or genital area. Nurses at schools are mostly the first step for child and adolescent care. They should be aware, informed and educated for pain-care and detecting underlying diseases related to menstruation (Angelhoff & Grundström, 2023).

If the symptoms of genitalia or menstruation related health issues are not met properly, gynecologic problems, infections, anemia and psycho-social issues can happen (Ak & Aslan, 2024).

Jen Gunter also mentioned that in the last twenty-five years, women report odor problem around their vulvas. According to Gunter, the reason behind this increasing number of reports is that increasing body shaming and objectification of women. Women are shamed at every point related to their bodies. In recent years, vaginal

cleaners, perfumed intimate washing gels, vaginal douches and perfumes have become increasingly fashionable. All of these impose on individuals that the natural, normal and healthy smell of the vulva is not normal. These cosmetic products disrupt the normal smell and health status of the vulva. As a result, women cannot be happy and confident by neither using these products nor leaving their bodies to their natural state. The smells of the female body are always presented as if they are disgusting. When it is considered that the majority of menstruators are women, it is understandable why menstruators cannot approach their bodies with confidence, are embarrassed to talk about their bodily experiences and are more open to the risk of health conditions.

Another key point about shame and health conditions is about transgender and genderqueer individuals. Especially in improving countries such as Türkiye, it is not easy to explain gender identity and sexual orientation. Staying in the closet might be a better option for some individuals due to security problems. Chrisler and their friends mentioned that according to some research, less than half of the transgender respondents receive routine medical care. So, they are more likely to have medical problems, diseases etc. (2016). The reason behind why transgender and genderqueer individuals does not talk about menstruation and receive less medical care than cis heterosexual individuals is mostly safety issues, body dysphoria, period taboo and lack of information of medical staff about queer bodies.

Healthcare services are often based on binary gender system, which leads to healthcare professionals being insensitive to the special needs of transgender and genderqueer individuals. For example, when processes such as menstruation, pregnancy, and menopause are defined solely in terms of women, individuals who experience these processes but whose gender identities do not match these may face significant discrimination in accessing healthcare and receiving health advice.

Therefore, the difficulties experienced by transgender and genderqueer individuals in accessing healthcare services are based not only on biological processes, but also on how these processes are interpreted through gender, and how the healthcare system fails to encompass these meanings. The period taboo and the binary gender system are

important factors that cause these individuals to be excluded from healthcare services and their needs to be ignored.

#### **2.3.4 Myths and Traditions**

The period taboo is mostly nourished through traditions and myths and usually carries a negative meaning. In many societies, menstruation is associated with concepts such as sin, dirt, and bad luck, and the bodies of menstruators are seen as dirty, unholy and dangerous. This not only affects the status of individuals in society but can also be harmful enough to threaten their quality of life and freedom. For example, in some cultures, individuals who menstruate are excluded from social life, separated from their social lives, and subjected to physically challenging conditions. In some communities, the menstrual process is associated with various prohibitions and restrictions that pose serious risks to individuals' physical cleanliness and health. This has negative effects not only on the physical health of menstruators, but also on their psychological health.

On the other hand, in some cultures, menstruation can be celebrated in a more positive way, by being identified with femininity and fertility. However, even these positive traditions are usually shaped through womanhood and do not emphasize the human and health rights of menstruators.

As a result, the period taboo and the traditional beliefs that feed it profoundly shape menstruators' perceptions of their bodies, and the social meanings associated with this process. However, these meanings often conflict with individuals' rights and health. Traditions, myths, and taboos often negatively impact menstruators' lives, both physically and socially, neglecting physical health, psychological well-being, and individual freedoms.

Everything that people experience in daily life stem from culture, tradition, myth, habits, and so on. Controlling menstruating bodies via period taboo is embedded to the cultural patterns of societies. Menstruation practices may vary positive to negative. But positive examples are fewer than negative ones. In some cultures, period is seen as a positive, even empowering experience. In Guinee, there are menarche ceremonies.

In Norwegian myth, gods take a bath in menstrual blood in order to risen. So, it is menstrual fluid associated with power. In myths, period is seen related to moon cycle and experienced without shame. After monotheistic religions, period is associated with shame and dirt (Dikmen Özarslan, 2004).

In some cultures, milking cows, touching wine or kitchen tools, going to praying and cooking are forbidden. Women are kept isolated from the community and their daily activities are limited by especially religious orders.

Women are associated with sin and bad luck in Christianity and period is seen as a symbol of them. Sexual activities and being a part of community activities are forbidden according to Christianity. In Hinduism, period is a symbol of losing purity. Those negative understanding of period is transferred generations to generations and eventually period became a social issue (Yılmazbilek, 2022). In Jewish belief, menstruation is equal to *niddah* or *nida* which means periodically flow of dirty blood. *Niddah* also means that isolation, discrimination, dirtiness, period dirt, menstruating woman and so on. According to religious traditions, menstruation and menstruators have very negative meaning. Another Jewish term *Mikveh* means that everything that is touched by menstruating woman will be considered dirty (Yiğitoğlu, 2019).

According to Kristeva, period blood is both unwanted abject and bearable liquid because of fertility meaning (1982). Because of this dilemma, menstruators are sometimes imposed with the impression that menstruation is a special occasion that must be experienced in secret and in private spaces.

#### **2.4. Period Poverty**

Before understanding period poverty, it is important to first address the concept of poverty. Poverty is a reflection of social and economic inequalities beyond the inability of individuals to meet their basic needs. This concept is not limited to financial inadequacy; it also encompasses barriers to individuals' access to opportunities, services and resources. Period poverty is a subset of this broader concept of poverty that focuses on the physical and care needs of menstruators. Period poverty is a multi-

layered problem that is directly related to economic poverty, but also includes many components such as social taboos, gender inequality and cultural factors.

#### **2.4.1. Definition of Poverty**

The definition and measurement of poverty has long been a subject of debate in social sciences. This controversial issue revolves around the question of whether poverty should be considered solely as a material deficiency or as a broader problem related to individuals' quality of life and participation in social life. Different definitions of poverty suggest that it is not limited to insufficient income, but also includes inequalities in access to basic human rights such as education, health, and housing. This multidimensional approach shows that poverty is not merely an economic situation, but is also intertwined with social, cultural, and psychological effects. Different definitions of poverty also lead to diversity in the measurement of this problem and raise the question of which criteria should be taken into account to determine the level of poverty. This contradiction increases the complexity of solution proposals and policy development processes regarding poverty.

According to Amartya Sen, poverty is not only related to financial inadequacy, but also related to social, economic, and political factors. To Sen, poverty prevents individuals from participating in social and economic processes (2006).

Poverty does not only mean lack of income. Different socioeconomic dimensions create the concept of poverty. It means that access to services and social protection measures, the ability to express opinions and preferences; negotiation skills; as well as social standing, quality jobs and opportunities. Also, poverty results in breach of human rights and labour rights (United Nations Global Compact, na).

According to Our World in Data, global poverty is a very serious problem that the world faces nowadays. Poorest countries' citizens are often undernourished. Also, these citizens do not have access to electricity and safe drinking water which are basic needs. As a result of unsafe drinking water and undernourishment, they have much

poorer health. Also, access to education is not adequate. Less access to education is reproducing poverty (Our World in Data, 2022).

Poverty is a multidimensional concept that includes different definitions and measurement methods. Understanding these different definitions allows us to better understand the multi-layered nature of period poverty. Understanding poverty literature allows us to delve deeper into the dynamics of period poverty and how it impacts individuals' lives. The next section will present discussions and existing studies on period poverty.

#### **2.4.2. Definition of Period Poverty**

In this section, how period poverty is shaped in the social context, its effects on individuals and the debates in the existing literature will be discussed.

Dar and their friends stated in their article that period poverty is quite common in India. Teenage females have little to no information about menstruation, reproduction, and sexuality in India. Lack of information related to menstruation results in poor hygiene, health issues and period stigma. People are mostly afraid of what they do not know. Vague points about menstruation unfortunately create period stigma and taboo. It is exceedingly difficult to manage hygiene when there are poor sanitation conditions such as lack of soap, water, safe cabinets, toilets and so on. Especially in rural India, managing menstruation is particularly challenging issue (2023).

In the United States based study, Michel and their friends stated that menstruators have to use different material in order to deal with period poverty. Those materials can be old blankets, chicken feathers, old rags, newspapers, mud and cow dung. The situation is terrible for menstruators. Not only lack of period products but also lack of access to hygiene facilities, waste management, and education should be included in the term period poverty (2022). Period poverty causes different level of problems for menstruators. It is not only an issue of period products or information. Because of period poverty, discomfort and shame, students even drop school. And then menstruators have difficult times to enter to the job market. So, poverty continues.

Menstruation is a very costly experience. People are mostly unable to afford period products worldwide. Also, information about menstruation is either none or incorrect. In Türkiye, the situation about period poverty is the same and even worse compared to some other countries. As it is happening in all over the world, also in Türkiye women suffer from economic and social factors that deepening the period poverty. Gender inequality and period poverty are strongly related (Demircan Yıldırım, 2024).

Menstruators from Türkiye use rags, newspaper, old cloths, tree leaves, napkin, cotton rather than sanitary products because of money issues. (Gedik & Pehlivan, 2022)

#### **2.4.3. WASH and MHM**

The term hygiene means maintaining health and preventing the spread of diseases and illnesses (World Health Organization, na). Some practices such as using soap and water for cleaning hands, washing vegetables before cooking and so on can be considered as hygiene practices.

Hygiene related to menstruation is called menstrual hygiene. Rising of social movements such as feminist and queer movements, the term menstrual hygiene is criticized by some scholars (Mishra, 2024; Wright, 2024). Because talking about menstrual hygiene brings to mind the idea of menstruation as dirty, unclean, and impure. Menstruation is a natural bodily process and should not be associated with dirt. Using the words menstruation and hygiene together can lead to this natural process being perceived incorrectly as something dirty or to be cleaned. This creates a negative and stigmatizing connotation about the bodies of individuals who menstruate.

Menstruation is a biological process that requires care and attention; however, this situation is not something that dirty or unhygienic needs to be fixed. Defining menstruation as something that needs to be cleaned creates a use of language that negatively portrays this process. However, menstrual care and menstrual management focus on the products and practices that individuals who menstruate need for their physical health and personal comfort. Therefore, using the terms menstrual care and menstrual products normalizes the process and helps us avoid labeling a natural function of the body in a negative way. This perspective also contributes to combating

the period taboo, because when menstruation is defined and understood correctly, it is brought to the agenda without any negative connotations.

Hennegan and their friends offer the term *menstrual health* instead of menstrual hygiene (2021).

The term Menstrual Hygiene Management (MHM) is originated in the wash sector. According to the Joint Monitoring Programme (JPM), MHM can be described as existing of clean and proper period products which are clean and hygienic and also can be exchanged in peace and security. Also, having soap and clean water to wash their body as required. Having access to disposal facilities and waste system for used period products is another aspect of MHM (JMP, 2012, as cited in UNICEF, 2019).

According to Sommer, MHM means that managing menstrual flow in a private and safe environment in different contexts (2012, as cited in Krishnan & Twigg, 2016).

MHM is directly related to period poverty. Lack of neat and clean facilities, hygienic period products and wasting system are part of period poverty. In disaster situations, MHM gains even more importance. To Parkinson, water and sanitation interventions and also hygiene augmentation should be focused as soon as possible on disaster environments (2009, as cited in Krishnan & Twigg, 2016).

Because of existing taboos and poverty, managing menstruation in dignity could be challenging. During disasters, individuals may have to take shelter in unusual places and often survive with disaster aids. These aids may not always take care of menstruators. For example, the menstrual product that an individual normally uses may not be included in the aid package. Or, in temporary shelters such as tent cities, it is often not possible to access safe and hygienic toilets. Despite the existence of support from states, national and international organizations, NGOs and individuals, disasters are not suitable for mentors in terms of MHM.

In emergency situations, reproductive health services are usually ignored. Menstrual, sexual and fertility needs are overlooked by the authorities (Ak & Aslan, 2024).

Nepal was affected by 7.8 Richter scale magnitude earthquake on 25<sup>th</sup> April 2015. 9000 people died and around 3.5 million people displaced. Emergency relief and disaster aids reached the region immediately. But basic need of women and girls which is period products were not adequate (Budhathoki et al., 2018). However, in disaster situations, individuals do not stop menstruating. On the contrary, emotions such as stress, fear and sadness can trigger menstruation. Disaster aids and humanitarian relief are mostly managed by non-menstruators. This leads to overlooking menstruation needs.

According to Sommer, the reason behind the overlooking menstrual needs in humanitarian emergencies is that the water and sanitation community is dominated by men. It means that non-menstruators unintentionally overlook women's and girls' needs about menstruation and MHM (2012).

On February 6, 2023, two major earthquakes occurred with the epicenter in Kahramanmaraş, Türkiye. The magnitude of 7.8 and 7.6 earthquakes that occurred only 9 hours apart caused devastating damage in 11 provinces where 16.5% of Türkiye's population lives (The World Bank, 2023, as cited in Aldanmaz & Eskitaşçıoğlu, 2023). Adana, Adıyaman, Diyarbakır, Elazığ, Gaziantep, Hatay, Kahramanmaraş, Kilis, Malatya, Osmaniye and Şanlıurfa were affected by these two major earthquakes and almost 50000 people died. According to Aldanmaz and Eskitaşçıoğlu, it is expected that the supply of menstrual care products will be disrupted after the earthquake. Another important point that Aldanmaz and Eskitaşçıoğlu mentioned is clean and secure toilets usually do not exist in temporary shelters (Aldanmaz & Eskitaşçıoğlu, 2023). Managing menstruation with dignity requires clean water and soap, secure and hygienic toilet, proper and clean period products and safe disposing facilities. Without proper MHM conditions, menstruators may experience physical discomfort, shame and stigma (Hennegan et al., 2019, as cited in Ulutaş & Akgül, 2023).

## CHAPTER 3

### METHODOLOGY

#### 3.1. Why a Thesis About Menstruation?

Growing up in Türkiye, an average child tries to manage the process with little or no knowledge when they first get their period. I was one of them. I had a sister who was almost six years older than me. My mother and father were educated, open-minded people, but no one told me I was going to get my period. I do not even remember how old I was when I got my period. I remember my sister being happy, me being embarrassed, and questioning why she was happy. I remember my mother also questioning my sister's happiness. I did not have much of an idea about pad brands until I was 17 or 18. I was not a child who was suppressed, menstruation was not just a topic of our conversations. I tried different products at university. Over the years, I even took up a hobby of examining the shelves of menstrual products in the markets of the countries and cities I visited. Why were these shelves always at the back of the markets? Why were pads put in black bags to be hidden better? What did some people use if they did not have pads? These questions were issues that occupied my mind a lot during my teenage years. After the years when I started to define myself as a feminist, I decided that I wanted to continue my academic life in the field of Gender and Women's Studies. My research topic was already clear: menstruation. While there were only a few studies on menstruation in the country I was living in and there was not enough literature, the idea of conducting scientific research on menstruation excited me. I was also very interested in comparing how different age groups experienced menstruation. This thesis emerged from this idea.

