



THAT TIME OF THE MONTH

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Abstract

A growing body of literature has emphasized the prominence of cultural beliefs, stigma, traditional practices and pain mitigation to women's experiences of menstruation. This research explored the experience of menstruation with a group of girls in Masiphumelele, adding to the conversation. In the recent years, schoolgirls' difficulties with menstrual management became well-known by the public. By 2012 the narrative of '7 million girls' emerged and was used as something of a tagline for interventions to distribute pads to schools around South Africa. Among this group of girls, the issues of access to sanitary pads became secondary to the large driving factors inhibiting the girls from attending school regularly. Problems such as period pain, mothering of siblings and abuse at home materialises as larger causes of absenteeism. The problems these young girls face have a negative impact on their education. Slow violence as a theme speaks to these large driving factors.

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‘That Time of The Month:’

An exploration of the connection between menstruation and school absenteeism

13 years ago The Rose Project¹, which is an initiative to distribute monthly supplies of sanitary pads to schoolgirls, was established. This project began long before the current concern around menstruation and schooling and has made an impact in a number of communities in Cape Town, South Africa. Below is a short story shared by the founder of the Project- these incidents led to the creation of the Rose Project.

One day Jane was driving down the Capricorn area² at around 10 o’clock in the morning. Along the way she saw two of her girls sitting on the side of the road. She rolled down her window and asked the girls, “hey, why aren’t you at school today?” and they said “no, we can’t go to school”, she asked “why?” and the girls replied, “we are bleeding” then Jane asked, “so what?”. The young girls explained to Jane that; when they bleed they have no sanitary pads, this accelerates anxieties about ‘leaking’ or messed dresses, thus making them too embarrassed to go to school. Baffled, Jane said she asked the girls if the young girls had toilet paper to use [as an alternative to store bought menstrual product] and they said no, with no toilet paper in the school toilets as well. Jane asked about toilet paper because she thought it would be for temporary relief, but the girls said they never have anything to use when they are bleeding, they stay at ‘home’.

The next day . . .

Around 10:30am, Jane was in Ocean View, another communities she works with. To her surprise, there were three girls on the side of the road. She stopped and asked the girls why they were there, and the young girls replied, ‘aunty³ is visiting’. Confused, Jane replied them and said; you do not have to stay at home because your aunt⁴ is here. The girls explain to Jane, they stay away- “otherwise they will bleed”. Jane could not believe she had encountered similar experiences in two consecutive days. After these encounters, Jane called to meet with a life skill educator, Emma, for help with the situation at hand. Emma helped make sense of the situation by explaining to Jane the context in which these young girls struggle due to lack of menstrual products. Emma explained that parents will not prioritize buying toilet paper⁵ for their homes when there is no food to begin with. Emma explained that women in the rural areas use rivers to wash their menstrual cloth, just like our grandmothers used to do. However, present day, in the informal settlements, there is no way an individual can use a tap to wash their menstrual cloth. Usually there is only one tap available for everyone to share and use.

-Jane⁶, Founder of the Rose Project

April 2018

¹ Pseudonym for the intervention that provides sanitary pads to schoolgirls, under The New Life Organisation.

² Reputedly the oldest informal settlement in the Western Cape

³ ‘aunty flow’ is a euphemism used when speaking about menstruation/ menstrual flow.

⁴ Jane did not know the young girls were referring to their menstrual flow.

⁵ Toilet paper is the assumed ‘cheap’ alternative to store bought menstrual products, hence its being used in the example here. It illustrates the assumed cheap alternative is not an option when there is no food.

⁶ I am using pseudonyms for participants, name of intervention and organization.

Chapter One: Introducing the Research: Menstruation and School Absenteeism

My interview with Emma, the life skills educator at New Life, highlighted particular narratives I had come across in the literature around menstruation. When I asked if there were any stories or experiences she would like to share, she offered up a short story that stuck with me. She shared an experience with one of the girl's reaction to the beginning of menarche.

“One of the girls was starting her periods, she didn't have pads, she stayed the whole week at home bathing consecutively. [her] Mother stayed at home too because she didn't know how to talk to her. The girl was crying because she didn't know what to do. She came [to New Life] and we explained to her how to use it [sanitary pads], since then she knows we will be there for her. That month she was devastated, and her schoolwork dropped. She was paranoid, always checking if she had messed her dress”.

These accounts bring Winkler and Roaf's (2014) argument to life when they say that menstruation is surrounded by shame, fear, embarrassment, stigma, taboo and silence (Winkler and Roaf, 2014). Linked to this taboo, many religious and cultural norms which are often grounded in patriarchal assumptions, avoid contact with menstruating women to either avoid 'becoming impure' or 'contamination' (Winkler & Roaf, 2014). In the same interview Emma shared, “culturally when you're on your period you're not allowed to be around men and not allowed to use milk, even the way you are dressed [you have to wear] long skirts or long dress”. One can use this same paradox within the context of school absenteeism, by virtue of 'avoiding contact' with menstruating girls, [patriarchal] society indirectly pushes for 'absenteeism'⁷ at school and beyond. I believe that the stigmas and taboos tied to menstruation perpetuate a slow violence on schoolgirls, which is not accounted for in society as a whole.

In the recent years, schoolgirls' difficulties with menstrual management became well-known by the public (Munroe, 2016). By 2012 the narrative of 7 million girls emerged when the Sanitary Dignity Campaign⁸ used it as something of a tagline for the intervention which distributes pads to schools around South Africa (Munroe, 2016). Since then there has been a growing awareness and mobilisation by civilians and governments to help young girls with sanitary pads in South Africa. Interested in this narrative of 7 million girls and the various conversations and debates around the issue of schoolgirls absenteeism, I entered the field with

⁷ Speaking to absenteeism beyond the schooling space.

⁸ An organization part of Monroe's research, in her thesis '7 million girls'.

the following research question in mind: “in what ways, does the provision of sanitary pads to young girls in need, impact their levels of school attendance?”

