



# A Media Advocacy Toolkit for Reportage and Discussions on Menstruation



PERIODS AND PAPERAKAARS

BONDH





## Acknowledgements

We hereby extend:

A special Mention to Pratyusha Varanasi, Subhiksha Manoj, Bharti Kannan from Boondh. Thanks to Sonal Jain from Boondh for outreach efforts. A special acknowledgement and credit to Smruthi Bala Kannan and Danielle Kaser, MH Hub for their mentoring and critical inputs.

This toolkit has been designed on the backbone of survey responses from three stakeholder groups: Journalists, Persons working in Menstrual Health Management/Menstrual Health and Hygiene (MHM and MHH) and individuals from marginalised groups including: People with Disabilities (PWD), Trans and non-binary persons, Survivors of/those living with experiences of Menstrual Discomforts, Conditions and Disorders, Persons from Dalit Bahujan communities - all of whose time, patience and participation we are grateful for.

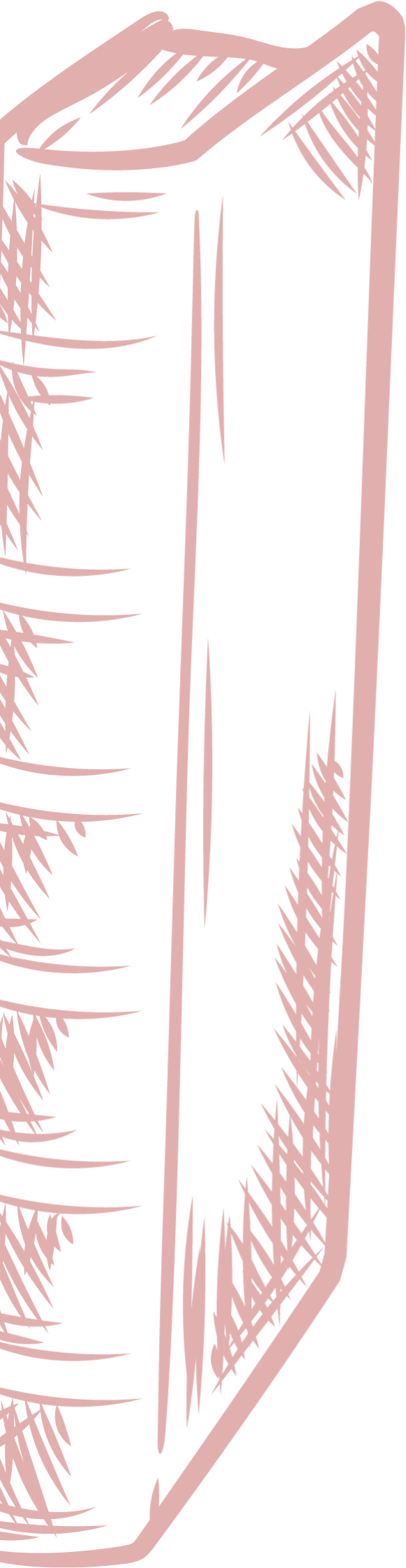
We are grateful in particular to Virali Modi, Kiruba Munusamy, Rituparna Chatterjee, Durga Gawde and Sharmila Joshi for taking time out to engage with us on and off social media.

We thank the team at Empower Design for their work on creating the representational charts. This toolkit was designed by Subhiksha Manoj, Team Boondh.

## Outreach, Support and Sponsorship

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# Who is this toolkit for?

This toolkit is to enable constructive, nuanced, oft untouched issues and sensitive reporting and discussions on menstruation in India. Though the toolkit was primordially designed for media stakeholders (hence the name: Periods and Patraakaars, Patraakaars translates to journalists in Hindi) as a quick reference to report on menstruation, the themes that evolved in the process of developing this toolkit is relevant to all stakeholders mentioned below:

## Media Stakeholders

Film and documentary makers, social media influencers and vloggers, journalists and editors in print and digital mass media.