#### 3.2. Research Design

This study is built on various assumptions while addressing the experiences of menstruators from Türkiye within socio-cultural and economic contexts. The assumptions determined at the beginning of the study were that menstrual experiences would differ across certain age groups, in line with the research questions and general

hypotheses. These assumptions were shaped around key themes such as period taboo, period poverty, and access to menstrual products.

This research is based on a qualitative research design and aims to understand how period taboo and period poverty experiences are shaped within the framework of gender, culture and economic factors. Qualitative research was chosen as the most appropriate method for this research since it aims to examine social phenomena in an in-depth and meaningful way and to explore individuals' experiences and worlds of meaning.

The qualitative research method used in the design of the research aims to explore how participants make sense of their menstrual experiences, how gender and cultural norms interact, and their experiences related to period taboo and period poverty. A qualitative approach allows participants' voices to be heard and the experiences of various identities to be examined in depth by considering social and cultural contexts.

For many years, a male-dominated perspective was dominant in both social life and academia. Male writers and researchers approached all kinds of problems through men's experiences. Every conceivable subject, related to life, science, and culture, was examined through men's experiences. Although I am writing in the past tense, this situation still continues to be dominant in academia. However, after the 1980s, as concepts such as feminism, queer theory, and intersectionality affected life and, of course, science, there were some changes in academia. More women began to receive education. There were more women researchers. More women's experiences began to be visible in academia. People who had been suppressed, ignored, and disregarded until now and their experiences were made visible through feminist methodology. Being a graduate student in Gender and Women's Studies, receiving education in this department and writing a thesis, and many other factors gave me feminist lenses. As a 27-year-old menstruator from Türkiye who has encountered period taboo and period poverty, my motivation for conducting this study was to compile the experiences of menstruators from Türkiye to social sciences, literature, and critical menstrual studies. Literature of menstruation is very limited. Studies focusing on Türkiye are thin on the ground. In addition, studies generally reduce menstruation to a biological experience and the state of being a woman. Considering all these, I wanted to conduct a study

focused on Türkiye, focusing on the social, cultural, and economic aspects of menstruation, and focusing on the experiences of not only women but also every individual who menstruates.

At times, I had difficulty keeping my distance from the subject. After all, I shared similar experiences with the participants in my sample and lived in the same country. Many of the cultural, social and economic experiences mentioned by the participants had been experienced by me personally or had been heard from my social circle outside of this thesis. I tried to turn this closeness into an advantage. The fact that the participants had a researcher who was ready to listen to them and who they assumed was menstruating -I got comments from almost every participant stating that I am a woman- reinforced their sense of trust. I knew how to ask the questions and how to support them and their answers. In order to make the participants feel comfortable, I started the communication with them by saying *siz*; the formal saying of *you* in Turkish. If they wanted or allowed it, I said *sen*; the friendly saying of *you* in Turkish. I asked them how or by what name they preferred to be addressed. The sensitivity I showed when naming and addressing people was to avoid ageist comments and to give space to someone who did not want to use their assigned name. In this way, I made sure that participants who did not want to use their dead name felt comfortable. During the in-depth interview, I read the voluntary participation consent form out loud and shared it as a PDF with those who wanted it. I told them that there was no right or wrong answer to the open-ended questions I would ask and that they could answer them however they wanted. When participants asked me to explain a question in more details, I avoided giving clues or leading them to specific answer and asked them again in different ways. None of the participants wanted to skip a question or end the interview. However, from time to time I received responses that did not include a full answer, such as “I do not know” or “I cannot think of it.” Many of the participants spontaneously said that they wanted to recommend me to a friend or acquaintance. After the interviews, some participants sent me various social media contents about menstruation and stated that they hoped it would contribute to my study. Some participants said that they wanted to host me at their homes. All of these were indicators that showed me that a bond of trust had been established. Although I was grateful for the bond of trust, I tried not to damage the professional bond with the

participants and politely declined their requests other than participating in my research voluntarily. This was especially important so that the participants would not be harmed or hurt. I completed the semi-structured in-depth interviews in accordance with ethical principles that were taught to me throughout my education.

The main reason I used the semi-structured in-depth interview method was that it provided space and flexibility for both the researcher and the respondent. With this method, I tried to keep the researcher and participant relationship balanced during the interview and tried to allow the participants to tell their own stories freely (Legard & Keegan & Ward, 2003). As a feminist researcher, I prepared the ground for the participants to share their experiences in the most open way by establishing empathy and creating a non-judgmental environment. First, I determined some categories and prepared open-ended questions. My categories were menarche, menopause, menstrual stories from family members, use of menstrual products, and menstruation in public spaces. In order to obtain information in these five categories, I supported my open-ended questions with improvised questions where necessary. For example, when the participant mentioned that she had a boy, I asked the question, "Have you talked to your son about menstruation?" or "Are you thinking of talking to him about menstruation?" Of course, such questions were not possible to ask every participant. I tried to deepen the interviews by taking quick action and diversifying my questions where necessary. Semi-structured in-depth interviews allowed me to better understand the participants' menstrual experiences, ensure that the interview flowed more naturally, and allow me to collect more in-depth data.

I had planned to conduct these interviews face-to-face, as long as conditions permitted. However, during the study, I received requests for online interviews even from participants I was in the same city with. It was my advantage not to have a strict rule or principle about whether the interviews should be face-to-face or online. We conducted 6 of the interviews face-to-face. The remaining 26 were conducted online. I saw both the advantages and disadvantages of conducting most of them online.

There were some disadvantages to the fact that semi-structured in-depth interviews were largely conducted online. First of all, the internet is slow in Türkiye. There were occasional lags, freezes, and even disconnections. In addition, the fact that only 45-

minute interviews could be conducted on the free version of the Zoom application made the interviews quite difficult. I often had to send a new link to the participants, and fortunately, they were all understanding. I would like to note that researchers need to be well acquainted with the features of the tool they choose. I realized again the importance of details such as how long meetings can be held and how recordings are made. Another disadvantage was that a family member or friend occasionally entered the environment where the participants were participating in the interview. In such cases, some participants made the shush sign, muted themselves, and asked for permission. Finally, a smartphone, tablet, or computer, as well as an internet connection, are required to use the online tools. This limited the study to only those who were digitally literate and could afford this setup.

As for the advantages of using online tools, being able to meet with participants from different cities was very productive for my research. It was difficult for me to meet with participants face to face in different cities due to both financial and time reasons. However, we easily overcame this obstacle with the Zoom application. Another advantage was the opportunity to have consecutive interviews. There were times when I had two interviews in a row. This would not have been possible if the interviews were face to face. Finally, recording a meeting over Zoom is practical. We can record both video and audio at the same time. Since I only recorded audio in face-to-face interviews, some gestures and facial expressions were lost, but I did not experience this with Zoom.

I noticed that in face-to-face meetings, intimacy and trust were established faster. However, face-to-face meetings also had some disadvantages. The most obvious of these was that it was difficult to find a place to conduct the interview. The interviews were occasionally disturbed by other people. I had to conduct two interviews sitting on the grass on the school campus. Although the participants were extremely helpful and willing, one of my concerns was that I might not have made them feel comfortable. Another disadvantage was that only audio recordings were made in face-to-face meetings. Not being able to see the gestures and facial expressions again was a disadvantage.

### **3.3. Importance of the Research**

This study aims to make significant contributions to both the social sciences literature and social awareness by addressing the menstrual experiences of menstruators from Türkiye in a multidimensional manner within the framework of feminist methodology. Despite being an inseparable part of individuals' lives, menstrual experiences have been a subject that has been ignored or only superficially addressed for many years due to social norms and cultural taboos. Especially in countries where traditional social structures prevail, such as Türkiye, the fact that the subject of menstruation is still seen as a taboo prevents individuals from expressing these experiences freely and from discussing this issue openly in society. In this context, the aim of the study is not limited to making menstrual experiences visible; it is also to understand the pressures and coping strategies that individuals are exposed to during these processes by revealing how these experiences are shaped in the context of gender norms, cultural expectations and economic inequalities. In addition to economic dimensions such as period poverty, a multi-layered analysis will be conducted by examining how individuals' relationships with their social environment and cultural values affect these experiences. The contribution of the study to the literature is not limited to filling the existing theoretical gaps by examining menstrual experiences from a feminist perspective; it also analyzes the concrete effects of these experiences on the daily lives of individuals and the connections of these effects with wider social structures. In this way, it is aimed to take an important step towards breaking the period taboo, combating period poverty and developing more conscious policies on gender equality, both at academic and societal levels.

### **3.4. Limitations**

A total of 32 people were interviewed within the scope of this study. 21 of these 32 people were between the ages of 18 and 25, and 11 were 40 and over. The sample I envisioned before starting the study was 40 people. Reaching a larger number of people is important in terms of data saturation. The sample of this study cannot be

generalized to the experiences of all menstruating women in Türkiye, but it allows us to comment on the menstrual perception in the country.

Although semi-structured in-depth interviews trigger feelings such as trust, sincerity, and honesty, it is necessary to consider that participants may not always be transparent about a difficult topic to talk about, such as period taboo and period poverty. Therefore, conducting interviews on how an already taboo subject becomes taboo, is transmitted, and perhaps is broken has sometimes been a difficult area.

Another limitation is that the factor of education status and age that I added to the participant criteria did not make enough difference in my study. Focusing on the urban and rural relations of the participants rather than their educational status and age could have produced different results and brought different stories to the literature of menstruation.

In addition, in my research, I tried to question the binary gender system and not limit menstrual experiences to only women. However, the limited number of transgender and genderqueer individuals in the sample limits my aim to conduct a more inclusive and representative research in this respect. In similar studies to be conducted in the future, conducting more interviews on the menstrual experiences of transgender and genderqueer individuals will fill an important gap in this field.

For these reasons, I would like to emphasize that a study should be conducted in which queer identities are more represented in order to conduct a study with more inclusive and broad perspective.

## CHAPTER 4

### FINDINGS AND DISCUSSION

In this chapter, semi-constructed depth interviews will be introduced and evaluated. Because of limitations such as the computer I was working on giving an error and breaking down completely, I had to start all over again to conduct interviews. This situation taught me to be patient, always back up data, and conduct better interviews. 26 interviews were conducted via the online meeting platform Zoom and 6 face-to-face interviews were done. I reached these 32 people through posters I posted on social media and snowball method. My friends and some social media users who I do not meet in person shared my posters on social media in order to make contribution to this thesis.

As a menstruating researcher, it was sometimes difficult to approach the study with distance and continue to conduct interviews objectively. At this point I kept my distance and tried to maintain objectivity.

Because of the existing stigma and taboo, talking about period was sometimes difficult. It was useful to repeat the sentences in the voluntary consent form to make the participants feel comfortable, to emphasize to them that we can stop whenever they want, that we can end the interview whenever they want without giving any reason, and that there is no single correct answer to the questions that I ask. Additionally, briefly telling the participants about myself helped soften the atmosphere. The interviews lasted half an hour on average, and 26 interviews were audio and video recorded within the Zoom application. 6 interviews were only audio recorded by my personal smartphone. The reason for choosing Zoom is that Zoom usage has become widespread in Türkiye, especially during the Covid-19 pandemic. It was estimated that the participants were familiar with Zoom. 21 of the participants were between the ages of 18-25, and 11 were over 40 years old. At the beginning of the interview, before asking the questions, I stated that I would use the word *regl* throughout the interview in order to be clearer. The word *regl* is a relatively new way of saying menstruation in Türkiye. It can be thought of as equivalent to the English word *period*.

When anonymizing the participants, I initially planned for each participant to choose a pseudonym. However, I later ranked the participants up to 32 using the first letter of the word *participant*, P. When quoting the participants, I wrote their ages in parentheses.

#### **4.1. Perception of Menstruation and Menarche Experiences**

Menstrual perception and menarche are fundamental processes at the intersection of an individual's physical and social experiences. Menarche is shaped as a social and cultural phenomenon, beyond being a biological turning point in an individual's life. This first menstrual experience creates a wide range of effects, from the individual's position within the family to school life, from friendships to the gender norms of society. Therefore, the menarche experience is not only a matter of health or physical development, but is also directly related to social roles, norms and expectations.

Although menstruation has historically been associated with secrecy, shame and taboo in societies, it also carries the meanings of empowerment and maturation for some individuals. The reactions given to individuals, the language and behaviors used during menarche greatly affect how an individual makes sense of this experience. For example, while menarche is greeted with celebration and support in one family, it may be passed over with silence or shame in another family. These differences show that the perception of menarche is not only individual but also connected to social structures.

Under this heading, the focus will be on how participants define menstruation and how they experience menarche. In particular, the effects of different ages on menstruation and menarche perception will be examined within contexts such as economic conditions and period taboo. In addition, data on how menarche shapes an individual's body perception, self-confidence and social relationships will be discussed in detail in this section. Thus, it will be revealed in more depth how menarche is shaped within a social context, beyond being an individual experience.

I started the in-depth interviews with the question, "What does menstruation mean to you?"

P6 (22) described menstruation as follows: *It is something I am afraid of every month. It is very heavy for me, especially after I stopped doing sports professionally, it got even heavier. I completely miss the days when I had my period.*

P6 mentioned during the interviews that her family and friends were supportive when she was menstruating. Despite this, she stated that she was afraid of menstruation every month and missed those days. Menstruation can be physically challenging.

P5 (22): *For me, period means pain and aches. I have very heavy periods. When I think of period, the only thing I think about is pain. I usually feel very weak and exhausted during my period.*

As P5 stated, some menstruators experience menstruation in very painful way. Feeling weak and tired are some of the physical symptoms.

P18 (43): *Periods have been a nightmare for me, especially for the last 5 years. I go to the emergency room. No diagnosis, different treatments have been tried but no improvement.*

Menstrual experiences can be challenging due to physical and psychological symptoms. Having a heavy period can cause menstruators to compare periods to a nightmare. Additionally, as P18 noted, it is not always possible to obtain a diagnosis for painful conditions associated with menstruation that require medical examination.