The assumption around the ‘7 million girls’ narrative suggests that young girls especially those living in impoverished communities and in child-headed homes, are disadvantaged during their mensural cycle. The argument is that young girls who cannot afford sanitary pads miss out on school. In attempts to fill the gap of school absenteeism for these young girls, The New Life organization created a project called the Rose Project which aid in the provision of sanitary pads for these young girls. During my time in the field, I found that there are a numerous factors that affect schooling and school attendance for these menstruating girls, however, issues of sanitary pads does not materialize in the manner it has been imagined to. Rather, my experience with and exposure to these girls and this project has highlighted that issues of access to sanitary pads, as serious as it is, is only secondary to the large driving factors inhibiting the girls from attending school regularly. Problems such as period pain, mothering of siblings and abuse at home materialises as being larger causes of absenteeism all factors which do not necessarily indicate fears of blood and bleeding through. The issue of school absenteeism and menstruation became an entry point to these ‘invisible’ issues. The problems these young girls face have a negative impact on their education as they need to spend time and carry the burden of being adults over and above trying to maintain grades and ‘be’ children. To express and make sense of the phenomena found throughout my fieldwork I will draw on the notion of Slow Violence (Nixon, 2011), as central theme that speaks to the majority of this thesis. While Nixon’s concept is primarily based on the impact of the environment, this concept can be used to change the way in which we perceive and respond to the experiences of school girls beyond absenteeism. In speaking to pain as a major theme, I hope to show how slow violence plays out if (and when) we choose to pay attention. I examine how violence infiltrates in the lives of the marginalised and how it has been ‘normalised’.

Theoretical Framing: Violence – slow & structural

There is a tendency in anthropology to avoid ‘othering’ and to pay particular attention to representation because of the discipline’s colonial history. The tendency to pay attention to representation is a measure to ensure we⁹ do not reproduce the injustices of our predecessors (Mafeje, 1998). In trying to avoid othering we are trained to write in a particular way and as a

⁹ Anthropologists.

result violence and suffering is often ignored or erased, especially in research. When I speak of violence here, I do not speak to the mainstream spectacularised violence such as war or genocide. Instead I ask us to look at violence as a lens to show the invisible, silenced and often unspectacular temporal aspects of particular violence's. According to Nixon slow violence is "violence that occurs gradually and out of sight, a violence of delayed destruction that is dispersed across time and space, an attritional violence¹⁰ that is typically not viewed as violence at all" (2011: 2). The notion of slow violence highlights the temporal aspect of these violence's. It is the temporal aspect of these violence's which render them invisible therefore unspectacular, uneventful and slow. In this case pain is a slow violence which renders the girls experiences invisible and in some cases temporal. Structural violence plays a significant role in the slow violence experienced.

Structural violence or 'structured risk' is a way of describing social arrangements that cause harm to populations and individuals (Farmer, 2001). These arrangements are deemed structural as they are embedded in the political and economic organisation of our social world. They are considered violent because they cause injury to people (Farmer, 2001). Sheper-Hughes & Bourgois (2004) argue that structural violence is the violence of hunger, social exclusion and humiliation which inevitably translates to intimate and domestic violence. Thus arguing that violence should not be solely understood in terms of physicality – assault, force or the infliction of pain but should include assaults on the dignity, personhood and value of the victim (Sheper-Hughes & Bourgois, 2004). Because violence defies easy categorization it "can be everything and nothing; legitimate or illegitimate; visible or invisible, necessary or useless; senseless and gratuitous or utterly rational and strategic" (Sheper-Hughes & Bourgois, 2004: 2).

Violence is not a natural subject for anthropology, Scheper-Hughes and Bourgois state that our disciplinary training predisposes us not to see the obvious forms of violence that consume the lives of our participants (Sheper-Hughes & Bourgois, 2004: 6). As a result we see anthropology's epistemological orientations and theoretical formulations of its profession naturally steered away from confronting structural violence and pathologies of power (Sheper-Hughes & Bourgois, 2004). By confronting structural and slow violence we are able to see the effects of these factors in the lives of the young girls I worked with. I realised that their pain is not accounted for by society during the vital periods of adolescence in which the very making of their being and understanding of the world becomes produced. Here illustrating as Scheper-

¹⁰ Attritional violence is a result of continuous pressure or harassment.

Huges argued, that violence itself holds the ability to reproduce and birth itself into the narratives and history of those often silenced. During their monthly experiences of menstruation these girls are faced with menstrual related pain, the burden of mothering their siblings which falls upon their shoulders, the abuse and neglect enacted on them (often by the partners of their mothers and/or step fathers). All these are forms of violence which have a direct effect on their well-being and essentially affect their ability to maintain optimal performance in school.

Munroe shows us in ‘7 million girls’ that the issue around school absenteeism and menstruation is greater than just one social problem but part of many and argues that these social problems both overlap and diverge (Munroe, 2016). Munroe acknowledges that a “plethora of understandings and beliefs in relation to menstruation, education, gender, rights, dignity are brought into conversation” (Munroe, 2016: 4). Henceforth bringing to the foreground an understanding that the 7 million girls narrative created a moral panic in South Africa for the mobilisation of, distribution and awareness around school absenteeism and menstruation. However, there are invisible aspects often over looked and it is with this in mind that I argue for slow violence as a central feature for looking at and understanding the lives of the young girls with whom I worked. I believe the responsibility of the anthropologists is to shed light on the lived realities in these often marginalised spaces. To have these uncomfortable conversations.

Research Methodology

The Knowledge Co-Op is a unit within the University of Cape Town that works to address development changes in communities. The New Life organisation has partnered with the Knowledge Co-Op before, and this is a continuation of their collaboration, full records of which are available in a formal MOU. Between June and September 2018 I conducted ethnographic fieldwork, working with New Life in Masiphumelele. The New Life moto is ‘Bringing Hope, Breaking Despair’, in which they reach people for Christ thus bringing hope and breaking the despair of poverty and disease. Their approach as a whole entails four ministries, these are compassionate healthcare, recovery and restoration, guidance to right living and economic empowerment. To be a member of the Rose Project¹¹, the girls need to be registered with the

¹¹ Under the ‘Healthcare’ ministry

New Life organisation as a whole, in this way New Life has all the information they need such as their address, parental details and age. Working alongside Living Word gave me a better understanding of the complexities the young girls face in relation to menstruation and some of their lived realities. I gathered many stories around the impact of the intervention and the lived realities through the young girls, and two staff members of the Rose Project, Cynthia and Emma. New Life provides a safe space for young children and teenagers in the community.

A total of twenty-one participants participated in my research. Seventeen of the participants were the young girls registered under the New Life organisation and essentially the Rose Project. Four of the participants were social workers who ran the programs and mentored the children. The young girls ranged from eleven to fourteen years old with a mix of both primary and secondary school levels of education. Zoe was my key informant among the girls she helped me organise focus groups and also aided in the process of interpretation.