## SRHR, MHH and WASH Stakeholders

Interventionists in the space of Sexual and Reproductive Rights; Menstrual Health and Hygiene; Water, Sanitation and Hygiene including Monitoring and Evaluation teams that build research and write reports on programs/issues related to menstruation. This extends to human and gender rights defenders, in conflicts and humanitarian situations among others.

## Government Stakeholders

Government agencies responsible for and taking initiative on menstrual health access including Ministry of Drinking Water and Sanitation, Ministry of Women and Child Development, Ministry of Human Resource Development, Prison Welfare, etc across different levels of operation.

## Caregivers of menstruators

Caregivers including ones who do not menstruate, women, trans, disabled and other marginalized menstruators ; parents, teachers, doctors and other members of the medical fraternity.

The toolkit is an open source resource material and we encourage stakeholders to reach out to us for suggestions on bettering the toolkit. **Appropriate credit should be given to the toolkit while referencing or using our content- A Media Advocacy Toolkit for Reportage and Discussions on Menstruation by Boondh, April 2021.** The access point to the toolkit must be hyperlinked/ specifically stated.\*

# Introduction

India still treats menstruation as an open secret, weighed down by taboo, shame and misinformation; the media - popular and news - plays a critical role in challenging this perspective or at least, not worsening the existing status quo.

This toolkit has been designed primarily for those employed in news media in India and is applicable globally as well. It will provide insights, principles, analysis into the existing reportage of menstruation and advise on how media persons can do a more responsible job of the same. It also empowers consumers to hold the media more accountable and consume news surrounding menstruation more responsibly.

The objective here is to sensitize any reader about the weight of reporting and consuming coverage on this sensitive subject in an ethical, careful manner.

## Disclaimer:

This toolkit has been designed (apart from stakeholder survey responses) based on coverage related to menstruation by 6 digital media outlets: The Times of India, Firstpost, The Quint, The Print, Huffpost and The Scroll - from Jan 2018 - June 2020.

Apart from this, we have also been critical of certain articles that are not published by the above mentioned outlets but were shared with us by our survey respondents and other experts in the field of menstrual health and hygiene. The versions of the pieces cited are as on 25th August, 2020.

The goal of these citations is only to drive a point home, not defame, charge or accuse the publisher and Boondh advises that readers bear this in mind when engaging with this document.

## Trigger Warning:

Please note that in the pages to come, this document has descriptions of blood, shame and insensitive/discriminatory practices related to menstruation. Please exercise discretion in engaging with this toolkit if these subjects are triggering for you.