P13 (56): *There were very sharp taboos in my childhood. Menstruation was a painful experience. It was also difficult because of my queer identity.*

P29 (20): *My mother is a very “girl power!” type of person. But I felt bad at the time, I saw that I was bleeding, but I denied it. Because it contradicted my identity. I hid it from my mother, she somehow understood. She bought me a cake and celebrated but it was not nice for me. It was an uncomfortable experience. I felt like a man, but I was becoming a woman.*

As P13 and P29 stated that being a transgender or genderqueer menstruator has a different meaning rather than being cisheterosexual or cisqueer individual. As it is discussed in the Literature Chapter, queer menstruation experiences can be challenging

(Chrisler et al., 2016; Guilló-Arakistain, 2020; Rydström, 2020; Weiselberg, 2022). Transgender and genderqueer individuals struggle with identity conflict, body dysphoria, and the pain inherent in menarche.

P8 (43): *The first thing that comes to my mind is a necessity of being a woman... I feel distressed during my period. Because I have fibroids, I have severe and tiring symptoms. On the other hand, I see it as something normal.*

One of the reasons for the period taboo is that it is difficult for those who menstruate to access health services. Due to reasons such as shame and the need to hide it, menstruators are often reluctant to seek help from a health institution regarding issues such as sexual health, reproductive health and genital hygiene.

P8 went to a health institution and received a diagnosis as a result of their health problems. However, this is not possible for many menstruators, and they are left with unusual pain as happened in the case of P18.

P17 (25): *Menstruation is one of the most difficult processes for a woman. The person tries to adapt to society and hides their menstruation. Most people talk about menstruation as if it were an illness. It felt like an illness.*

Many of the participants stated that they heard the phrase *hasta olmak*; *being sick* in Turkish during the interviews. This may be due to the fact that menstrual symptoms such as abdominal pain, headache, diarrhea, constipation, nausea, and so on resemble various diseases. Culturally, establishing a similarity between menstruation and disease creates a negative perception for menstruators. In fact, menstruation is not a disease or a condition that disrupts hygiene. But talking about menstruation as *being sick* can create a feeling in menstruators that it is a deficiency, a disadvantage, dirtiness, a condition that needs to be healed.

P21 (21): *Menstruation used to seem like a responsibility to me, I thought I had grown up. Now I must be more careful in life.*

It has been observed that there are two ways to associate menstruation with growth. First, growing up means becoming a woman, restrictions on movement and actions, and the beginning of the obligation to worship and perform religious rituals. In

addition, it is a common tradition in some geographies to force a child who is menstruating to marry at an early age (Kopelman, 2016). Secondly, growing up is understood more positively. It can mean being a young girl, being a woman, and being special. This could mean a process that some menstruators are eagerly awaiting.

There were also respondents who stated that menstruation and menarche had positive meanings.

P23 (23): *For me, menstruation represents maturation and fertility.*

P14 (41): *Menstruation is actually a very healthy process. It is a symbol of the woman's reproductive age.*

Menstruation is associated with reproduction by many thinkers and individuals in society. Although menstruation is an indicator of an individual's reproductive ability, it is not appropriate to consider it only in this way. However, when I asked participants how they perceived menstruation, some of them such as P23 and P14 made a strong connection between menstruation and reproduction and fertility.

P7 (20): *If I answer briefly, menstruation is healthy. People see it as shameful, but it is not at all.*

For some menstruators, because of the routine nature of menstruation, it is perceived as a part of healthy life. Menstruation is often associated with healthy bodily functions. In some cultures, it is commonly thought that menstruation is the elimination of dirty blood and the elimination of impurities. For this reason, one of the points I anticipated when I started the study was that participants stated that there was a strong connection between menstruation and health.

P2 (23): *Period is something that needs to be experienced. Health...Purification...The symbol of health and the complement of the biological cycle. It lasts for 1 day for me, so I am very comfortable.*

P7 (20): *It is healthy to have periods. People act like it is shameful, but it is actually not.*

There may be a relationship between P2's view of menstruation as something to be experienced and her menstruation lasts only one day. Compared to participants who

had heavier period, P2, whose period lasted only 1 day, had a more positive perception of menstruation and menarche.

Some other participants stated that period is a symbol of womanhood.

P4 (24): *Being a woman... You must be careful now. Emphasis on being a woman...*

P3 (21): *When my discharge color changed, I started drinking herbal tea, probably to speed the process up. I saw that everyone got their period before me, so this time I was scared. I was scared that I would not grow any taller.*

Although the participants' menarche experiences were diverse, the common theme was that they did not have qualified and sufficient information before menarche. Lack of information has often led to a negative menarche experience. When participants have knowledge about menstruation, they face the menarche experience much more easily.

P9 (24): *I was 12 years old, and I cried a lot. I cried thinking, "Am I not a child? I've grown up?" I was so embarrassed and cried. No one had told me I was going to get my period. My mother told me later.*

As P9 explained, for some menstruators, menstruation and growth are deeply related. Moreover, growth can have undesirable consequences, such as having to be responsible, not being a child anymore, and having to be careful with one's movements.

P10 (49): *I do not remember my mother talking or anything, but I was not really surprised. I have not heard much from the family about period.*

P6 (22): *I was seeing my mother's pads at home and asking my mother. My mother said you will understand when the time comes.*

P2 (23): *I first had my period when I was 12-13 years old, I was scared, I did not know what it was. I wish my mom, or dad had told me beforehand.*

For most participants, menstrual information is expected to be conveyed by the mother. In cases where the mother does not convey this information or where parents do not provide menstrual information and education, children often have hearsay information, and this is a source of stress for them.

P18 (43): *I first got my period when I was going to high school in a district of Adiyaman. I was a little late. It was hard to access information, maybe kids in the city are luckier, but I had no information.*

As P18 stated, living in a small neighborhood can be a source of lack of knowledge and fear. Children growing up in big cities and in better conditions may have better luck with menstrual knowledge and education. It is important to focus on the rural and urban differences when examining menstrual experiences.

P1 (21): *We are from Ordu, women's issues are rarely talked about here. My mother had talked about that (period) a little, and I had also seen Orkid (local name of the brand Always in Türkiye) at the market. I had no knowledge of them before or during my period.*

P1 emphasized several times during the interview that they were from Ordu. Ordu is a relatively small city in the north of Türkiye. P1's purpose in emphasizing this was to explain the difficulty of accessing menstrual information in rural areas.

Some participants mentioned superstitions or traditions that they had experienced in their families or heard about from their environment:

P7 (20): *They gave me 5 stones; they said my period would last that long (5 days). My mother gave me the stones. As a superstition... My yenge (aunt in Turkish) bought me a cake to celebrate.*

P6 (22): *There is hair pulling, a little slap. You are already in shock, why are they doing this?*

P8 (43): *My mother had slapped me. She said, "May your cheeks be rosy," she said, "It is a tradition."*

P26 (19): *My mother said, "you have grown up and become a woman" and slapped me. My older sister was very angry at my mother because of the slap... When my grandmother first got her period, they beat her to death. Both as if to say, "are you cheating" and as if to say "congratulations, you have become a woman". This is very bad. Look at the cost of menstruation.*

P28 (47): *I have heard many people get slapped during their first period. It did not happen to me, but it happened to my friends.*

P23 (23): *There is a belief that fasting is not allowed. Worship is forbidden.*

As it observed in some participants' answers, there are some superstitions such as menstrual slap or giving 5 stones. Examining the social and cultural meanings of the menstrual slap can provide an important perspective on how individuals confront the period taboo and how such rituals shape their menstrual experiences. The experiences of individuals who practice or experience the menstrual slap are a valuable source of data for understanding the impact of social norms on individuals' body perceptions and social roles. This tradition, as a point where the individual and social dimensions of menstruation intersect, requires deep reflection on the period taboo and the social meanings of menstruation.

In some cultures, menarche is celebrated with small ceremonies within the family. These celebrations make the individual feel valuable and important and ensure that the menarche experience is interpreted positively. Supportive education by families and the acceptance of menarche as a natural process strengthens this positive perception.

However, celebrating menarche can carry positive messages about the individual's social role. For example, for some individuals, it is seen as a sign of femininity, productivity or growth. Although these messages are positive, they can also be wrong because they reduce menarche and being a woman to reproduction. Positive discourses about menarche within the family can help the individual develop a positive attitude towards their body and gain self-confidence. Attributing positive meanings to the physical changes that come with menarche allows individuals to see this process not only as a biological condition but also as a meaningful life stage.

In families where menarche is viewed positively, it is seen that individuals' perceptions of their ongoing menarche experiences are generally more comfortable and accepting. For example, while some individuals receive praise and support from their mothers, fathers, or siblings during menarche, they see themselves as part of this natural process and learn to respect the functioning of their bodies. This approach contributes to the

understanding of menarche as not only a biological beginning for the individual, but also an experience supported in the context of family and society.

This situation is more common in social and family structures where the period taboo can be broken, and open communication is possible. Thus, the individual can associate the menstrual experience with trust instead of shame, and peace instead of anxiety. In short, menarche and menstrual experiences can be shaped as a positive experience depending on the context in which the individual is located and can form the basis for positive perceptions of the individual's body and social role.

P6 (22): *That day, my friend next to me congratulated me excessively. My coach also congratulated me. He had already guessed that I was going through puberty because my performance in sports had improved recently. I had a teammate, the oldest one, who hugged me and congratulated me. The boys (teammates) gave me their shorts so we could cover ourselves up, they were very supportive.*

P10 (49): *I said, "Oh, okay, I bled." My mother congratulated me, she said my daughter got her period.*

P23 (23): *I called my mother, she congratulated me. We even cut a cake to celebrate. In those years, I could not tell men, I could not even tell women. I still cannot speak comfortably now, but at least I can walk without hiding my pad.*

P4 (24): *I got my period very early. I was 9 years old. My mom and dad brought me a big bag of chocolate on the evening of my period.*

P22 (40): *My father used to buy me pads and chocolate when I first got my period...I am a nurse anyway, so now I can talk about it just as easily.*

P11 (54): *I talk to my daughter and my sons about menstruation. My periods were very painful, I would tell them every time, I would say I had my period, I would bleed once a month. I even bought my daughter a gift. I said this is a beautiful thing. Her father said the same thing. We can talk about this. Because we have experienced the humiliation of this in our families. Children should know that it is not a shameful or bad thing. Not having a period is worse.*

It can be observed that the period has negative meanings for some participants, but for others it is a topic of celebration. When we look at the reasons for these differences in meaning, the participants generally talked about their family structures and the culture they grew up in. When we look at positive and celebratory memories of menarche, we see that participants can have positive experiences regardless of their age. When I started my thesis, I assumed that menstruators would have more negative experiences of menstruation and menarche as they got older.

P10 was congratulated by her mother when she got her first period. She stated that the reason for this is related to the following situation:

*P10 (49): I grew up in a modern, secular family. I grew up in the city. I do not remember being very shy or ashamed.*

The participant attributed having a positive perception of menstruation to growing up in a modern and secular family.

Participants with negative experiences explained the reason for this situation as follows:

*P1 (21): We are from Ordu, and women's issues are rarely talked about here.*

*P5 (22): I was embarrassed when I first got my period. My family is from the East (eastern part of Türkiye), it is perceived as something that should be hidden from men. I do not hide it, but I do not make it obvious.*

*P3 (21): I have an Anatolian conservative family. My family used to say “shhh, don't tell your father”. Not being able to talk to a father figure still hurts me.*

Menarche experiences and how menstruation is perceived vary from person to person. The fact that families have developed negative narratives about menstruation in a specific regional or cultural context indicates that menstruation is shaped as a collective experience rather than an individual one. These narratives, especially in communities where more conservative or traditional norms prevail, can cause individuals to view menstruation as a shame or burden. Furthermore, such experiences show that period taboos and negative social expectations about menstruation can be passed down through generations.

This also requires using the concept of intersectionality to understand how menstruation is shaped in participants' personal stories. Seeing how factors such as gender norms, regional culture, economic conditions, and family structures come together to shape individuals' menstrual experiences makes it possible to understand not only the perception of menstruation, but also the perceptions of individuals about their own bodies and social roles.

Finally, the participants' urban or rural origins affected their perception of menstruation and menarche. Participants who grew up in rural Türkiye or whose families had inherited that culture had more negative perceptions of menstruation and menarche. Even though participants stated that they had personally broken the menstruation taboo and negative perception of menstruation and that they did not have such thoughts, they stated that such thoughts still existed in their families.

#### **4.2. Menstrual Experiences and Family Stories Vary with Age or not?**

Some of the main goals of this thesis are to understand how menstrual experiences change with age, how practices of using menstrual products are shaped over the years, and how period taboo and period poverty differ with age. For this reason, it was useful to first ask participants about their own definitions of menstruation and their experiences of menarche, then to listen to menstrual stories they heard from their families, and to ask about product use and discursive differences of their elders or older people in their circle.

One point that was noticed during the interviews was that the participants, who were already unable to access sufficient, transparent, scientific and age-appropriate information from their families and the adults around them due to period taboo, also experienced a similar access limitation when it came to their menstrual stories.

Although it was mostly hearsay information and stories, participants shared some anecdotes:

P2 (23): *When my mother had her period in the village, she would try not to show it and would wear shalwar.*

P2 mentioned that her family had a rural origin and that her mother used to wear shalwar, especially when she was young. Her mother, who had a rural origin, told her daughter P2 that she hid her period when she was menstruating and that she had to hide it too.

P5 (22): *My mother used to use cloths; menstrual panties look the same to me. They feel dirty, not hygienic.*

P4 (24): *My mother used to boil the cloths to make them cleaner. I heard this from the family. They did not tell me much else. Of course, there were no pads back then.*

The use of pads in Turkey began in the late 1970s when the Orkid brand entered the sector (Cabar, 2010). Before pads and other menstrual products came to Türkiye, one of the most common methods of menstrual management used by menstruators was to boil and iron cotton cloths to disinfect them.

P8 (43): *The elders in the family used to say that you should perform “abdest” (ablution) when your period is over. They also say that you should not go into the kitchen and prepare preserved food when you are on your period. This is not an illness though. There is a reason for the bleeding, it is a physiological thing. Oh, and “being sick”, say the old people.*

P7 (20): *Instead of saying period, I heard that “halam geldi” (my aunt came) and being sick from my family.*

P1 (21): *Nightmares are had before menstruation. Cloths are ironed and placed on underwear as period product. It is said that halam geldi. I have “adet” (an old saying of regl). My “aybaşı” (menses, beginning of moon) has come.*

P9 (24): *Halam geldi, she was colorful, she was colored... For example, she is not joining the prayers, because she is colorful, they said when I was little.*

Additionally, in the menstrual stories heard from families, there is usually a linguistic and verbal avoidance. People have developed different expressions over the years to avoid saying the word menstruation or to not show that they are talking about menstruation to non-menstruators around them. For example, halam geldi and hasta olmak are some of these.