Setting out to research the impact of the project presented me with the challenge of doing research with young girls who best articulate themselves in Xhosa and whose social positions differed to my own as a privileged, middle class, white presenting¹² UCT student from Zimbabwe. English is not their mother tongue, and many were not able to express themselves fully. The girls helped in navigating this problem through translating with their friends when they struggled to express themselves fully, an indicator that they were more comfortable expressing themselves in isiXhosa. I used my background and identity to connect to the girls and the social workers, because as much as I stem from a middle class background, I grew up in a ‘high density’¹³ area in Harare with my great grandmother. Although ‘white presenting’ I am comfortable navigating those spaces. My multicultural background played an important role in creating friendships with the girls and the social workers. My site was the Baptist church, in which I conducted all of my focus groups and interviews. On the first day of fieldwork, the social workers took me for a walk around a section of Masiphumelele, to help me to gain a sense of living conditions and a better understanding of the physical space as a whole. Masiphumelele is located on a wetland, thus the area experiences high risks of flooding during winter and the danger of fires in summer. The township has grown rapidly in the last 20 years with a diversity of residents from Malawi, Zimbabwe and Somalia. It has become overpopulated and this has led to even poorer living conditions in the community.

¹² I identify as multicultural

¹³ Zimbabwean version of township.

During my time there, I conducted participant observation at seven of their workshops, most of the workshops were in Xhosa. I had to make sense of what was going on and be a part of the collective. The first five workshops ran for two hours and the After-School teenage programs ran for an hour twice a week. The workshops included bible study, team work, puberty and hygiene talks. Moreover, during lunch and after the workshops I had opportunities to speak to the social workers as well as the school girls in more casual settings and would hear different stories about the community which helped in building relations and having a better understanding with the people I worked with. I conducted three focus groups with the girls and which focused around the topic of menstruation and their schooling. Each focus group lasted an hour. I also conducted paired interviews with the girls which focused on schooling performance and aspirations.

The life skills educators involved in the Rose project are women who live in Masiphumelele, each attracted to the project for the same reason, the need to help teenage girls because they did not have the opportunity to be helped. Cynthia, the social worker that heads the Rose Project, came to be my key participant with whom I developed a friendly relationship and spent a significant amount of time. After our initial formal interview our relation and engagement took the form of conversations more casual in nature. These happened while sitting out in the sun, while waiting for the teenagers to arrive and over tea in the office. I held another interview with a social worker that has worked with Living Word for over a decade, a well-known woman in the community, I say this because one day on my way back home, in the taxi from Masiphumelele, I would hear people speak of her.

Ethical Considerations

The principle of protecting participants from harm is central to any ethnographic endeavour and to the ethics codes of UCT and Anthropology of Southern Africa 2005. The code focuses on the treatment of participants, to see them “as subjects and not as objects of research or a means unto an end”, considering the context of their communities and their lives (Anthropology Southern Africa, 2005). With this said, because the nature of academia is extractive, it was imperative to take the participants with me from the beginning right to the end when thinking about reciprocity.

During my formal interviews with the two social workers Cynthia and Emma, I explained my research highlighting that it was confidential and voluntary and that their consent was ongoing.

I sent research notes and transcripts of their interviews and of the research notes taken during focus groups with the young girls. I have anonymised the names of the people and the organisation to protect the identities of the individuals. I had many opportunities to talk through ideas and hear stories from most of the social workers and some of their friends as a way to understand interpretations thus ensuring transparency and clarity.

Under the Children's Act (No. 38 of 2005) persons below the age of eighteen cannot legally consent. The caregivers have already consented to the girls participating in activities run by the organisation and this consent extended to cover my research and work. However, I acquired additional assent. At the beginning of the focus groups each girl signed a participant information assent form, which detailed the title of my project, my full name, address and cell number. It included the definition of research and explained what the research project was about briefly. I used youth centric means of offering assent to participation after the signing of the initial form through a small activity of cutting out hand shapes with the young girls. During the paired interviews, each girl signed an assent form again.

Looking back on the days I did my fieldwork, I remembered how long it took for the girls to be comfortable to have a conversation with me and later open up to me about themselves and their experiences. It took time and I made sure to make that time before I started doing my research. I made sure to participate in all their activities¹⁴ before I began research. I made sure to connect with the girls, boys and social workers during my time at New Life. I made sure to give of myself as much as I could, thus includes making it on time¹⁵, making time for activities outside of my research, making time for conversations and assisting in making lunch as well as eating together. Relational ethics requires the researcher to act from our minds and hearts thus allowing one to acknowledge our interpersonal bonds to others (Ellis, 2007). Ellis argues for a relational ethics which is related to the ethics of care and feminist ethics and considers recognising and valuing mutual respect, dignity and the connectedness between the researcher and the researched (Ellis, 2007). In considering the ethics of strangers talking with young girls about intimate bodily functions and as a researcher who longs to do ethical research that makes a difference, I constantly considered which secrets to keep and which truths worth telling (Ellis, 2007).

¹⁴ During the Holiday program.

¹⁵ Average travel time to Masipumlele from Rosebank was about 2hours.

Chapter Two

A Brief Overview of the Literature: Absenteeism & Menstrual Management.

The end of the apartheid system in South Africa signaled a turning point for the previously marginalized majority to finally reap dignifying benefits, of a democratic health system and country as a whole. However, the lack of basic human rights such as decent sanitation and adequate facility maintenance, creates a barrier for my ‘born free’ participants to reap even a portion of their basic human rights, as stipulated within the constitution of the Republic of South Africa. The apartheid system left marginalized people in spaces where they are always experiencing citizenship on paper, however the reality proves to be far more complex. In this case, these complexities include hygiene management difficulties schoolgirls face when dealing with menstruation. Studies have shown the connection between menstruation and school absenteeism (Mason et al 2013, Sommer 2010, Jewitt & Ryley 2014, Rheinländer et al, 2018, Boosey, Prestwich & Deave 2014, El-Gilany, Badawi & El-Fedawy 2005, Hennegan & Montgomery, 2016). The difficulties schoolgirls face are in relation to lack of disposal facilities, clean water, fear of leaking and discomfort make it difficult for girls to manage their hygiene in a school environment (Mason et al, 2013). Thus, ultimately leading to a drop-in school performance and attendance (Sommer, 2010). Additionally, many girls transition through puberty without the necessary guidance on puberty and menstrual management and as a result face many social distractions and peer antagonism (Sommer, 2010). As a result, menstruation, in very particular ways, has produced gender inequality through ability and access to education (Jewitt & Ryley, 2014). Therefore, menstruation becomes an indicator of difference from the normative and privileged male body (Johnston-Robledo & Chrisler, 2013). Beasley argues that it is through our understanding of power relations in both domestic and global settings in which the gendered character of contemporary societies is informed (Beasley, 2008).