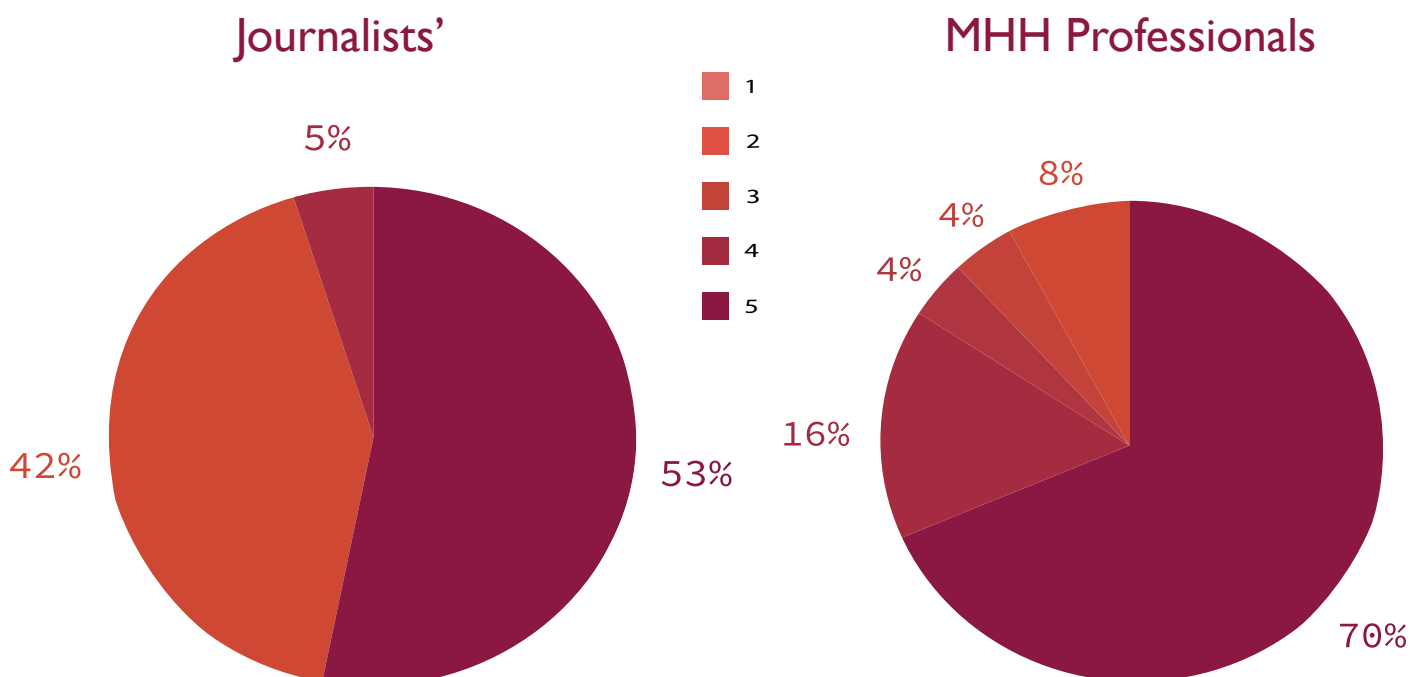
## Why this toolkit matters?

Approximately half the world experiences menstruation. And yet, we're schooled, generation after generation, to be discreet about it. And silence isn't the only challenge we face. Misinformation is aplenty, and so is superstition and pseudo-science. This is further complicated by the fact that menstruators are denied equal participation in their own homes and public spaces like the workplace. The silence surrounding menstruation has not only led to a menstruator choosing between a day's wage and period leave. But it has also consistently dismissed period pain which according to Dr. John Guillebaud, a professor of reproductive health at University College London, "almost as bad as having a heart attack".

Is the media's reportage on menstruation highlighting these issues with nuance, sensitivity, political thought, inclusivity and based on evidence?

The 3 key stakeholders that we surveyed as part of this project - Journalists, People from Marginalised communities and Menstrual Health and Hygiene professionals, unanimously place high importance on discussing this subject (See charts below).

When asked to rank (1 being not important and 5 being very important) the importance of responsible coverage of menstruation in the media, there was a resounding consensus in agreement of the need for such coverage.