P27 (45): *Menstruation is always a dirty thing, and we internalize it. For example, a person who is menstruating does not prepare meal in the kitchen in my family.*

P10 (49): *They said do not take a shower or go swimming. No one talked to me about sexuality, or I did not receive sex education... When you get your period, you are a young girl, you should be careful with your actions. Getting your period is one of the turning points in life. For example, menstruating, getting married, getting a job... These are all turning points.*

P19 (24): *My family says you cannot pray. You cannot prepare pickles. Someone who is not menstruating puts the lid on the pickle jar. They say you cannot take a shower when you are on your period. It is like I am dirty when I am on my period, I will wash myself when it is over and be clean.*

Some stories and statements heard from family members about menstruation may include prohibitions on certain religious practices or false information. For example, admonishing a person who is menstruating not to take a bath is against the hygiene that should be provided during menstruation. In addition, restrictions such as not preparing pickles or not cooking meal are not rested on a scientific basis.

Although menstrual stories from families generally include data on period taboos and period poverty, they emerge in connection with the rural or urban origin of the participants rather than their age.

#### 4.3. Surprise, Fear and Shame

Lack of information and gender inequality demonize menstruating bodies and bodily experiences. For the uninformed individual, menstruation can be confusing and frightening. Additionally, due to social prejudices, menstruators experience shame.

Participants shared anecdotes about shame:

P5 (22): *When I was little, a neighbor of ours would always send me to buy pads. Even at that age, I knew it was wrong.*

P5 mentioned that her neighbor sent her to get pads because she was embarrassed to go and buy them herself. As can be seen in this case, the feeling of shame associated with menstruation is transmitted and taught from the environment before the individual has even experienced menarche.

P30 (23): *Menstruation was a big taboo in our family, for example I could not tell my father about it, but he probably knew that I was menstruating.*

P3 (21): *I got my period at my aunt's house; my aunt told her husband (enişte in Turkish). My enişte on the door while I was in the toilet, said, are you okay, if you need a pad, I'll get it from your cousin's drawer. I died of embarrassment at that time, but it turns out that my enişte's behavior was healthy. I envy my cousin. I wish I could communicate like that with my father.*

As can be observed in these anecdotes, menstruation brings with it an intense sense of shame. It becomes impossible to share whether to have period with family members or ask for help. One of the striking points here is that menstruators are generally hesitant to tell a family member who does not menstruate, such as a father, that they are menstruating. While menstrual information is passed on among women in the family, the non-menstruating father remains outside of this transfer of information and experience and the solidarity network.

P14 (41): *Even at my age, I can still whisper in the office. We always whisper when asking or sharing pads... When we were in middle school, a girl dropped a pad in the hallway, and the boys in the hallway made fun of her and played with it like they were playing football.*

P14 stated that she was shyer when she first had her period, and that she overcame this shyness about menstruation as she grew older. Despite this, she draws attention to the contradiction of whispering when she needs a pad.

P32 (22): *The place where I grew up was a conservative place, I did not live in a good neighborhood. At school, kids made fun of us (girls) a lot. But we did not care, we were used to it.*

P12 (43): *Pads were not common in those years; I used pieces of cloth. When I was 17-18, I went to a hotel for an internship. Since I was menstruating, I washed the pieces of cloth and hung them all over the room. My boss's wife came to my room for some reason and saw the cloths. I was so embarrassed. In my family, such things were never taboo, but that day, for some reason, I was so embarrassed.*

I expected P12, who is 43 years old, to have a very intense encounter with the period taboo, as I had assumed when I began my thesis. However, P12 stated that she had generally positive memories, that she had not encountered the period taboo, and that her family had been comfortable communicating with her. However, as in the above quote, she felt embarrassed when a menstruator outside the family saw her menstrual products. Menstruation creates lifelong shame.

P21 (21): *They are (patients) sometimes ashamed. Some say they perform ablution once every four days. It is as if they are speaking in code.*

P21 heard this saying while asking for medical history from patients when she was an intern doctor. The patient mentioned that she performed regular ablutions to explain that she was menstruating.

P31 (20): *I first had my period when I was 12 years old. I knew about it because my mother was a health worker. I was waiting because I had the knowledge, I was not afraid.*

As P31 noted, having access to menstrual information can make the menarche experience easier, more comfortable, and less fearful. Not being able to access menstrual information, which is a branch of period poverty, is a problem that should be taken seriously for this very reason. Not being able to access scientific, transparent and age-appropriate menstrual information and experiencing period poverty affects menstruators' body perception, self-confidence and character development.

#### **4.4. Emotional Changes: What is Happening to Me?**

Menstruation is a phenomenon that is ignored in society. In menstruation-friendly conversations, physical symptoms are made visible, while emotional and psychological symptoms are generally ignored. Participants often reported noticing emotional and mental changes before, during, and after their period. Some participants said they did not recognize these symptoms when they first started menstruating because they were not aware that such symptoms could occur, but later learned that hormonal changes during menstruation can trigger these symptoms.

P1 (21): *Before and during my period, I had no knowledge of menstruation. But over time, I began to understand my emotional state. I understood my feelings. I told myself, it is not your fault, look, you had your period. I mean, I used to blame myself, asking why I am like this, what is happening to me.*

P6 (22): *I get very angry. For example, if someone asks me something, I sometimes snap and say, "Take care of it yourself." I say, "Are you stupid? Do not ask me."*  
(laughing)

Being informed about not only the physical but also the psychological symptoms that are ignored and overlooked is an important factor for menstruators to have a comfortable and peaceful menstrual experience. However, since psychological symptoms are difficult to see from the outside, they are often overlooked. In a scenario

where period taboo and period poverty were less prevalent, menstruators could learn the possibility of experiencing emotional and mental symptoms, and this could enable them to have a more peaceful menstruation.

#### **4.5. Menstrual Product Choices, Prices, Discounts**

Period poverty covers many important points such as access to menstrual products produced under hygienic conditions and in various sizes, clean water and soap, safe and lockable cabins, and accurate, transparent and scientific information about menstruation. I asked the participants about their period product usage habits. There was a parallelism between the products that the participants used when they first had their period and the products they use now. Although the participants did not personally find menstrual products expensive, they stated that the prices were too high. Some participants stated that the products should be provided free of charge or at least for symbolic fees. Participants developed different coping strategies to cope with high prices. The common situation that the participants stated was that they turned to cheap brands or chased discounts when purchasing the products they used. Another method of coping with period poverty is to buy a lot of products when they find them at a reasonable price.

*P2 (23): There are very few products advertised in Türkiye. Only pads... And they are very expensive. Since I have short and infrequent periods, I could actually use a menstrual cup, tampons, etc. But they are also expensive. There is a lot of misinformation in Türkiye.*

As P2 mentioned, period poverty includes not only not being able to access products but also not being able to find menstrual products of sufficient variety, size and quality when shopping. She also drew attention to the lack of information about period products in Türkiye.

*P5 (22): Pads and tampons are very expensive. There are things that need to be done in the country. Instead of putting pads in black bags, they should be ashamed of their prices...Hygiene packages should be distributed, there should be panties, tampons and pads in them.*

P5 mentioned that menstrual products and underwear should be distributed in the form of a hygiene kit and emphasized the unnecessary nature of the cultural movement that puts pads in black bags so that the inside is not visible, which is an indicator of the period taboo in Türkiye. She gave the message that we should be ashamed of the prices of period products, not period products themselves.

P16 (18): *We need to focus on sustainable products for our environment. But these are very expensive, as a student I sometimes have a hard time buying products. Still, period panties, period swimsuits, menstrual cups are good options.*

P19 (24): *I calculated last time that a pad costs 7 Turkish liras. Our insurance covers medicine when we are sick, why does it not cover pads? Pads have always been very expensive. We view sexual health as an incredibly taboo. Yet this is also a health issue.*

P27 (45): *The taxation of pads really upsets me. Half of the world menstruates. The state should produce them and distribute them for free.*

Many participants were critical of high menstrual product taxes and saw the government's policy of promoting fertility as contradictory to high menstrual product prices. High taxation of period products deepens income inequality and period poverty. Some participants complained that they wanted to use higher quality or more sustainable menstrual products but did not have the budget to do so.

P8 (43): *One of the primary needs for women is menstrual products. When I ask for pads from friends at work, the fact that they are expensive prevents me. I feel very indebted because of the prices. Right now, I buy pads whenever I see them on sale.*

P7 (20): *Up until now, I was using affordable pads because our financial situation was not very good. When I started getting a scholarship for university, I switched to higher quality brands.*

As P7 also mentioned, participants with limited budgets often stated that they have to use affordable and lower quality menstrual products. When their financial situation

improves, when they can save money, or when menstrual products are on sale, participants tend to choose more comfortable and higher quality products.

P1 (21): *Period products are expensive for a student. It is hard as a student...My circle of friends tends to go for cheaper options. We always follow sales.*

P6 (22): *We come across different prices every time. I caught a discount, I store it. Why do I have to store it, it should be free.*

P9 (24): *Sometimes I tend to go for the cheaper ones. But I always check which ones are more affordable. I chase discounts.*

Some participants stated that they had difficulty accessing these high-priced menstrual products and preferred cheaper brands or shopped during sales. The way to cope with high taxes is to wait for the discount seasons, store your belongings at home if possible, and turn to affordable period product brands.

P3 (21): *Last month I really did not have any money left to buy pads. I am always looking for discounts. What is this, is there anyone who is left without pads every month, what a pity...Every month there is the expense of cigarettes, coffee and pads. Pads are stolen in the dormitory. One cannot be angry, so they have to steal them because they cannot buy them.*

P21 (21): *My family used to use cloth instead of pads. It is like selling medicine to patients at a very high price; the products are very expensive.*

P23 (23): *Since this is my 6th year at the school I study in, I can no longer receive a scholarship. I now buy my pads from the cheapest market. I do not know if they are produced hygienically.*

P17 (25): *These prices are beneficial to capitalism. Production costs are actually low. They say you have to; you will buy it. If this (menstruation) is an illness like they are imposing on us, then they should distribute the pads for free. If I were them (the government), I would distribute them for free.*

P13 (56): *The products are too expensive. They should definitely be free.*

Participants emphasized that menstrual products are a fundamental right. They found the high pricing and taxation to be inconsistent with the government's reproductive policies. They stated that menstrual products should be distributed free of charge by the government.

P28 (47): *For me, buying pads is not a burden, but the government should still give them for free. But money is not everything. It is easy to access products in a big city. In Çanakkale, two of my friends looked for tampons and could not find any. That was funny, for example. However, Çanakkale is not a very small city.*

As seen in the Çanakkale anecdote shared by P28, menstrual experiences and period poverty are affected by urban and rural origin. Çanakkale is a city known for its historical and touristic values in the northwest of Türkiye. Although not a capital or a metropolis, being unable to find tampons in a holiday resort in Çanakkale, which is not a small city, is an indicator of the difficulty of accessing menstrual products of various qualities, which is one aspect of period poverty.

P11 (54): *I used cloth at first. I used pads later. The pads were more comfortable and easier. These places (referring to Hatay) are rural areas, it was hard to even buy from the grocery store. It was hard to access. Pads came out after 6-7 years... This is a necessity, not a luxury. Everyone is required to use it. It should be distributed free of charge. My husband buys it for my daughter in packets. What should someone who cannot afford it do, tear the sheets and use them?*

P11 also mentioned the city of Hatay in southern Türkiye and stated that menstrual products are not widely available in rural areas and that access is difficult.

P14 (41): *This is a need like bread and water. It is not a luxury. It is a basic need. There is such a thing as period poverty. There are many people who cannot go to school or work.*

Some participants stated that menstrual products are not luxury items and that easy access to them is a right. Some participants stated that they were familiar with concepts such as period taboo and period poverty.

#### **4.6. Menstruating in Public Spaces: I am Thankful If There is a Trash Can**

One aspect of period poverty is the lack of access to clean water and soap, the presence of a waste and recycling bin where waste management can be provided, and the lack of menstrual products of different types, sizes, and preferences in the public space.

P13 (56): *Gender-neutral toilets are very important. I was so relieved when I first used a gender-neutral toilet. It was very liberating.*

P13 define themselves as non-binary individual. So, it can be observed that gender-neutral toilets and menstrual management is important for transgender and genderqueer individuals. As Chrisler mentioned, using men's bathroom is usually make transgender individuals feel unsafe and uncomfortable. The majority of them use bathrooms only if they are alone there. They try to be alone, quiet, using long-lasting and reusable menstrual products such as menstruation cups, menstruation disks, reusable pads and so on. (Chrisler et al., 2016).

P2 (23): *Just like a first aid kit, there should be a menstrual kit in public spaces. But I know people do not want it. Conservative people say, "Ah, are they going to live everything so openly?"*

P5 (22): *I left class in high school with a pad in my hand. They talked about me behind my back for 2 years... Let's say a blood stain appears; I wonder what will happen. Is this such a crazy topic?*

P15 (24): *I had my period while in my partner's car. The seat was covered in blood. I was so embarrassed; I apologized so much. My partner said, "What is the big deal? I will get the seat cleaned, do not worry."*

Some participants also expressed concern about blood stains. Menstruators were often embarrassed in the past when blood stains were transferred to clothing or to the place where they sat. The fear of period fluid stains may be related to the fact that it will be noticed by those who do not menstruate.

P7 (20): *It would be great if there were pads etc. in public toilets.*

P1 (21): *I sometimes see pads in cafe toilets. I really like this. They should be in all of them actually.*

P11 (54): *There should definitely be a stand full of pads. If there were a stand, young girls would not be nervous. But we cannot even find paper (toilet paper) in Türkiye (and laughing).*

Some participants mentioned that menstrual products such as pads and tampons should be available in restrooms for free. In the fight against period poverty, it is important to set up menstrual product stands in areas such as schools, campuses, cafeterias and libraries where there are individuals with no direct income, such as student groups. Providing these products for free is vital for menstruators experiencing period poverty.