Menstruation is a physiological matter that has been receiving sociological attention through social interactions and consequently issues of power, resistance and agency have been revealed (Fingerson, 2005). Menstruation carries prominent stigmas such as shameful, polluting, unclean or embarrassing which have negative impacts on women and their views on their body (Umeora & Egwuatu 2008, McMahon et al. 2011, Agyekum 2002, Sommer et al. 2015). As a result, women are often segregated from being in contact with food or attending religious activities (Padmanabhanunni, Jaffer & Steenkamp, 2017). Some cultural systems express

contentment and success when women menstruate as it symbolizes good health (Buckley & Gottlieb 1988, Laher et al. 2010), while others go to extremes to isolate women while they are menstruating. Johnston-Robledo & Chrisler (2013) argue that menstruation is a *social* stigma for many women and this stigma is an indication of women's lower social status. Through the constant self-monitoring of leaks and odors and the self-policing of behavior and emotions we can see how it is a source of oppression for women because of the shame attached to bleeding and challenges faced in public spaces such as school (Young 2005). In South Africa, traditional beliefs, cultural practices and taboos associated with menstruation have an impact on women's subjective experiences (Padmanabhanunni, Jaffer & Steenkamp, 2017). Padmanabhanunni et al 2017 study shows how negative characterizations of menstruation and implications for women's relationship with men because it is perceived as repulsive to men (Padmanabhanunni, Jaffer & Steenkamp, 2017). For the most part, we see how menstruation is associated with negative connotations from society. The taboo of menstruation has been internalized at home, school and even on a governmental level, this reflects on how women are secretive or ashamed of their bodies (WSSCC, 2013). This is seen through the risks of infection due to the long use of sanitary pads, odor, the continued difficulties to change in the school toilets and harassment from boys around school and the toilet area (Jewitt & Ryley, 2014).

Buckley and Gottlieb, however, argue against the assumption of menstruation being taboo (Buckley & Gottlieb, 1988). They believe that anthropologists have confused different customs and have labeled them all 'taboo', this includes the idea that menstruation is a social stigma that indicates women's lower social status (Buckley & Gottlieb, 1988). They argue that menstrual taboos are not universal and show how in some cultural systems, menstruation is an 'unmarked category' with no specific taboos (Buckley & Gottlieb, 1988). They argue for a deeper understanding of beliefs, symbols and values in relation to menstruation and note that they are complex and complicated. They, moreover, argue for the need to understand the cultural meanings of fertility and gender within different contexts (Buckley & Gottlieb, 1988).

Section Two in Chapter Two of the South African Schools Act 1996, states that:

“Every parent must cause every learner for whom he or she is responsible to attend a school from the first school day of the year in which such learner reaches the age of seven years until the last school day of the year in which such learner reaches the age of fifteen years or the ninth grade, whichever occurs first.”

Thus school attendance is applicable to law. Absence from school may lead to “investigate the circumstances of the learner’s absence from school; take appropriate measures to remedy the situation; and failing such a remedy, issue a written notice to the parent of the learner requiring compliance with subsection” (Gov.za, 1996). It is every young girls constitutional right to attend school and have access to education. The constraints tied to menstruation have become a barrier for girls, impacting girls’ schooling attendance and performance because of the male privileged body (Mason et al, 2013). However, the universality of menstrual-related absenteeism is unconfirmed, many studies have shown a connection between menstruation and absenteeism thus the need to explore it more (Bay, 2017). Recently, in South Africa the ‘7 million girls’ narrative opened up spaces for taboos to be challenged and for a gendered citizenship to emerge in public discourse through speaking about menstrual related school absenteeism (Munroe, 2016). Jewitt and Ryley (2014) show us the link between poor school-based sanitation and low attendance in schools through the large inequality¹⁶ gaps in primary education compared to secondary education enrollment. This is because many young girls start their menses in secondary school. The lived realities many girls face due to poor sanitation is often underestimated by the wider society. Jewitt and Ryley’s study confirm the findings of Mason et al (2013), in that poor hygiene in low- income countries affects girls’ self-esteem, school performance and attendance. Sommer (2010) implies that the schools in which the girls go to, provide the social context in which they face various menstrual related issues. The social context entails no access to clean water, disposal facilities. Therefore, the assumption that menstruation as a single factor affects school attendance and performance is not entirely true. In a South African context, where multiple cultural practices inform social relations, a girl has to worry about household chores, marital pressure when she comes of age or may encounter violence at home – all reasons which could contribute to females dropping out (Sommer, 2010). Thus, proving that multiple factors may results in school absenteeism and the ability for young girls to perform at school.

Thesis outline

Chapter 3 provides discussion on fear and shame and how it is overcome and managed with the help of the Rose Project.

Chapter 4 gives more in depth discussion into the lived experiences in relation to pain.

Chapter 5 concluding thoughts and suggestions.

¹⁶ Gender inequality.

Chapter Three

DEAR SAFE SPACE,

Through the mobilisation of civilians by a large number¹⁷, Munroe shows how many girls find support in other members of society such as teachers and in this case the social workers through New Life (Munroe, 2016). She illustrates how many people have dedicated time to support and invest in young girls through not only provision but guidance through puberty. This is particularly powerful because menstruation as a topic was rarely found in public discourse, especially in South Africa, until recently. The stigma affects girls and women's lives and forces them to navigate their worlds in very particular ways thus Munroe argues that citizens are gendered and that those gendered women have different needs (Munroe, 2016). Munroe shows the awareness of a gendered citizen through the various conversations¹⁸ prompted by the 7 million girls campaign. She argues that "if these needs are overlooked the results can be discrimination" (Munroe, 2016: 24). This discrimination stems from a biological function which is peculiar to sex and as a result deprives certain individuals of their basic rights to dignity, sanitation and education as stipulated in the constitution. The framing of menstrual management in relation to constitutional rights allows for powerful discourse to emerge, thus menstruation is no longer a private matter. It is through these powerful discourses in which the state has been obligated to engage with the issue as a way to demonstrate their roles as protectors of basic constitutional rights. However, I have witnessed civilians, NGOs, universities and other young girls making more of an impact in their communities compared to the [imagined] state's engagement, which is seemingly only evident in KwaZulu Natal but lacking in other provinces.

It was a Tuesday morning around 11am; I had been in the field for a week and by this time, I was very interested in speaking to Cynthia about her experiences running the Rose Project. While sitting on a table right next to her, we shared a cup of tea and talked. Cynthia used this opportunity to share why she got involved in the intervention;

The time we grew up in Eastern Cape we didn't have a chance to be open enough [to go] and ask for sanitary pads when we needed them. So, the only option we had was to use towels. We didn't have that opportunity.