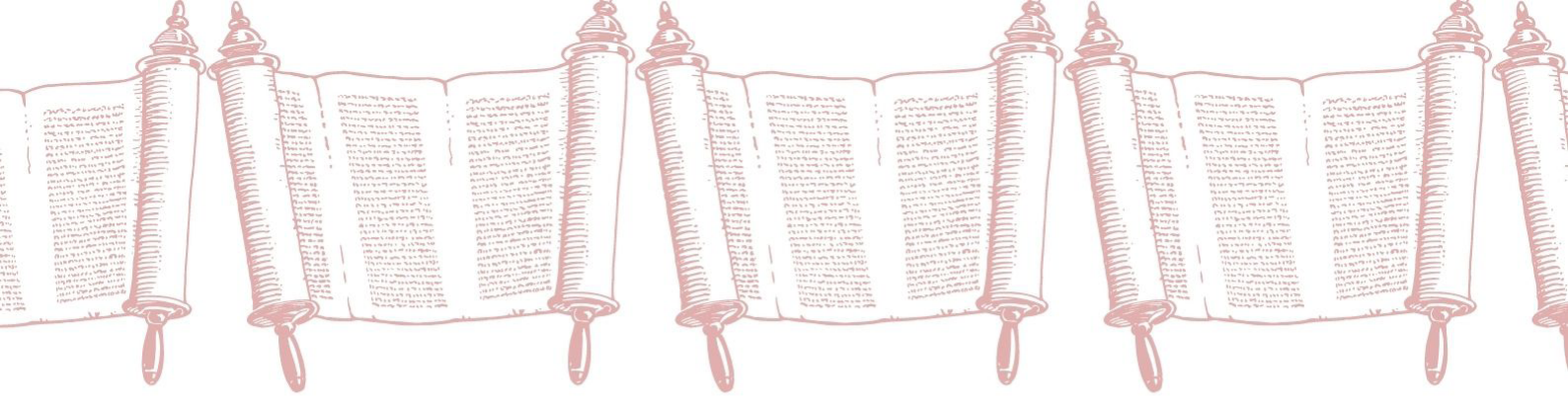
In addition to the above mentioned surveys, 263 articles written by 6 publications between Jan 2018 and June 2020, were also studied and assessed for the purpose of this toolkit and when distributed on a per month basis, it brings us to a disappointing 1.3 articles per month, per publication.

In one of our survey responses, a trans masculine gender non- binary person emphasised on the consequences the lack of conversation on menstruation can have on their life - “It (lack of reportage) makes it harder for us non-cisgender menstruators to get appropriate health care, health consideration, and affirming products”

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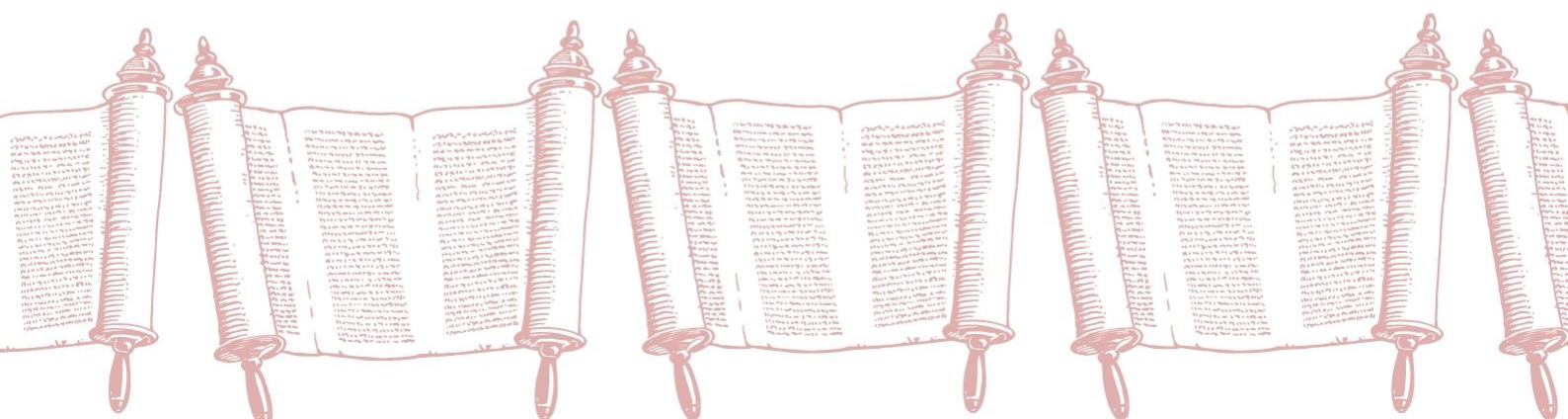
The digital media landscape is far from neutral, and heavily saturated with fake/sensational news, it is critical that a guideline be established for responsible use of language and perspective when covering sensitive beats. A piece of news should spark conversations that help the efforts being made to destigmatize the matter and critique the perpetration of taboos.