P6 (22): *A friend of mine went to a presentation with a hot water bottle and a scarf around her belly. She said, "If you want me to give a presentation, you will accept me like this." She was on her period. I really liked that she was so brave.*

P20 (21): *There are no lids on the trash bins in the toilets on the school campus. The toilets are not clean at all. There may be pad vending machines, but I do not want them to be sold for money.*

P9 (24): *I am thankful if there is a trash can. Soap, tissues and trash cans can be lacking in the toilets. I wish there were pads. There are not even tissues, how can there be pads? In some faculties (at university), they put pads in the toilets, solidarity can occur. This is a good example. More awareness should be created about menstruation.*

P23 (23): *I saw a special bin for throwing pads in a shopping mall. I wish those were more common.*

P28 (47): *We cannot even find toilet paper. It is not hygienic. It should be hygienic and have menstrual products. Women's toilets are dirtier for some reason...There should be tampon pads in every toilet. If necessary, there should be a symbolic fee. There should be a vending machine where they are not trying to make a profit and at an affordable price...We cannot even access hygiene, which is our most human right, let alone menstrual products. They have gotten us used to this.*

P14 (41): *We do not have a toilet culture...There must be a vending machine. It is even hard to find a pharmacy in the plaza areas (She worked in Maslak and Levent in Istanbul, Türkiye). There should be a special trash can for pads. The toilets should be spacious. For the first time at this age (she is emphasizing the age) I saw a clean, hygienic, spacious toilet with a pad stand in the office due to my job. There are also many different types of pads, I was surprised by that too.*

Participants stated that toilets often lack hygienic conditions, and some toilets do not even have trash bins. Trash cans and pad waste bins are vital for the proper functioning of the waste and recycling system, which is a branch of period poverty. Participants emphasized that menstruation is quite challenging in such an environment. They stated that especially in these public areas, there is an important need for vending machines that can provide easy access to menstrual products such as pads. Participants stated that such arrangements can make the menstrual experience easier and less stressful and emphasized that hygiene and access issues should be addressed as a social priority.

#### **4.7. Menopause**

When I started the study, I had planned to ask questions about menopause only to participants who had experienced menopause. This idea changed during the study. In order to learn the answers to questions such as whether we can access information about menopause before experiencing menopause, what we hear from society, our families and information sources, I asked the question "What does menopause mean to you" to both participants aged 18-25 and participants aged 40 and over. Because the

perception of menopause, as well as the perception of menstruation, is influenced by variables such as education status, age, and gender identity.

P8 (43): *Until 1.5-2 years ago, I wanted to have my uterus removed like Angelina Jolie. I wanted to have my uterus removed when I had myomas removed. I knew that I had hot flashes, and my period stopped. Menstruation felt like a hassle, menopause felt like a relief. When I talked to my doctor friends, I changed my mind. I want it to be later, even now. All hormones change, it is not an easy process.*

P8's view of menopause as a solution may be due to a lack of knowledge and a demonization of the physical and psychological symptoms of menstruation. However, if menstruators knew more about menopause, they would realize that it is an experience that can have both positive and negative aspects, just like menstruation. Perceiving menstruation as pure negativity and menopause as the absence of menstruation is far from physiological reality.

P10 (49): *My husband and I did not accept the perception that femininity is over, sexuality is over... I was surprised by the symptoms, such as stomach problems, frozen shoulders, etc. I thought I was having completely different things, I literally said wow, I am in menopause... If menstruation is a taboo, there is no menopause. No one talks about menopause.*

P21 (21): *I feel like I have come to the end of a process, I have grown old... I am scared, but my mother says she is freer. That is why I say let it end so I can be free.*

P23 (23): *It is said that femininity ends, but femininity does not only mean fertility. Every woman experience this.*

P25 (19): *Society imposes the role of motherhood on us. That is why they say that womanhood and motherhood end with menopause.*

P17 (25): *We are neither 100% women nor men. We have testosterone, progesterone and estrogen in our bodies. That is why I am against the idea that femininity is over.*

When I asked participants questions to learn their thoughts about menopause, they generally talked about getting older, the end of femininity, and the decrease in sexuality. Although society imposed these on them, no participant made statements such as "femininity is ending", "I am no longer a woman" or "I will not be". All participants, without exception, stated that menstruation did not mean being a woman and that they did not lose anything from their identity as a woman after menopause.

P28 (47): *At first I said, "Oh, how nice it is that I do not menstruate," but in fact everyone says that I am getting older. They say that I am losing my femininity... I have been feeling like I'm getting older for the last six months. It's been creeping up on me.*

P11 (54): *I thought I was stressed a few years ago, it turned out to be menopause. I felt like my femininity was leaving. The doctor said take medication for two years, we can postpone it if you want. I accepted menopause. I was very scared for the first six months or so. It turns out life goes on. I had the feeling that you are getting old, you are not a woman. You do not get old when you want to. Everything depends on you actually.*

Participants aged 40 and over can communicate more easily with their friends and other people around them about menopause. Despite this, accurate, transparent and scientific information about menopause is not available, just like menstruation. They usually enter or will enter the menopause process with hearsay information.

P22 (40): *My biggest fear regarding menopause is osteoporosis. Hot flashes and hormonal changes are not much of a concern. Since I do not plan on having children, I do not have any concerns about fertility.*

P14 (41): *Some women go through menopause very hard. For example, I am afraid of my sleep being interrupted. Because I have a job, I work hard, I need sleep. I am afraid of sweating, the smell of sweat. In general, I am a little afraid of menopause... It is said that women do not have a sexual life after menopause. However, there are so many women who have a vibrant sexual life (laughs).*

P24 (41): *They say that if you do not menstruate, you cannot have children, you cannot give birth, you cannot be a woman. But it is not like that. Menopause is just a process.*

Participants mostly started to learn about menopause while they were experiencing it. Women who did not experience menopause had superficial and hearsay information. There were some common symptoms related to menopause that were mentioned by a few participants. For example, hot flashes, sleep disruption, psychological and emotional changes, weight gain, and so on (Nelson et al., 2005; Santoro et al., 2021). Participants have heard about some menopause symptoms from people around them. These include hot flashes, osteoporosis, sleep disturbance, nervousness and stress. Almost all participants think that menopause is a negative process and that they need to fight against it. In other words, menopause is a manageable but challenging process in the eyes of the participants.

P23 (23): *I know from my mother that she often feels hot and wants to take her clothes off.*

P17 (25): *My mother experienced it but never showed it, if she had moodiness or hot flashes she did not tell us.*

The common point in the answers of these two participants is that information about menopause is learned from the mother. Menopause information is only discussed among the women in the family or even not discussed at all.

P28 (47): *Sleep disturbances, unhealthy sleep, hot flashes occur. I sweat like water for 3-5 minutes. Then it passes. Hot flashes happen really often.*

P14 (41): *2 years ago, I gained a lot of weight due to stress and depression. Was it menopause?*

Some participants experienced menopause but did not know whether it was menopause or how to cope with these symptoms.

## CHAPTER 5

### CONCLUSION AND RECOMMENDATIONS

This study analyzed the experiences of menstruators in social, cultural and economic contexts and examined how period taboo and period poverty create differences in individuals' lives. When I started this thesis focusing on the menstrual experiences of menstruators in Turkey, the period taboo and period poverty, my assumptions were that the experiences of two different age groups, namely menstruators aged 18-25 and menstruators aged 40 and above, would differ depending on age. As I continued the in-depth interviews, I realized that individuals' menstrual experiences and perceptions are shaped independently of age. The findings partially invalidated this assumption and revealed that structural factors such as urban and rural differences, origin, financial status and class affect menstrual experiences more significantly than age. For example, regardless of the age of the participants, they hesitated to talk about menstruation, especially in their early adolescence. Again, regardless of age, they avoided talking about menstruation with non-menstruators. When I started the study, I assumed that individuals' income levels would increase as they got older. Indeed, participants aged 40 and above had higher incomes than participants aged 18-25. Nevertheless, we observe that both groups have difficulty accessing menstrual products, which is an indicator of period poverty. In other words, period poverty is experienced by both groups regardless of age. Although both groups experience period poverty, the intensity of this poverty is affected by urban and rural factors. For example, menstruators with rural origins or living in small cities experienced period poverty more deeply, while participants with urban origins or who grew up in the city, studied or worked in big cities were less exposed to period poverty.

This study revealed that menstrual experiences, period taboo and period poverty in Turkey are shaped by factors beyond age. The socio-cultural transmission in rural areas and the socio-cultural transmission in urban areas are different from each other. For this reason, experiences differ beyond age and even independently of age.

The findings of the study can be summarized in three categories: urban and rural factors, the role of income and class, and the role of non-menstruators.

One of the most striking findings of the study was the depth of the effect of the participants' rural or urban origin on the period taboo and period poverty. It was observed that individuals with a rural origin had a menstrual experience surrounded by more traditional norms, whereas those with an urban origin developed a more individual and private approach. The fact that traditional practices such as menstrual slap after menarche still exist among participants with a rural origin shows the intensity of the social pressures that shape the menstrual experiences of these individuals.

Urban individuals generally have more advantage in terms of access to menstrual products; however, this does not mean that the period taboo has completely disappeared in urban areas. For example, the discrimination that menstruating individuals face in their working lives reveals that gender roles continue to exist strongly in the urban context.

Other factor that shapes perception of period, period taboo and period poverty are income level and class. Menstrual experiences of individuals significantly differentiate depending on their income level. Individuals who are financially disadvantaged have to cope with the difficulties they experience in accessing menstrual products, as well as negative emotions such as social exclusion and shame. This situation shows that period poverty is not only an economic problem, but also a reflection of social inequalities. Individuals with higher income levels are less affected by these problems, which shows that access to menstrual products should be addressed on an equal basis.

One of the points that changes with class difference and income level is access to accurate, transparent and scientific menstrual information, which is a branch of period poverty. The part of the participants who grew up in the city, went to well-established private schools or colleges stated that they received information about menstruation at school. Each participant emphasized that they did not find this information or education sufficient. In addition, the participants stated that this education was only given to girls, which fueled gender inequality and the period taboo.

The study revealed that even participants who did not experience period poverty themselves complained about menstrual products being sold at high taxes and the limited variety of menstrual products and access to scientific information about menstruation.

Another finding is the effect of non-menstruators in shaping the perception of menstruation. Most of the individuals who produce and reproduce social norms are not directly exposed to these norms. Participants often described how non-menstruators around them fostered the period taboo, shame and concealment. For example, some participants stated that they were shy about their partners, fathers, friends, colleagues or brothers. It can also be said that the menstrual, hygiene and health education given only to girls in secondary school in Türkiye created this factor. Qualitative studies with non-menstruators can provide important information to understand how these taboos and forms of poverty are maintained.

Last important finding of the study is that period taboo and period poverty fuel each other. Individuals who experience period taboo intensely hesitate to express their menstrual needs due to reasons such as shame and concealment. For example, they hesitate to buy a product, request a product from a family member, or ask for information about menstruation from teachers or family members at school. Individuals who can talk openly about menstruation are more likely to demand that their needs be met from both the people around them and state mechanisms. When period poverty intensifies, individuals experience a greater sense of insecurity. Lack of self-confidence, inadequate menstrual care and management, and the fact that they are carried out in a manner that undermines human dignity, result in not talking about menstruation, not taking action, and hiding menstruation, which is an indicator of period taboo.

## **5.1 Future Research**

The aim of the study was to fill the gap in literature and lay the groundwork for further scientific research. When we look at the findings, there are a few points that I think are important to address that could inspire future research. First, transgender and genderqueer and experiences are important. This study focused on the experiences of

transgender and genderqueer individuals to a limited extent. However, the results highlight the need to examine in more depth the unique pressures that queer individuals face regarding the period taboo and period poverty. More comprehensive studies with queer menstruators could provide important groundwork for addressing menstrual experiences from a more intersectional perspective. The perception of menstrual experiences as predominantly a female experience in literature and society can be stigmatizing and trigger body dysphoria for transgender and genderqueer individuals. When focusing on queer menstrual experiences, it may be helpful to address the issue of gendered toilets. Therefore, investigating menstrual experiences from a queer perspective will fill another gap in the literature.

The second important point is matter of rural and urban differences. Studies that examine menstrual experiences in detail in the context of rural and urban areas can provide a better understanding of the social dynamics of these differences. While the dominance of traditional values and social norms in rural areas may cause issues such as period taboos to be experienced more deeply and widely, in urban areas, modernization and individualization processes may lead to these experiences being experienced differently. For example, in rural areas, the experience of menarche is usually met with obvious interventions and rituals by family elders, while in urban areas this experience may be treated as a more individual or private matter. In addition, economic and infrastructural differences between rural and urban areas can create significant inequalities in practical dimensions such as access to menstrual products. Studies that focus on rural and urban differences of menstruators can not only understand individual experiences, but also reveal how these experiences are shaped by gender roles, economic status and cultural norms. In this way, they can contribute to the creation of more comprehensive and effective policies and awareness studies regarding menstrual experiences.

The third important point can be explained as class differences of menstruators. Intersectional studies that analyze the impact of material status on menstrual experiences can make important contributions to making sense of economic inequalities. Conducting a study focusing on the experiences of menstruators from different classes can provide more detailed information and observations about period

taboo and period poverty. In order to understand class differences, information such as consumption habits, education status, and income level can be asked in advance

## **5.2 Policy Recommendations**

It is important for policymakers and decision-makers to take menstruation literature into consideration when conducting their work and to develop inclusive policies for all individuals who menstruate. Menstrual experiences are not only a biological process, but are directly shaped by social, cultural and economic dynamics. Therefore, understanding the needs of individuals who menstruate and producing solutions appropriate to these needs will be a critical step in terms of gender equality. Transgender and genderqueer individuals should be taken into account when developing inclusive policies and the necessary steps should be taken to reduce the stigma related to queer menstrual experiences. Such policies, informed by menstrual literature, not only make the lives of individuals who menstruate easier, but also contribute to the creation of a sustainable structure that ensures gender equality. To ensure this, menstruators need to be more represented in decision-making mechanisms. Individuals who menstruate should be actively involved in decision-making mechanisms. The presence of individuals with menstrual experience, especially in policy-making positions, can contribute to reducing structural inequalities in this area. It is also important that comprehensive sexual health education is provided to all children regardless of gender. Considering the results of the in-depth interviews conducted within the scope of this thesis focusing on menstrual perception, period taboo and period poverty, I find it appropriate to make some policy recommendations. The first of these is to provide menstrual, health and sexuality education to all children in Türkiye, regardless of gender. In this way, menstruators and non-menstruators of the future can access accurate, transparent and scientific information about menstruation. Education at an early age is important to combat the period taboo, which means that menstruation is a phenomenon that should be hidden and not talked about. Children receiving education at an age-appropriate level will positively affect menstrual perception. It is also important to add detailed menstrual, health and sexuality education content to the curriculum at an age-appropriate level. In this way, it may be possible to reduce and eventually end both the period taboo and

period poverty. My second suggestion is that the government remove the tax on menstrual products and provide free menstrual products in public areas such as campuses, schools, hospitals, and government institutions. This would be an important step in combating period poverty. In addition, making menstrual products visible in public spaces could lead individuals to talk about menstruation, normalize menstruation, and reduce the period taboo. My third suggestion is that the production phase of menstrual products should be strictly monitored and the use of materials that are not suitable for the human body and health should be prohibited. The state and individual investors can combat period poverty by prioritizing the production and innovation of menstrual products. Finally, when developing policies on menstruation, it is important to consult with menstruators and civil society organizations working in this field, to increase the visibility of those who have experience with menstruation, and to listen to them.