¹⁷ The 7 million girls campaign/tagline.

¹⁸ News headlines and the states response to the 7 million girls narrative

This is why I got involved, I just think of the struggles I went through, now these kids have an opportunity.

As the conversation continued, Cynthia explained how they noticed girls were ‘open enough’¹⁹ to speak about menstruation, especially in front of the boys. They decided to divide the teenagers into separate groups when it was time to have puberty talks²⁰. I immediately thought that this would be counterproductive, because men and boys should be a part of the conversation so as to deconstruct the stigma around menstruation. However, the more I interacted with the space and the people I came to learn, this was their way of beginning the process of normalizing the conversation around menstruation, before including the boys. It became important for the girls to have, puberty talks through the Rose Project, in which they can share experiences and at the same time learn about menstruation and its process. The Rose Project also provides a time and place for young girls to learn about contraception, sex and pregnancy. The project leaders found it essential to have these talks because of the way the girls would approach them for help. Cynthia shared how many girls would come to the office and say, “it’s on the note”. Indicating that they prefer to write down their needs compared to verbalizing them. The notes or what I see as a ‘form of expression’, indicate that many girls do not have the language for what they are going through or that they are afraid to speak about menstruation. Additionally, the notes indicate a ‘code of respect’ especially to adults.

Another incident at the beginning of the year, where a parent phoned Emma to assist with her crying daughter because she saw blood on her underwear, left Cynthia and Emma concerned about the perceptions around menstruation among the youth. Many girls fear telling their mothers about their menses because they think their mother will think they are having sex (Scorgie et al, 2015). Thus, Cynthia emphasized on the project being more than distribution and provision, she kept referring back to the need to “teach and explain further”, their way of deconstructing stigma and naturalizing a natural process. Humans shape, make and reproduce space, thus space reflects social organisation. Through understanding the space we are able to better understand how shame and fear is managed. New Life is a social space with some control and order, in that programs are run at specific times at a specific place. It is a familiar space in that many of the social workers went through the same programs when they were teenagers. The shame the girls experience is overcome through talking with the young girls about how their body is changing and showing them that it is a natural biological process. Through this

¹⁹ An effect of the stigma around menstruation

²⁰ These talks began at the beginning of 2018

support the intervention is valued, not only for the provision of sanitary products but also for the role that sympathetic and discrete adults play in supporting and guiding young girls. This role, often invisible, is a critical feature in the project and its importance is recognized. It is also clear that the broader social environment is one in which, stigmas about menstruation remains hence the shame. Cynthia shared how “the feedback has been positive, girls have reported less anxiety about leaking and they are not ashamed to go to school while menstruating”. Their fear is managed through addressing the shame. The broader social environment in Masiphumelele encapsulates the language used, the social rules, discrimination and the ways in which girls and women have to navigate their worlds. Mawazda (2009), demonstrates that language is key to understanding how stigmas are constructed and perpetuated. Thus, Munroe (2016) argues that the stigma around menstruation is sustained by our language and approaches to menstruation. The particular behaviours the young girls at New Life projected, such as ‘writing a note’, show how Sophie Laws (1990) discussion on ‘social rules’ comes to life. These social rules regulate people who menstruate and are enforced by androcentric ‘menstrual etiquette’ thus forcing women to behave as if they do not menstruate (Law, 1990).

Chapter Four

RE: MANAGE YOUR PAIN

“The experience of living in a body and being a gendered body in a hierarchically organised gender-differentiated world must have an impact on the ways in which different forms of pain are experienced and expressed.”

- Gillian Bendelow 1993

In July, two weeks before the school holidays ended, I asked the girls to participate in a series of focus groups in which we would discuss their understandings and experiences around menstruation. Whilst we were figuring out the best time for us all to meet, many of the girls raised concerns about being able to make it due to their various responsibilities at home such as taking care of siblings and chores [I shall unpack more of this later in this chapter]. With this, we came to the decision to meet in the same venue that the holiday program was to be held in only, an hour before the actual program started.

We met over four focus groups within that week. Our first focus group started with trying to get comfortable enough to sit and speak through experiences. While sitting in a circle, I began by asking the girls a very generic question, “what does menstruation mean to you?”. There were three patterns of responses each focusing on either the sociological, physiological and scientific understandings around menstruation,

“getting older”, “bodily changes”, “becoming a young woman”, “can get pregnant any time”, “matured”, “feelings such as anger, attitude and mood swings”, “the releasing of eggs”, “uncomfortable”, “stay away from boys”.

Each response held within its utterance a different form of concern for the girls. The sociological responses show the concerns of what it means to society and to their place in society. The physiological responses were in relation to what it meant to their body, how their bodies are changing and how their emotions are moving. The scientific responses are linked to biological explanations such as “the releasing of eggs”. When I asked Cynthia what she thought the cultural attitudes around menstruation were, she responded by sharing what she could see is happening in the community recently. She shared:

“our community is changing, it is changing because of the different cultures that are around the community, these teenage girls are being exposed with so many things like drugs, programs that are trying to prevent teenage pregnancy and have been asked to do HIV testing so that they receive vouchers out of it.

They do the HIV testing without parents' consent, so this worries us. If the teenager goes and is tested positive how will that teenager go and react at home? But the teenager only went to get tested so that they can get a voucher. That's what's happening in the community!"

My question around the cultural attitudes around menstruation elicited a response to broader social relations in Masiphumelele. Teenage pregnancy is still a big issue in the community and Cynthia explained that, this is the reason there are so many organizations²¹ within the community that offer family planning. Through this short story I began to see how the *fear* during their first encounter with menstruation could be a result of the stigma around teenage pregnancy in the community and maybe for some being sexually active. Hence, the girls have been found to shy away from seeking help and speaking to mothers and motherly figures when they first start to bleed. Emma shared that the girls believe “menstruation equals pregnancy, but they don't know the whole information about how you get pregnant”.