The toolkit is an open source document and we encourage diverse stakeholders to refer to/ utilize the same however they may deem fit. Boondh endeavours to conduct orientations/ sessions with media stakeholders or other civil society organizations looking to advocate for better reportage.



# A Checklist for Reportage and Discussions on Menstruation

**The following is a basic checklist to ensure responsible reportage on menstruation and serves only as a quick reference tool. This is to be read in conjunction with the myriad layers elucidated in the recommendations further on in the document.**





# Checklist for Inclusive and Sensitive Reportage on Menstruation

## Credibility : Ensure that -

- 1. Inputs and quotes in the write up are gathered from professionals like researchers, academicians and doctors.
- 2. Data mentioned in the write up is sourced back to the original record/ document hyperlinked, report/ record is named and dated.

## Inclusivity : Ensure that -

- 1. Menstruating person/menstruator/people who menstruate, women/girls, trans, womxn instead of just women/girl. Not all people who menstruate are women and not all women menstruate.
- 2. Negative phrases like 'suffers from' when referring to people living with experiences of Menstrual Discomforts, Conditions and Disorder are replaced with phrases like 'lives with/'survivor of'. Impetus to be on possible transformations than suffering.
- 3. If the story can hold space for LGBTQIA+, DBA and PwD experiences, that they have been represented .

## Subject/Person Centric Approach: Ensure that -

- 1. The story does not allow the product or technological solution (unless it is a story about a product) to take over the subject/ person /representative stakeholder of the story.

## Reproductive labour: Ensure that -

- 1. Recognize, acknowledge and critique narratives that reinforce menstruation as a biological function only. Menstruation is recognized as sixth vital sign of health. It is a tool/compass not only for reproduction but also for sleep cycles, dietary requirements, emotional, physical and mental well being. Expatiate the discourse to the labor a person expends before/while menstruating where they have limited/no choice every cycle. Give impetus to how menstrual labor (life cycle, menarche to menopause) along with pregnancy, child birth, caregiving and domestic labour are all unaccounted productive labor.
- 2. Explore the capitalist definition of productivity and its implications on menstruating bodies/communities (eg. menstrual leave being a matter of debate).



## Critical Lens: Ensure that -

- 1. The headline/content is informative and not clickbaity or sensational, and subverts/problematises the same.
- 2. Trending stories on menstruation are presented from an analytical/critical perspective.
- 3. The subject matter of the write up allows for linkages to existing government schemes and policies and they have been met.
- 4. In case the story has potential for follow ups, this is kept in mind and released as a series of articles that can show progress or paint a nuanced and long term picture of the topic.
- 5. The piece problematises and moves away from hallowed narratives that pit one solution or technology against the other, and rather encourages discourse on features and considerations of multiple solutions and focuses on informed choice.

## Intersectionality: Ensure to -

- 1. Place importance on the lived experiences of the concerned stakeholders.
- 2. Emphasise on consent, agency and informed choice in every detail of questioning/reportage/enquiry .
- 3. Challenge Medical/Expert Gaslighting that invisibilizes/invalidates menstruator experiences.
- 4. Refrain from describing menstruating bodies as ones with medical problems, rather focus on the effects a disorder/disease may have on the holistic health of the menstruator. Show refrain reporting singular or complex treatments/solutions with panacea effects. Recognize hormonal health related menstrual disorders often also benefit from multiple schools of thought, beyond biomedical allopathic approaches, but also indigenous ayurvedic and traditional medicinal ways.
- 5. Move beyond reporting menstruation as just a “women’s issue”. Menstruation is a human rights, health rights, gender rights and environmental justice issue.
- 6. Committing to diversifying the workforce by employing marginalised menstruating or non menstruating Women, Queer and Transgender person, Dalit Bahjun Adivasi folx.