This study has shown that menstrual experiences go beyond individual experiences and are shaped by social dynamics. Period taboo and period poverty are comprehensive problems that affect not only the biological but also the social and economic lives of individuals. The findings reveal the necessity of addressing these issues from an intersectional perspective and provide an important basis for more inclusive policies and research designs.

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## APPENDICES

### A. METU HUMAN SUBJECTS ETHICS COMMITTEE APPROVAL



## B. TURKISH SUMMARY / TÜRKÇE ÖZET

### TÜRKİYE'DEKİ REGL TABUSU VE REGL YOKSULLUĞU: KOHORT KARŞILAŞTIRMASI

#### BÖLÜM 1

##### GİRİŞ

Kutuplarda altı ay gece altı ay gündüz yaşanıyor. Ekvator hep yağmurlu. Bazı insanlar denizin kıyısında yaşıyor, bazı insanlar çölün ortasında. Bazı insanlar köpek balığı ile yüzmeyi beş yaşında öğreniyor, bazı insanlar yaban domuzu avlıyor. Bazı coğrafyalarda on yaşındaki çocukların zorla evlendiriliyor, bazı yerlerde ise yaşlıları yaz kampına gitiyor. Bazı çocuklara ilk regl olduğunda tokat atılıyor, bazı çocuklara ise regl partisi yapılmıyor. Bazı çocuklar regl olmaktan nefret ediyor, utanıyor, bazı çocuklar her engeli aşıyor. Dünyanın neresine adımıımızı atarsak orada birileri regl oluyor: nüfusun aşağı yukarı yarısı. Nüfusun aşağı yukarı yarısı regl ile ilintili olarak utanç, kontrol, baskın gibi olumsuz hisler hissediyor. Nüfusun kalan yarısı hiç konuşmuyor. Bu tez, dünyanın neresine gidersek gidelim mutlak bir huzur ve güven içinde konuşmadığımız regl meselesine odaklanıyor. Regl tabusu ve regl yoksulluğu kavramlarını yeniden okuduğum, Türkiye'deki regl olanların deneyimlerine odaklandığım bu çalışma feminist gözlükler takılarak yazıldı.

Tezi feminist bakış açısıyla yazmak son derece önemiydi. Konusu itibariyle bu tez görülmeyen ve duyulmayana odaklanıyor. Uzun yıllardır akademik çalışmalarında erkek yazarlar, erkekliğe ve erkeklerin deneyimlerine odaklanan çalışmalar baskındı. Feminist bakış açısı ise gözden kaçırılan, dolap köşelerine itilen kavramları, natrans ve heteroseksüel erkek olmayanların deneyimlerini günüşığına çıkarıyor.

## BÖLÜM 2

### LİTERATÜR İNCELEMESİ

Regl tabusu ve regl yoksulluğu kulağa pek aşina gelmiyor. Tabu kavramını detaylı inceleyerek bu kavamlara giriş yapabiliriz. Tabu, kısaca bir davranışın veya olgunun yapılmasının, edilmesinin, eylenmesinin engellenmesi, yasaklanması anlamına gelir. Tabular genelde toplumlara içkindir ve uzun yıllar boyunca kültür, gelenek ve görenek ile nesilden nesle aktarılırlar (Gould & Kolb, 1964; Vargün, 2021).

Regl tabusu ise en yalın haliyle regle dair bilgiye erişimin çok kısıtlı olması veya hiç olmaması, regl deneyimlerinin paylaşılmaması, regl ürünlerinin ve hatta regl olunduğunun saklanması anlamına gelir. Kısacası regle dair her konu, eylem ve aksiyon yasaklanmıştır. Regl olan bedenleri kontrol etmeyi sağlayan ve dolaylı olarak doğurganlık, doğum kontrol yöntemleri, cinsellik statüsü, kürtaj gibi konularda bireyi gözlememeye ve dahası kısıtlamaya hizmet eden regl tabusu, regl olanlar için daha birçok olumsuzluğu beraberinde getirir (Özarslan, 2004).

Regl tabusu sebebiyle konuşulamayan regl deneyimleri, regl olan bireylere regl yoksulluğu ile döner. Yoksulluğun kol gezdiği coğrafyalarda -ki bu yoksulluk dünyanın neresine gidersek gidelim vardır- regl ile ilişkili yoksulluk da karşımıza çıkar. Regl tabusu sebebiyle bireyler regle dair ihtiyaç ve isteklerini belirtmekte zorlanır (Michel et al., 2022). Regl yoksulluğu kavramı birçok eksikliği ifade eder. Örneğin regle dair doğru, şeffaf ve bilimsel bilgiye ulaşamamak, temiz suya ve sabuna erişememek, güvenli ve kilitlenebilir kabinlere erişememek, sağlık kuruluşlarından yeterli ve stigmatize etmeyen teşhis ve tedavileri alamamak, kişisel tercihlere uygun regl ürünlerine erişememek, kullanılan regl ürünlerini bertaraf etmeye yarayan atık sistemlerinin olmaması gibi noktaların hepsi regl yoksulluğunun bir parçasıdır (Dar et al., 2023).

Regl yoksulluğunun sonuçları menstrüatörlerin hayatını doğrudan etkilemektedir. Örneğin, uygun regl bakım ürününe erişememek, kamusal alanda su, sabun ve güvenli,

kilitlenebilir kabinlerin olmaması gibi sebepler ile bireyler okula veya işe gitmekten kaçınır. Okul ve işe gitmemeye durumu ise uzun vadede kişinin bireysel ve bağımsız bir geliri olmasının önüne geçer. Sonuç olarak yoksulluk ve regl tabusu regl yoksulluğunu, regl yoksulluğu ise yoksulluk ve regl tabusunu yeniden üretir. Regl olan bireylerin regl yoksulluğu ile toplumun dışına, kamusal alandan özel alana itilmesinin toplumsal cinsiyet eşitsizliğini derinleştirdiği görülür.

Kamusal alanda regl olan biri olarak var olmanın zorlukları, bireyleri özel alanları olan evlere iter. Regl olan bireyler evde ev içi emek sömürüsünün hedefinde kalırken, regl olmayanlar kapitalizme doğrudan katkı sağlayan işçiler olurlar. Bir yandan evde kalanlar geleceğin işçilerini doğurmak, büyütmek ile yükümlüdür. Sonuç olarak regl olan bireyler ekonomik olarak regl olmayan bireylere bağımlı kalır. Bu durum çeşitli şiddet türlerinin önünü açar. Bu şiddet türleri fiziksel, psikolojik, ekonomik veya cinsel şiddet olabilir. Bu şiddet döngüsünü kırmak ve toplumsal cinsiyet eşitsizliğiyle mücadele etmek için regl üzerine konuşmak, regl deneyimlerini görünürlük kılmak önemlidir.

Regl yoksulluğu yukarıda da ifade edildiği gibi dünyanın her yerinde karşımıza çıkabilir. Bu tez ise Türkiye'deki deneyimlere odaklanmaktadır ve bir kohort karşılaştırması içermektedir. İlk grup, Türkiye'de yaşayan ve lisans eğitim görmekte olan, 18-25 yaş arasında ve hayatında en az bir kez regl olmuş bireylerden oluşmaktadır. İkinci grup ise, Türkiye'de yaşayan ve en az lisans derecesine sahip, 40 yaş ve üzeri, hayatında en az bir kez regl olmuş bireylerden oluşmaktadır.

## BÖLÜM 3

### YÖNTEM

Katılımcı kriterlerinden biri olan “hayatında en az bir kez regl olmuş” ibaresi pek çok açıdan önemlidir. Katılımcılar farklı sebeplerle artık regl olmuyor olabilir. Örneğin, menopoz bu faktörlerden bir tanesidir. Diğer bir faktör sağlık durumu olabilir. Farklı sağlık durumları sebebiyle bireyler artık regl olmuyor olabilir. Bir diğer sebep, spor olabilir. Vücuttaki yağ oranının belli bir yüzdenin altına düşmesi reglden kesilme ile sonuçlanabilir. Ayrıca katılımcı transgender veya genderqueer kimlikte olabilir ve reglden kesilmesine sebep olacak hormon baskılıyıcı ilaç veya ilaçlar kullanıyor olabilir. En az bir kez regl olmak, menarş ve regl deneyimlerine dair soruları yanıtlayabilmek için yeterlidir.

Regl olan, 27 yaşında, yüksek lisans öğrencisi bir araştırmacı olarak araştırma, yarı yapılandırılmış derinlemesine görüşmeler yapma ve tez yazım sürecinde birtakım zorluklar yaşadım. Bunlardan ilki, natrans kadın kimliğimle ve ister istemez içinde doğup büyüdüğüm Türkiye kültürüyle doğrudan ilişkili olarak, zaman zaman yeniden ürettiğimi fark ettiğim heteronormatif ve ikili cinsiyet sistemine göz kirpan bir yerde durmamadır. Bunu aşabilmenin tek yolu kesişimsellik teorisine odaklanmak ve eleştirel regl çalışmalarına dikkatimi vermek oldu. Bu sayede kesişimsel, kapsayıcı ve kuir feminist bir çalışma ortaya koyabildim. Bir diğer nokta ise, çevresinde hep 20li yaşlarında insanlar olan biri olarak, 40 yaş ve üzeri katılımcı kitlesine ulaşmakta zorlanmam oldu. Bu zorluğu ise arkadaşım, katılımcılarım ve hatta tanımadığım sosyal medya kullanıcılarının desteğiyle aşabildim. Katılımcı arama afişlerimin yaygınlaştırılması ile bu zorluk aşılabilde. Bir diğer zorluk, derinlemesine görüşmeleri yapabileceğim alan tedarik etmekte oldu. Yüz yüze veya çevrimiçi gerçekleştireceğim görüşmeler için katılımcılarla ortak bir alan ve zaman yaratmak zordu. Yüz yüze görüşmeleri zaman zaman çimenlerde oturarak, kantinde izole bir masa bulmaya çalışarak gerçekleştirdik. Teknik bir sorun ise bilgisayarımın SSD hatası vermesi ile yazdıklarımın ve derinlemesine görüşme kayıtlarının silinmesi oldu. Çalışmama ve

derinlemesine görüşmelere yeniden başlamak motivasyon kırıcı olsa da bu zorluğu danışmanımın desteğiyle atlatabildim.

Çalışmanın kısıtlılıklarına gelecek olursak, ilk olarak tüm Türkiye'den katılımcılar bulabilmek çok daha iyi bir veri getirirdi. Katılan kişi sayısının daha fazla olması, veri doygunluğuna ulaşmamı sağlayabilirdi. Ayrıca, kendini transgender veya genderqueer olarak tanımlayan daha çok menstrüatörle yolumun kesişmesi, kuir feminist bir çalışma olan bu teze farklı pencereler açabilirdi.



## BÖLÜM 4

### BULGULAR VE TARTIŞMA

Bu bölümde, gerçekleştirdiğim 32 yarı yapılandırılmış derinlemesine görüşmenin bulgularından bahsedeceğim. Bilgisayarımın SSD hatası verip tamamen bozulması gibi kısıtlamalar nedeniyle derinlemesine görüşmelere yeniden başlamak zorunda kaldım. Bu durum bana sabırı olmayı, her zaman verileri yedeklemeyi ve daha iyi derinlemesine görüşmeler yapmayı öğretti. 26 görüşme çevrimiçi bir toplantı platformu olan Zoom üzerinden gerçekleştirildi. 6 görüşme ise yüz yüze gerçekleştirildi. Bu 32 kişiye sosyal medyada yayinallyadığım afişler aracılığıyla ve kartopu yöntemiyle ulaştım. Arkadaşlarım ve bazı sosyal medya kullanıcıları bu teze katkıda bulunmak için afişlerimi paylaştılar. 18-25 yaş arası menstrüatörlerden oluşan ilk grubum 21, 40 yaş ve üzeri menstrüatörlerden oluşan ikinci grubum ise 11 kişiydi.

Mevcut damgalama ve tabu nedeniyle, *regl* hakkında konuşmak bazen zordu. Katılımcıların rahat hissetmeleri için gönüllü onam formundaki cümleleri tekrarlamak, istedikleri zaman durabileceğimizi, herhangi bir sebep göstermeden istedikleri zaman görüşmeyi sonlandırbileceğimizi ve sorduğum soruların tek bir doğru cevabının olmadığını vurgulamak faydalı oldu. Ayrıca katılımcılara kısaca kendimden bahsetmem ortamın yumuşamasını sağladı. Görüşmeler ortalama yarım saat sürdü. 26 görüşmede Zoom uygulaması içerisinde ses ve görüntü kaydı alındı. Yüz yüze gerçekleşen 6 görüşmede ise akıllı telefon ile ses kaydı alındı. Zoom'u seçme sebebi ise özellikle Covid-19 pandemisi döneminde Zoom kullanımının Türkiye'de yaygınlaşmasıydı. Katılımcıların Zoom'a aşina olduğu tahmin ediyordum. Görüşmelerin başında, soruları sormadan hemen önce daha anlaşırlı olmak adına görüşme boyunca *regl* kelimesini kullanacağımı belirttim. *Regl* kelimesi Türkiye'de nispeten yeni bir kelime. İngilizcedeki *period* kelimesine eşdeğer olarak düşünülebilir. Bu bölümde alıntıları aktarırken bir katılımcıdan diğerine geçtiğimde noktalı virgül kullandım. Bu sayede akıcı ve kolay takip edilebilir bir okuma oluşturmayı amaçladım.

#### 4.1 Regl Algısı ve Menarş Deneyimleri

Regl tabusu nedeniyle, regl öncesi regl hakkında bilgisi olanlar, olmayanlardan daha azdır. Bireyler genellikle reglin ne olduğunu menarş ile keşfetmeye başlarlar. Bilimsel, şeffaf ve doğru bilgiye ulaşmak hala zordur. Katılımcılar “Regl sizin için ne ifade ediyor?” sorusuna *her ay korktuğum bir şey; ağrı ve sizi anlamına geliyor, kadın olmanın zorunluluğu ve sıkıntı demek* gibi cevaplar vermiştir.