Small facts speak large issues; the burdens of patriarchy

‘Invisible issues’ have been normalized by society at large and as a result are not viewed as a violence, instead it is seen as- the way of life. I say this because of the deep levels of poverty that surrounds us every day and it is because we see it daily that we *forget* that it is a violence in short, we become almost desensitized to the experience and reality of poverty and all it brings with it. In becoming desensitized we begin to give up both accountability and responsibility in that we no longer see it as an issue ‘we’ as the people of the country should rectify. Hence, we continue to ‘normalize’ it and in that way it becomes an ‘invisible’ issue. However, in this case I want to show how these invisible issues manifest in the form of *pain* in the lives of the young girls’ in the Rose project. Through my fieldnotes and the many stories shared, pain became a major theme I wanted to explore and show how the pain experienced by these girls is rendered unspectacular and invisible. Fiona Ross in her book ‘Raw Life, New Hope’ shows how “anthropology’s cultural relativist approach recognizes that humans are meaning making creatures and anticipates that human behavior makes sense, even if the sense that a given set of people make, the forms of their behavior and explanations they offer for these, are not universally the same or accepted” (Ross, 2010: 9). It is through the girl’s experiences in relation to pain, which we are able to make sense of a given set of experiences.

²¹ In the community that offer services such as HIV testing, family planning etc.

The article 'Pain perceptions, emotion and gender', shows us how the definition of pain needed to be broadened at the time. Bendelow (1993) argued for the need to take into account, social expectations of the ability to cope in experiences and perceptions of pain. Pain can be defined as a noun and a verb. As a noun it is defined as "physical suffering or distress, mental or emotional suffering or torment" (Dictionary.com). As a verb it is used with an object for example "to cause physical pain, to hurt, to cause emotional distress" (Dictionary.com). Bendelow's research shows how the capacities of women in coping with pain are tied to reproductive and biological functioning yet underpinned by cultural expectations of roles and socialization. He offers an approach to understand pain through understanding relationships between pain, culture and embodiment. One that helps explain the pain the young girls experience in Masiphumelele. Meanings and definitions of pain are not solely tied to physical sensation but also include feelings, emotions and spiritual notions. However, emotional pain is not considered real pain from a patriarchal perspective. In other words, the different ways of experiencing, understanding and expressing pain are tied to gender-differentiated socialization processes, despite the natural assumptions made about women (Bendelow, 1993). The gendered assumptions in the expectations of being able to cope leads to inflicting and ignoring pain and this case is seen through the naturalization of the burdens and labor put onto the girl child. Furthermore, these assumptions of the naturalness of coping with pain are tied to social divisions by gender, and the key features of this division are the female biology which incorporates menstruation, reproduction and the rearing of children (Bendelow, 1993).

The concept of hegemonic masculinity allows us to see both the normative forms that masculinity takes and also the diversity at its edges (Morell et al, 2013). Through the notion of hegemonic masculinity we are able to see the persistence of patriarchal trends (Morell et al, 2013). The persistence of patriarchal trends are what I believe perpetuate the pain these young girls experience. For example, patriarchy normalises gendered labour and expects women from a young age to be care givers. Through slow violence as a lens we are able to unpack the invisible issues with structural violence in this case influencing the ways in which slow violence is experienced. Structural violence gives us an understanding of the political and economic organization of our social world. Through confronting structural and slow violence, we are able to better understand the realities and needs of the young girls. The pain unpacked in this chapter is what I believe has an impact on the education of the girl and overall well-being.

Pain can be a verb and a noun

The stigma against menstruation prohibits young girls the menstrual education needed before their first menses occurs (Motgomery et al. 2016, Boosey et al. 2014, Hennegan et al. 2016). Language in relation to bodily fluids are difficult to openly speak about in society, it is interpreted as disrespectful and commonly associated with being rude. Consequently, a young woman cannot imagine speaking of a private part or blood to *any* adult. Blood is associated with impurity (Bhartiya, 2013) and can lead to the policing of women's bodies due to cultural beliefs and practices. When the opportunity to help the girls comes along, Cynthia reinforces and reminds them, "it's not bad to go on your period". Similar to this Emma explained her experience with the girls when their first menses occurs, she said "when it is their first time, they ask one of their friends to come with them or they ask their friends to ask on behalf of them and when I talk with the girl I say- this is not a *sin*, you did nothing *wrong*". This experience took me back to my first menstruation. I was twelve years old at home, sometime in the afternoon. I had just finished using the toilet and as I looked down to dress myself, I saw a reddish-brown stain on my underwear. I ran to our helper at the time and she told me I had to let my mother know and that she would help me, I shouldn't worry. My mother was not the first person I sought refuge in when I saw blood and did not understand what was happening to my body.

In the article 'Menstruation, Religion and Society', Bhartiya recognizes that all religions of the world have established constraints on women because of menstruation (Bhartiya, 2013). In the context of Christianity, the main menstrual stigma faced is believed to be the constraining of women from positions of power (Bhartiya, 2013). The various versions of Christianity differ in their beliefs however, they are all similar in that they police and control the woman's body and have negative connotations around menstrual blood such as 'unclean' and 'cannot have contact with men' as we found with my participants (Bhartiya, 2013). The main reason the girls were found to struggle to communicate to their mothers, lies in the belief that their parents will think they are sexually active. In turn this explains the reasoning for the use of words such as 'sin' by the social workers. Through Christian values and morals, the girls are taught through this church-based organization to not have sex before marriage.

In addition to this Cynthia shared an incident similar to a story I have already mentioned in relation to the beginning of menarche. She revealed:

“this year we had an incident where a parent phoned Emma in the office and asked Emma if she can talk to the girl, the girl was crying because she saw blood. We sat together and explained, if you see blood it does not mean that you are not a virgin anymore, it does not mean that you have slept with someone”.

The aforementioned incident illustrates that there is need for pre – menarche education for better understanding of the process when it arrives. Emma shared how, “some of the parents don’t know how to explain to them when they start their period”. This becomes then not only a momentary issue but one that becomes deep rooted because when these women grow up, having had no support during this ‘time of the month’ they may also not know how to support and aid their own daughters. Failure to help their children allowed the social workers to intervene. Cynthia explained “that’s when we started to see- it’s time for us to talk about it because we see that they cry, and they think that if they tell their parents they will think their girl has slept with a boy”.

Losing one’s virginity is a topic that came up in multiple ways. The emphasis on this topic stems from the church-based teaching, ‘no sex before marriage’. The girls fear judgement of being seen to be sexually active (even if this is not the case). The inability to explain the bleeding or ask for help triggers most girls to cry and stay away. Thus, it remains difficult to communicate when one begins menarche. The notions of impurity stem from the idea of losing your virginity and the biblical implications behind the act, from the young girls’ perspective. There is reference to the social workers affirming the young girls that it is “not a *sin* and it is not *bad*, doesn’t mean you are not a virgin” indicating the lack of understanding of what the process means. Despite STI and sex education it appears the young women are still afraid to be open in the initial stage. In the context of Masi, there was mention of ‘staying away from boys’, certain ways of dressing and women should not eat eggs and drink milk whilst menstruating. Emma shared, “culturally when you’re on your period you’re not allowed to be around men and not allowed to eat *eggs, milk*. Even the way you are wearing – long skirts or long dress”. These menstrual taboos are associated with Xhosa cultural traditions including the social relations in Masiphumelele.