Öte yandan bazı menstrüatörlerin algıları daha olumludur. Reglin rutin doğası gereği sağlıklı yaşamın bir parçası olarak algılanır bazen. Katılımcılar *sağlık, arınma, biyolojik döngümüz; regl olmak sağlıklıdır* gibi cevaplar vermiştir.

Bazı katılımcılar ise reglin kadınlığın bir simgesi olduğunu belirtmişlerdir: *Kadın olmak, artık dikkatli hareket etmelisin, kadınsın sen; Akıntı rengimin değiştiğini fark edince hızlandırmak için bitki çayı içmeye başladım, bir an önce kadın olmak istiyordum.*

Bazı katılımcılar ise transgender veya genderkuir kimlikleri sebebiyle menarş ve regl deneyiminin onlar için zorlayıcı olduğunu aktardılar: *Ben çocukken çok keskin tabular vardı. Regl olmak sancılı bir süreçti. Bence benim kuir kimliğimden ötürü daha da zordu; Annem tam “girl power!” (kız gücü) tarzında biridir. Ama ilk kanadığımı görünce çok kötü hissettim, hatta inkâr ettim. Çünkü kimliğime uymuyordu. Anneme falan söylemedim, sakladım ama anladı. Pasta aldı, kutladı falan ama hoşuma gitmedi hiç. Benim için rahatsız edici zamanlardı. Erkek hissediyordum ama kadın oluyordum sanki.*

Katılımcıların regl deneyimleri çeşitli olsa da ortak tema menarş öncesi nitelikli ve yeterli bilgiye sahip olmamalarıydı: *Hiç bilgim yoktu, annem daha sonra söyledi; Annemin konuştuğunu veya başka bir şey hatırlamıyorum, ama pek de şaşımadım. Aileden regl hakkında pek bir şey duymadım; Evde annemin pedlerini görüyordum ve anneme soruyordum. Annem zamanı gelince anlayacaksın dedi, başka bir açıklama yapmadı; Keşke annem veya babam bana önceden söyleseydi.*

Bazı katılımcılar regl dönemiyle ilgili maruz kaldıkları batıl inançlardan bahsettiler: *Bana 5 taş verdiler; regl döneminin o kadar sürecekini (5 gün) söylediler. Annem bana taşları verdi. Bir batıl inanç olarak... Yengem kutlamak için pasta aldı; Saç çekme, küçük bir tokat atma var. Zaten şoktasınız, bunu neden yapıyorlar ki bir de?; Annem bana tokat atmıştı. "Yanakların al al olsun" dedi, "Bu bir gelenek." dedi.*

Bazı katılımcıların cevaplarında görüldüğü gibi, regl tokadı veya 5 taş vermek gibi bazı batıl inançlar var.

Ayrıca kutlamalar ve neşeli anlar gibi olumlu regl anılarına sahip katılımcılar da vardır: *O gün yanında oturan arkadaşım beni aşırı tebrik etti. Antrenörüm de beni tebrik etti. Spordaki derecem son zamanlarda iyileştiği için ergenliğe girdiğimi tahmin etmişti. En büyüğümüz olan bir takım arkadaşımız bana sarıldı ve tebrik etti. Erkekler (takım arkadaşları) arkamızı örtebilmemiz için şortlarını bize veriyordu, çok destekleyiciydiler; Aa dedim tamam ben kanadım, annem tebrik etti, kızım regl oldu dedi; Annem ve babam regl olduğum günün akşamında bana koca poşet çikolata getirdiler.*

Bazı katılımcılar için reglin olumsuz anımlar taşıdığı, ancak bazıları için ise kutlanan bir konu olduğu gözlemlenebilir. Bu anlam farklılıklarının nedenlerine baktığımızda, katılımcılar genellikle aile yapılarından ve içinde büyükleri kültürden bahsetmişlerdir. Bir katılımcı regl olduğunda annesi tarafından tebrik edilmiştir. Bunun nedeninin şu durumla ilgili olduğunu belirtmiştir: *Modern, seküler bir ailede büyüdüm. Şehirde büyüdüm. Çok utangaç veya mahcup olduğumu hatırlıyorum.*

Olumsuz deneyimler yaşayan katılımcılar bu durumun nedenini şu şekilde açıklamışlardır: *Biz Orduluyuz ve kadın sorunları burada nadiren konuşulur; İlk regl olduğumda çok utanıyorum. Biz doğuluyuz, erkeklerden saklanması gereken bir şey olarak algılanıyor. Saklamıyorum ama belli de etmiyorum; Anadolu muhafazakarı bir ailem var. Annemler "Şşşt, babana söyleme" derdi. Bir baba figürüyle konuşamamak hala canımı acıtıyor.*

Menarş deneyimleri ve reglin nasıl algılandığı kişiden kişiye değişir. Burada kırsal veya kentsel köken, aile yapısı, kişinin içinde büyüdüğü kültür ve kişinin regl hakkında daha önce herhangi bir bilgisi olup olmadığı gibi faktörler etkilidir. Olumlu menarş deneyimleri yaşayan katılımcılar genelde şehirde büyümüş, kentin sosyokültürel aktarımına maruz kalmış bireylerken, olumsuz menarş deneyimlerine sahip katılımcılar kırsal kökenleri olduğundan bahsetmişlerdir.

#### **4.2 Regl Deneyimleri ve Aile Hikayeleri Yaşa Göre Değişir mi?**

Bu tezin temel hedeflerinden biri regl deneyimlerinin yaşla nasıl değiştiğini, regl ürünleri kullanma pratiklerinin yıllar içinde nasıl şekillendiğini ve regl tabusu ve regl yoksulluğunun yaşa göre nasıl farklılaştığını anlamaktır. Bu nedenle, önce katılımcılara regl tanımlarını ve regl deneyimlerini sormak, ardından ailelerinden duydukları regl hikayelerini dinlemek ve çevrelerindeki büyüklerin veya yaşlı insanların ürün kullanımı ve söylemsel farklılıklar hakkında soru sormak faydalı oldu.

Görüşmeler sırasında fark edilen bir nokta, regl tabusu nedeniyle ailelerinden ve etraflarındaki yetişkinlerden yeterli, şeffaf, bilimsel ve yaşa uygun bilgiye erişemeyen katılımcıların, regl hikayelerine gelince de benzer bir erişim kısıtlaması yaşadıklarıydı. Bazı katılımcılar ailelerinden hiçbir bilgi veya hikâye aktarımı almamıştı.

Katılımcılar çoğunlukla kulaktan dolma bilgiler ve hikayeler duysalar da bazı anekdotlar da paylaştılar: *Annem köyde şalvar giyermiş regl olduğu belli olmasın diye; Annem bez kullanırmış, regl külötleri da bana bez gibi görünüyor. Pis geliyor bana; Annem bezleri daha temiz olsun diye kaynatırmış. Bunu aileden duydum. Bana başka pek bir şey söylemediler. Tabii o zamanlar ped yoktu; Ailedeki büyükler regl bittiğinde abdest almanız gerektiğini söylerlerdi. Ayrıca regl olanın turşusu tutmaz derlerdi. Bu bir hastalık değil ki. Kanamanın bir nedeni var, fizyolojik bir şey. Ha, bir de "hasta olmak" derler yaşlılar; Regl demek yerine halam geldi ve hasta olmak kelimelerini ailemden duydum; Regl öncesi kâbus görüldür. Mendiller ütülenip iç çamaşırına koyulur. Halam geldi denir. Adet oldum... Aybaşım geldi denir; Duş alma, yüzme derlerdi. Bana kimse cinsellik hakkında konuşmadı, evlenirken bile cinsellik eğitim almadım... Regl olduğunda artık genç bir kızın, hareketlerine dikkat etmelisin. Regl*

*olmak hayatın dönüm noktalarından biridir. Mesela regl olmak, evlenmek, işe girmek... Bunların hepsi dönüm noktasıdır; Halam geldi, renkli, renklenmiş... Mesela duaya katılmıyor biri, o renkli derlerdi ben küçükken.*

Bilgi eksikliği ve toplumsal cinsiyet eşitsizliği regl olan bedenleri ve bedensel deneyimleri şeytanlaştırır. Bunun sonucunda menstrüatörler utanç, korku ve damgalanma ile baş başa kalırlar. İhtiyaç duyduğu bilgiyi edinemeyen bireyler için regl olmak kafa karıştırıcı ve korkutucu olabilir. Toplumsal önyargılar nedeniyle de regl olanlar utanç yaşırlar.

#### **4.3 Hayret, Korku ve Utanç**

Bazı katılımcılar utanç hakkında anekdotlar paylaştılar: *Küçükken, komşularımızdan biri beni her zaman ped almaya gönderirdi. O yaşta bile bunun yanlış olduğunu biliyordum; Teyzemin evinde regl oldum, teyzem enişteme söyledi. Tuvaletteyken eniştem kapayı çaldı, iyi misin, ped ihtiyacın olursa kuzeninin odasından getireyim dedi. O sırada utançtan öldüm, ama eniştemin davranışının sağlıklı olduğunu şimdi anlıyorum. Kuzenime imreniyorum. Keşke babamla böyle iletişim kurabilseydim ben de.*

Bu anekdotlarda da görülebileceği gibi, bazı menstrüatörler için regl olmak beraberinde yoğun bir utanç duygusu getiriyor. Bu utanç hissi ise genelde menstrüatörlerin regl ürünü veya regl eğitimi gibi ihtiyaçlarını talep etmekten çekinmelerine yol açıyor. Yani regl tabusu regl yoksullüğünü, regl yoksulluğu ise regl tabusunu körüklüyor.

#### **4.4 Duygusal Değişimler: Bana Ne Oluyor?**

Regl, toplumda görmezden gelinen bir olgudur. Regl dostu sohbetlerde, fiziksel semptomlar görünür hale getirilirken, duygusal ve psikolojik semptomlar genellikle hali altına süpürülür: *Regl olmadan önce regl konusunda hiçbir bilgim yoktu. Ancak zamanla duygusal durumumu anlamaya başladım. Duygularımı anladım. Kendime dedim ki, senin hatan değil, bak, regl oldun. Yani, kendimi suçlardım, neden böleyim,*

*bana ne oluyor diye sorardım; Çok sinirleniyorum. Örneğin, biri bana bir şey sorduğunda, bazen çıkışıyorum ve "Kendin halletsene ya!" diyorum. "Aptal misin? Bana sorma." diyorum (gülüyorum).*

İnsanlık onuruna uygun bir regl dönemi geçirebilmek için menstrüatörlerin hem fiziksel hem ruhsal iyilik halinde olmaları beklenir. Regl deneyiminin ruhsal değişimlerinin gizlenmesi, bu konuda konuşulmaması ve deneyim aktarımı olmaması menstrüatörlerin beden disforisi ve özgüven zedelenmesi semptomlarla karşılaşmalarına neden olabilir.

#### **4.5 Regl Ürünleri Seçimi, Fiyatlar, İndirimler**

Katılımcıların regl dönemleri ilk başladığında kullandıkları ürünlerle şu anda kullandıkları ürünler arasında bir paralellik vardı. Bazı katılımcılar regl ürünlerini bizzat pahalı bulmasalar da fiyatların çok yüksek olduğunu belirttiler. Bazı katılımcılar ürünlerin ücretsiz veya en azından sembolik ücretler karşılığında sağlanması gerektiğini belirttiler. Katılımcıların belirttiği ortak durum, ürün satın alırken ucuz markalara yönelmeleri veya indirim kovalamalarıydı. Regl yoksulluğuyla başa çıkmayan bir diğer yöntemi de indirim dönemlerinde regl ürünü depolamak olarak karşıımıza çıktı. Tüm katılımcılar indirim döneminde ped, tampon gibi ürünlerin ihtiyaçlarından fazla alarak depolamaya çalışıklarını belirttiler.

Bazı katılımcılar şunları belirtti: *Türkiye'de çok az ürün reklamı yapılıyor. Sadece pedler... Ve çok pahalılar. Çok az kanamam olduğu için aslında regl kabi, tampon vb. kullanabilirdim. Ancak bunlar da pahalı. Türkiye'de çok fazla yanlış bilgi var; Pedler ve tamponlar çok pahalı. Ülkede yapılması gereken şeyler var. Pedleri siyah poşetlere koymak yerine fiyatlarından utanmalılar... Hijyen paketleri dağıtılmalı, içlerinde külöt, tampon ve ped olmalı; Kadınların temel ihtiyaçlarından biri regl ürünleri. İş yerinde arkadaşlarından ped istedığimde pahalı olması engelliyor beni. Fiyatlar yüzünden kendimi çok borçlu hissediyorum. Şu anda indirimde gördüğümde ped alıyorum; Şimdiye kadar maddi durumumuz çok iyi olmadığı için uygun fiyatlı pedler kullanıyorum. Üniversitede burs almaya başlayınca daha kaliteli markalara geçtim; Regl ürünleri bir öğrenci için pahalı. Öğrenci olmak zor... Arkadaş çevrem daha ucuz*

*seçeneklere yöneliyor. Her zaman indirimleri takip ediyoruz; Her seferinde farklı fiyatlarla karşılaşıyoruz resmen. İndirim yakalıyorum, depoluyorum. Neden depolamak zorundayım, bedava olmalı; Bazen daha ucuz olanlara yöneliyorum. Her zaman hangisinin daha uygun fiyatlı olduğunu kontrol ediyorum. İndirimlerin peşindeyim; Geçtiğimiz ay ped almak için gerçekten hiç param kalmadı. Bu ne dedim, her ay böyle pedsiz kalan var mı ki, ne yazık... Her ay sigara, kahve ve ped masrafi oluyor. Yurtta pedlerimiz çalınıyor. İnsan sınırlenemiyor, satın alamadıkları için çalmak zorunda kalıyorlar; pedlerin vergisi ve fiyatı beni gerçekten çok üzüyor. Dünyanın yarısı regl oluyor, devlet ped üretmeli ve ücretsiz dağıtmalı.*

Tüm katılımcıların ortak olarak belirttiği durum, regl ürünlerinin temel ihtiyaç olması ve bu ürünleri pahalı bulmalarıydı. Bazı katılımcılar buna regl ürünlerindeki verginin kaldırılmasını, regl ürünlerinden sembolik ücret alınması veya devletin bu ürünler ücretsiz dağıtması gibi çözümler önerdi.

#### **4.6 Kamusal Alanda Regl Olmak: Çöp Kutusu Varsa Şükrediyorum**

Regl yoksullüğünün bir yönü ise temiz suya ve sabuna erişimin olmaması, atık yönetiminin sağlanabileceğinin bir atık ve geri dönüşüm kutusunun yokluğu ve halka açık alanda farklı tür, boyut ve tercihlerde regl ürünlerinin bulunmamasıdır. Katılımcılar okul, kampüs, hastane, devlet kurumu gibi kamusal alanlarda regl ürünlerinin bulunduğu stantların olmasının, otomatlarda ped ve tampon gibi regl ürünlerinin bulunmasının onları güvende ve rahat hissettireceğini belirtmişlerdir. Ayrıca katılımcılar yalnızca regl ürünlerinin eksikliğinden değil, tuvaletlerin güvensiz ve hijyenden yoksun olduğunu da vurgulamışlardır.

*Tıpkı bir ilk yardım çantası gibi, halka açık alanlarda bir regl kiti olmalı. Ancak insanların bunu istemediğini biliyorum. Muhafazakâr insanlar, "Vah vah, her şeyi bu kadar açık mı yaşayacaklar?" diyorlar; Lisedeyken elimde bir pedle sınıfımdan ayrıldım. 2 yıl boyunca arkamdan konuştular...Diyelim ki bir kan lekesi arkama geçti; ne olacağını merak ediyorum. Bu çok mu uçuk bir konu sanki?; Halka açık tuvaletlerde ped vb. olsaydı harika olurdu; Bazen kafe tuvaletlerinde ped görüyorum, cidden süper. Aslında hepsinde olmalı; Bir arkadaşım sıcak su torbasıyla ve karnına atkı bağlayarak*

*sunuma çıktı. "Eğer sunum yapmamı istiyorsanız beni böyle kabul edersiniz" dedi. Reglmiş. Çok cesur olması hoşuma gitmişti; Çöp kutusu varsa şükrediyorum. Tuvaletlerde sabun, peçete ve çöp kutusu eksik olabiliyor. Keşke ped olsaydı. Ama tuvalet kâğıdı bile yok, nasıl ped olabilir? Bazı fakültelerde (üniversitede) tuvaletlere ped koyuyorlar, dayanışma olabiliyor. Bu güzel bir örnek. Regl konusunda daha fazla farkındalık yaratılmalı.*

#### **4.7 Menopoz**

Araştırmamın başında yalnızca menopoz sürecine giren, yani menopozu deneyimlemiş katılımcılara menopoz hakkında soru sormayı planlamıştım. Çalışma sırasında aslında her katılımcıya bu soruyu sormanın anlamlı olduğunu fark ettim. Aynı regl algısının negatif olması ve regl bilgisinin eksik olması gibi, menopozun da toplum tarafından negatif lanse edilen bir süreç olduğu açığa çıktı. 18-25 yaş arasındaki katılımcılar genelde bilgi sahibi olmadıklarını, bazen annelerinden veya ailedeki diğer menopozu deneyimlemiş kadınlardan bilgi edindiklerini fakat bu bilginin kulaktan dolma bilgiler olduğunu belirttiler. 40 yaş ve üzerindeki grup ise menopozu deneyimlemeye yakın veya deneyimliyor olduğundan bahsetmiş, yine de bilgi sahibi olmanın zorluğunu vurgulamışlardır. Bazı katılımcılar aynı regl tabusu gibi toplumda bir menopoz tabusu olduğunu, hatta menopoza dair bilginin çok daha muğlak olduğu söylemiştir.

Bir katılımcı şunu demiştir: *1.5-2 yıl öncesine kadar Angelina Jolie gibi rahmimi aldmak istiyordum. Miyomlarımı aldirirken rahmimi de aldmak istemiştim. Sicak basması oluyor, regl kesiliyor diye biliyordum. Regl sıkıntı, menopoz rahatlık gibi geliyordu. Hekim arkadaşlarla konuşunca fikrim değişti. Daha geç olsun istiyorum hatta artik. Tüm hormonlar değişiyor, kolay bir süreç değil.*

Diğer bir katılımcı ise: *Kadınlık bitti, cinsellik bitti algısına uymadık eşimle...Mide rahatsızlıkları, donuk omuz vs. semptomlardanmış, buna şaşırdım. Kendimde bambaşka şeyler oluyor sanmıştım, menopozmuşum oh be dedim resmen...Regl tabuysa, menopoz yok. Kimse menopoz konuşturuyor demiştir.*

Katılımcılar menopoz sürecinde karşılaşabilecekleri semptomlar hakkında doğru, şeffaf ve bilimsel bilgiye genelde sahip olmadıklarını belirttiler. Ayrıca, birçok katılımcı kadın olmak ile regl olmak ilişkisine değindi. Toplumdaki menopozu deneyimlemek kadınlığın sonudur düşüncesini eleştirdiler.

*Kadınlık bitti diyorlar ama kadınlık doğurmakla mı oluyor? Her kadın yaşıyor bunu (menopozu); Toplum bize anneliği dayatıyor. Kadınlar sadece anneyse var olur düşüncesi var. Bence bu yüzden menopoza girince kadınlık ve annelik biter diyorlar; Biz ne %100 kadınız ne de %100 erkeğiz. Testosteron, progesteron ve östrojen hormonlarımız var. Bu yüzden ben kadınlık biter fikrine karşıyım. Kadın olmak nasıl olur ki?; Diyorlar ki regl olmazsan çocuğun olmaz, doğuramazsan, kadın degilsin artık. Ama öyle değil, menopoz bir süreç sadece.*

Bu tez için görüşme gerçekleştirmeyi kabul eden katılımcılar sayesinde Türkiye'de iki farklı yaş grubundaki menstrüatörlerin regl, regl tabusu ve regl yoksulluğu ile ilgili deneyimlerini gözleme, bulguları yorumlama, politika ve araştırma önerisinde bulunma fırsatı edindim.

## BÖLÜM 5

### SONUÇ VE ÖNERİLER

Nüfusun yarısını hayatında en az bir kez regl olmuş veya olacak bireyler oluşturuyor. Regl, günlük hayatın bir parçası olduğu halde damgalanma ve tabu ile çevrilidir. Regl tabusu sebebiyle menstrüatörler istek ve ihtiyaçlarını dile getirmekte zorlanıyor. Bu durum ise bireylerin regl yoksulluğunu deneyimlemesine sebep oluyor. Regl yoksulluğu, aynı regl tabusu gibi dünyanın neresine gidersek gidelim karşımıza çıkıyor. Regle dair bu olumsuz düşünceler, algı ve inançlar sistemi dolaylı olarak menstrüatörlerin bedenlerinin kontrol edilmesine yol açıyor. Regli tabulaştırmak, doğum, kurtaj, doğum kontrol yöntemleri, cinsel haklar ve benzeri konularda da konuşamamak anlamına geliyor.

Türkiye'de yaşayan, 18-25 yaş arası, lisans öğrencisi ve hayatında en az bir kez regl olmuş kişiler ile Türkiye'de yaşayan, 40 yaş ve üzeri, en az lisans mezunu ve hayatında en az bir kez regl olmuş kişilerden oluşan iki grubun regl, regl tabusu ve regl yoksulluğu kapsamında karşılaştırılmasını amaçlayan bu kohort çalışması, dünyada ve Türkiye'de yeni ivme kazanan regl çalışmaları literatürüne katkı sağlamayı amaçlar.

Çalışma feminist metodolojilığında, kesişimsellik ve kuir teori kavramları çerçevesinde yazılmıştır.

#### 5.1 Gelecekteki Araştırmalar

Bu tez çalışmasına başlarken birtakım varsayımlarda bulunmuştum. Bunlardan ilki, regl algısı ve regl deneyimlerinin yaşa bağlı olarak değiştiği idi. Fakat gerçekleştirdiğim 32 derinlemesine görüşme sonrasında ortaya çıkan bulgular bu varsayımı kısmen yanlışladı. Menstrüatörlerin yaşıdan ziyade kırsal veya kentsel kökenli olmaları regl algısını ve regl deneyimlerini şekillendiren ana faktör olarak karşıma çıktı. Bu sebeple, gelecek araştırmaların kır ve kent kökeninin regl deneyimlerini nasıl etkilediğine odaklanması faydalı olabilir ve literatüre katkı sağlayabilir. Regl tabusu ve regl yoksulluğu hayat boyu süren ve iz bırakan bir süreç olmakla birlikte, yaş faktöründen bağımsız ve hatta yaştan öte deneyimlenir. Bu

noktada kırın ve kentin sosyokültürel aktarımıları farklılaşmaktadır ve daha önemli bir yer kaplamaktadır.

İkinci varsayımdım, 40 yaş ve üzeri katılımcıların regl yoksulluğu ile daha az karşılaşacağıydı. 18-25 yaş arasındaki öğrencilere kıyasla 40 yaş ve üzeri grubun gelirlerinin daha yüksek olacağını ön görmüştüm. Buna uygun olarak özellikle regl ürünlerinin fiyatları gibi regl yoksullüğünün gelirle ilişkili dallarından etkilenmeyeceklerini varsayımdım. Bu varsayımdım kısmen doğru olsa da regl yoksulluğu her yaştan katılımcıyı etkileyen bir Türkiye gerçeği olarak ortaya çıktı.

Bir diğer varsayımdım ise, regl tabusu ve regl yoksullüğünün birbirini yeniden ürettiği ve beslediğiydı. Derinlemesine görüşmelerin bulgularına baktığında bu varsayımdım doğrulandı. Regl tabusu ve damgalama sebebiyle utanç ve korku hissededen menstrüatörler regl bakımı için gerekli ürünlerini ve regle dair doğru, şeffaf ve bilimsel bilgiyi talep edemiyorlar. Regl tabusu, regl yoksullüğünü derinleştirmiştir. Regl yoksulluğu derinleştiğinde ise menstrüatörler regle dair daha bilgisiz oluyorlar ve regl bakımını insanlık onuruna uygun şekilde gerçekleştiremiyorlar. Dolayısıyla utanç, korku ve gizleme yeniden ortaya çıkıyor.

Sonuç olarak, Türkiye'de regle dair algıların negatif, utandırıcı ve korkutucu olduğu gözlemlenmiştir. Ayrıca katılımcılar regl tabusuna dair birçok anekdot paylaşmıştır. Bu da Türkiye'deki mozaikleşmiş kültürel yapıya rağmen reglin farklı bölgelerde dahi tabulaştırıldığını gözler önüne serer.

Artan fiyatlar ve kötüleşen ekonomik koşullar nedeniyle regl yoksullüğünün maddi boyutu katılımcıların hepsini etkileyen düzeydedir. Aynı şekilde regl bilgisine ve regl ürünlerinin atık yönetimi için atık ve geri dönüşüm sistemine erişim de eksiktir.

Çalışma, her ne kadar kuir feminist gözlüklerle yazılısa da örneklemdeki 4 kişi hariç herkes kendini cis kadın olarak tanımlamıştır. Bu nedenle gelecek çalışmaların kuir regl çalışmalarına odaklanması faydalı olabilir. Transgender ve genderkuir menstrüatörlerin regl deneyimlerine, kamusal alandaki cinsiyetli tuvaletler sorununa ve regl deneyimi ile tetiklenebilen beden disforisine odaklanmak faydalı olacaktır. Aynı zamanda çalışma bize regl olmayanların regl tabusu ve regl yoksullüğündaki payını göstermiştir. Katılımcılar özellikle regl tabusundan bahsederken sık sık

babalarından, erkek kardeşlerinden, partnerlerinden ve iş arkadaşlarından bahsetmiştir. Regl tabusu ve regl yoksulluğunun diğer yüzünü oluşturan regl olmayanların regl algısına odaklanan bir çalışma literatürde önemli bir boşluğu doldurmaya yardımcı olacaktır.

## 5.2 Politika Önerileri

Politika yapıcıların ve karar mekanizmalarının regl politikaları üretirken regl literatürüne dikkate almaları ve regl olan tüm bireyler için politika üretmeleri önemlidir. Regl, yalnızca biyolojik olgu değil aynı zamanda toplumsal, kültürel, ekonomik faktörlerle şekillenen bir deneyimdir. Toplumsal cinsiyet eşitliğini sağlamak için atılabilecek adımlardan biri regl politikalarından geçmektedir. Regl olan bireylerin karar mekanizmalarına dahil olması, politika üretilirken aktif şekilde danişılması önemlidir.

Tüm çocuklara, yaşlarına uygun olarak kapsamlı regl, sağlık ve cinsellik eğitimi verilmesi, okul müfredatına bu konuları içeren ünitelerin eklenmesi faydalı bir başlangıç olacaktır. Bu şekilde, geleceğin yetişkinleri olan çocuklar regl tabusu ve regl yoksulluğu ile daha az karşılaşacakları düşünülmektedir. Regl ürünlerine uygulanan %10'luk verginin kaldırılması bir diğer önemli adım olabilir. Vergisiz, hijyenik koşullarda üretilmiş, farklı bedenlere ve tercihlere uygun çeşitlilikte regl ürünlerinin raflarda yerini alması regl yoksulluğu ile mücadelenin olmazsa olmazıdır. Yine bununla bağlantı olarak okul, kampüs, hastane, devlet kurumları gibi kamusal alanlarda ücretsiz regl ürünlerinin bulunması hem regl yoksulluğu ile mücadelede etkili bir adımdır hem de bu ürünlerin görünür yerlerde bulunması regl hakkında konuşmak için bir fırsat oluşturabilir ve regl tabusunu azaltabilir.

Son öneri ise regl ürünlerinin üretim aşamalarının sıkı denetlenmesidir. İnsan sağlığına uygun koşullarda, hijyenik materyallerle üretilmiş ve yenilikçi regl ürünlerinin yaygınlaşması regl olanların regl dönemini fiziksel ve ruhsal iyi hali içinde geçirmeleri için önem taşır. Ayrıca üretilen ürünün ve üretim aşamasının sürdürülebilir ve sömürгüsüz olması da çevre ve gezegen için faydalı olacaktır.

Son olarak, regl politikaları geliştirirken regl olanlara alan açmak, sözü onlara bırakmak, regl alanında faaliyet gösteren sivil toplum kuruluşlarıyla istişare etmek

önemlidir. Regl tabusu ve regl yoksulluğu bireylerin sosyal yaşamalarını ve iyilik hallerini etkileyen sorunlardır. Bu çalışma regl meselesinin kesişimsel olarak ele alınmasına, kapsayıcı politikaların ve araştırmaların gerekliliğine dikkat çekmektedir.



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