After the girls experience their first menses the social workers find it easier to educate the girls. Cynthia shared, “It is improving, and it really helps the girls to be open, open in terms of asking them; “why do you feel shy to ask your parents about pads? Why are you not comfortable about talking about your periods with your parents?”. The responses are usually “my mum is very strict” or “my dad will say I have slept with a boyfriend”. Hence the fear of speaking out and

asking for help, they fear that it will be interpreted as loss of virginity or the parent is hard to communicate with and they are strict. This is shown when Emma shared;

“In our culture it’s not something you can be open and talk about. Our parents don’t want the kids to talk about menstruation, sex or boyfriends. It’s our culture that you have to be respectful of old people so that why when they face challenges they just cry because they don’t know”.

Cynthia stated that the girls have communicated their interpretation of menses, “If I’m on period it means that I’ve slept with boyfriend” that’s the attitude that they have”. This belief system has given the young women the assumption that their parents will say the same thing. Cynthia reinforced;

“it is uncomfortable for us culture-wise to just talk about menstruation, especially some of the teenage girls that aren’t staying with their parents’. Those that stay with their aunts or step – mother, it’s not easy for you to be open to stay with a grandma, 77 or 80 how can I talk about menstruation to the old lady. So those are the challenges when you talk with them in the group – those are the cultural barriers”.

This fear in the start of menarche is linked to how the girls experience menstrual related pain. When I asked the girls how they feel when they are on their period, they shared; “back pain, period pains [cramps], sensitive breast, think you’re going to die, cannot play, frustrated and angry”. During the last focus groups, the girls shared the good things they feel about menstruation, which is “healthy and becoming mature”. A very short list now when I look back. On the other hand, the bad things were, “painful, lonely, smells [when you don’t wash], don’t like the way blood comes out of the vagina”, indicating menses is more of a bad thing than a good thing. I went on to probe about pain and they elaborated that sometimes they vomit and can’t walk because of the back pain and cramps. When at school they are allowed to go to sick bay when they are in too much pain, schoolteachers have helped with pain mitigation where possible.

Through my conversations in Masiphumelele and reading the literature around menstruation and school absenteeism, it is clear the discourse of menstruation overrides notions of pain. Modern societies are unable to deal with female pain. In a conversation with my supervisor Fiona Ross, she mentioned how this may be a result due to the assumption that, “because we are naturally equipped to give birth and childbirth is painful, somehow women can suck it up” (Fiona Ross, personal communication). This is demonstrated in very real cases. In the paired

interviews I had with the girls, one of them shared, during her monthly menses what affects her the most is when she vomits and would rather stay at home and manage it than go to school. The girls also shared that they take pain killers such as Panado. The responses show how the girls would rather manage menstrual-related pain at home thus an invisible issue as this is tied to the stigma around menstruation which has in some cases lead to school absenteeism. Black woman's pain is particularly unrecognized in discourse around the world. The girls in the Rose project are telling us here that pain is a major factor, but it is often an invisible issue which has effects on the young girls' lives. The following sections will look at the young girls' pain through the mothering of their siblings, household chores, abuse and neglect.

Mothering of siblings and chores

When looking at the daily lives of the young girls and understanding their responsibilities we are able to have a better view of factors in which impact their schooling and well-being. During this vital period of adolescence in which the very making of their being and understanding of the world is produced, the young girls are burdened with adulting instead of just being. These burdens are a violence on personhood. How I came across this violence in my data was when I asked the girls if there are any other factors other than period pain that affect their schoolwork. Their responses were, abuse at home, being mistreated by family, no food at home, mistreatment from boys and some reports of bullying at school. Through these responses it is evident that the physical and emotional labor is put onto the girl child.

Majority of the girls shared how their mothers had to leave early in the morning to make it to work in time and get back late because of the difficulties traveling to and from work and this is why all the responsibility is put on them. Only one girl shared how her mother is understanding and very supportive. However, I understood the hustle to travel from Masiphumelele to town or anywhere for that matter. From Rosebank, Southern Suburbs it would take me two hours to travel to Masi and another two hours to travel back home. A total of four hours which entailed a train ride, taxi rides and short walks from each of the stops. Many factors contribute to commuting as a long and tiring experience. The trains are often delayed or do not make it at all. By the end of my fieldwork I remember how fatigued I felt from the constant travelling- which was only thrice a week. I cannot imagine how some parents travel to work every day. I understood why some parents couldn't be there to raise their children because they are trying to make money for food. It is through this that I began to understand

and see that, “their poverty renders them extremely vulnerable to even small negative changes in their social and financial circumstances” (Ross, 2010, 7). Through *Raw Life*, New Hope, Ross (2010) shows how;

“Poverty is increasingly being understood as more than just living below a minimum income level. Recent work documents a range of factors influencing poverty. Incomes are just one of them. Others include one’s social networks and the ways that one may be able to activate these to access resources, including money, food, care and access to institutions (May 2000); one’s ‘capabilities’ and capacities to mobilise these; and one’s inclusion or exclusion from systems of power” (Ross, 2010: 107).

Ross’s explanation of poverty in the Park is similar to that of in Masiphumelele. The struggle of having to support a family is a result of poverty and the inability to access resources to better their living standards.

The young girls mothering their siblings was no secret to the social workers. Cynthia shared, “some of them have to look after the babies / their siblings, whilst they have to still do schoolwork, washing and everything at home and the parent doesn’t want them to do other things” all these factors have been major contributors which affect their ability to perform optimally at school. Similar to Cynthia, Emma shared in an interview;

“[The girls are burdened with the] Responsibility of looking after their siblings, having to go the preschool to pick them up and to look after them while their parents come [home] very late. They have lots of things to do, [these responsibilities entail] their homework, washing up their uniform and then have to look after their siblings. It’s a lot of pressure and work. [imagine an] 11-year-old changing nappy of the child – the child will be so tired. In the morning they have [the responsibility] to take the child to the preschool. [At least] At school they are cooking for them now²²”.

It was not surprising that the young girls in their program are burdened with all these responsibilities. It is considered normal for a girl child to take on these responsibilities. Cynthia shared;

“Some of them [the girls] have to look after the babies, whilst they have to still do schoolwork, washing and everything at home and the parent doesn’t want them to do other things [play]. The abuse that is happening at home [from fathers/ stepfathers/ mothers’ partners], I

²² The school is providing students with meals now, which brings some relief.

remember we decided to talk about fathers that are not present in one of our meetings with the teenagers”.

This indicated [the normalized] gendered responsibility of the girl child and speaks to patriarchy which expects girls from a young age to be care givers. It also indicates how young girls are burdened with adulting and there is distress because there is no time to do schoolwork or one is too tired. This is the pain my participants experience every day which has a physical and an emotional impact.

Abuse at home and neglect enacted on them.

Household forms regarded as ‘vulnerable’ in South Africa, are child-headed households and single-parent households (Hall & Ritcher, 2018). In a comparison of household types in South Africa over the last twenty four years, most single-adult households entail children living with their biological mother (Hall & Ritcher, 2018). Additionally, most child headed homes in South Africa are a result of family strategies such as the need to maintain the home while adults leave for work and these dynamics are not easily captured. My research presented me with evidence of these dynamics that are not easily captured.

Fatherhood stood out in the conversations I had with the girls and the social workers. The absence of, presence of stepfathers or mothers’ partners. By mothering their siblings most girls maintain the home through chores, cleaning and taking care of siblings, whilst their mothers work, which reflects a child headed home and neglect. By understanding how apartheid left South Africa with an unusual pattern of family structure we can see how fathers have little to no role in the upbringing of their children (Morrell et al, 2013).

Cynthia shared an experience with the girls during one of their meetings;

“I remember we decided to talk about fathers that are not present, we were not aware that most of the girls have grown up with their step- fathers and we were trying to find out why they don’t like their stepfathers. We have seen that most of the teenage girls don’t know their [biological] fathers. Some of them wish they knew their father and some of them don’t wish they know their fathers. That’s when we see that these kids are dealing with different challenges at home, but we were not aware.”.

Some of the girls do not know who their biological father is or have any sort of relationship with him. She went on to explain that the girls reported “my stepfather would touch me

inappropriately, would not give me money but will give his children money”. The stepfathers have little respect and do not have the same care for their partners child as of theirs. As a result, the young girls feel like their mother is not protecting them and thus, feel neglected. This has an impact on the girl’s relationship, some girls reported “my mother does not pay attention to me; my mum is focusing on my step- father now and everything at home is about my stepfathers’ daughters”.

Cynthia’s response to these experiences of family were in line with Christian values. Cynthia said she explains to the young women that “there is a need for a mother in the family and there is a need for a father in the family. This is important as it makes families feel like their disadvantaged because the father was not there”. She went on to add;

“The talk was very painful for them they thought that growing up without a father was normal and we had to tell them it’s not, we tell them the reason why you are here is because of your mother and father. If your father is not present, how about the future? When you reach your stage of marriage you won’t feel like having a husband, because you are used to being raised by a single parent. You start to think I can leave this husband and raise my kids alone”.

We can see that the way she understands things is based on the power and security of the nuclear family which is tied to patriarchy. For Cynthia, her biggest loss in this case is seeing that most girls in this case do not have a nuclear family and support system thus possibly affecting their future. What this mode of thinking misses- is that the tragedy of fathers not being there should not be a determining factor in what shapes the difference of a good life and a bad life for a woman. It is through marriage values in which gendered roles are naturalized – what a mother is supposed to be, what a father is supposed to be. And yet the reality is that the roles of the child are blurred in that they are both child and adult [through responsibility].

The blur is where the violence occurs because it is invisible in that it happens at home- out of sight and these dynamics are not captured. The girls feel tired and cannot do anything about it but wish to leave for university after high school to help make life at home better for everyone at home. It is unspectacular in that the social workers know some of the abuse, neglect and responsibility that is put onto the young girls but because it is somewhat normalized because of the gendered assumptions mentioned earlier. Their monthly menstrual pain is managed in silence and at home when it becomes unbearable rendering it an invisible issue. These are the realities the young girls face, and the social workers know. Hall and Ritcher show how children in child-headed households are vulnerable in multiple ways. They tend to struggle to achieve

academic success, vulnerable to violence, exploitation and abuse, and experience high levels of anxiety and stress (Hall & Ritzer, 2018). Through pain as a theme I have illustrated that my participants may struggle to achieve academic success, are vulnerable to violence and abuse and experience high levels of worry.

Chapter Five

PRODUCT OF STRUCTURAL OBSTACLES

Through exploring the experience of menstruation with a group of girls in Masiphumelele I began to understand that the issue of menstruation is one that may be considered a result of slow and structural violence. This slow violence which undoubtedly resulted from both the country and community's history began to materialize in the form of issues around menstruation and school attendance. In the recent years, schoolgirls' difficulties with menstrual management became well-known by the public. By 2012 the narrative of '7 million girls' emerged and was used as something of a tagline for interventions to distribute pads to schools around South Africa in aims to positively impact their ability to perform optimally within school. Among the group of girls, I worked with, issues of access to sanitary pads became secondary to the large driving factors inhibiting the girls from attending school regularly. Problems such as period pain, mothering of siblings and abuse at home materialises as larger causes for their absenteeism. The problems these young girls face have a negative impact on their education. Thus, slow violence as a whole becomes a topic worthy of further exploration, this in the hopes to adequately navigate the complex space and topic of menstruation among the young girls of Masiphumelele.

Based on the above discussion, it becomes clear that what should be explored, around the topic of menstruation, is more than just that of what a pad can cover. Issues of access to sanitary pads should be considered only secondary to the larger forces inhibiting the girl's ability to attend school regularly. Through my own experience with the girls from Masiphumelele, it became clear that issues such as pain, abuse, mothering of siblings and other larger structural causes all play into the larger narrative of absenteeism. The circumstances in which these girls find themselves not only negatively impact their education and schooling as a whole but also play into what they think of themselves and womanhood. The shame of menstruating creates an internal battle that lead to a shying away for the girls which meant they were less likely to seek help and share experience. This meant that overall, they began within themselves to consider this sign of 'womanhood' as being that of a call from Satan himself. The New Life program offered a space in which to begin to change the narrative of 'sin' and turn this experience into one that should be fully embraced as being a natural process. Taking this further there is a need for programs and spaces of exploration that allow for more than just a narrative of '7 million girls' in this, allowing for a deeper understanding of the issues at hand. What is

called for is a relation that does more than just share pad from hand to hand, and rather shares experience and relation in a manner that allows for a calling out of the bigger issues at hand. This may then begin to allow for an adaption of expectation within and for the realities of these girls not only at school but within their daily lives.

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