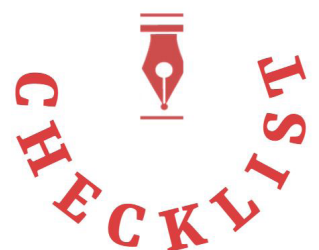


## Intersectionality: Ensure that -

- 7. Attempt to build solidarity rather than sympathy through holistic stories.
- 8. Tie in and build narratives from the perspective of human rights and constitutional validity.
- 9. Mindful contextual exploration especially while showcasing stigma, taboo, intergenerational responses/coping.
- 10. Refrain from judgemental/moralizing reportage on practices followed surrounding menstruation.
- 11. Represent cis-het non-menstruating men's roles in destigmatizing menstruation those of as allies and not saviours.
- 12. Include Dalit Bahujan and Adivasi menstrual experiences in tangent with class and caste realities.

## Research and venture into stories that talk about:

- 1. The menstrual experiences of LGBTQIA+ community.
- 2. Disabled persons who menstruate.
- 3. Rural and other marginalized community representations.
- 4. Disaster zones/ humanitarian set ups and complexities in relief and rehabilitation scheme implementation and their short and long term impact from the perspective of various stakeholders.
- 5. Alternative products, medical advancements and research, emergent technologies, diagnostics, etc and critically analyse the fit between a community and a particular tech solution (eg. incinerator in a school and implementability).



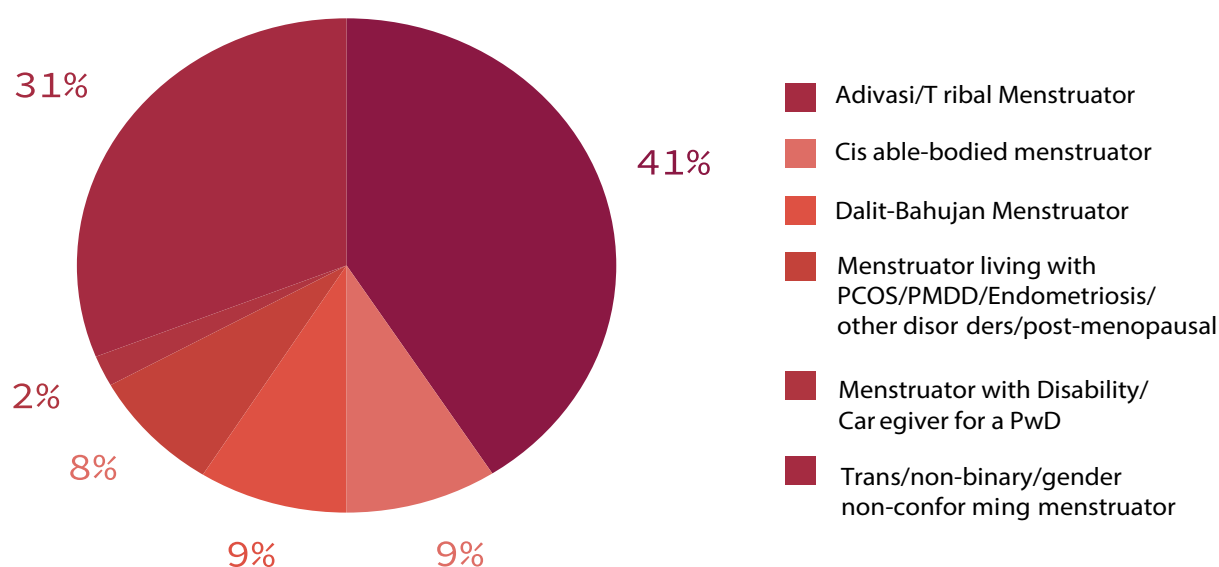
## Methodology

This toolkit has been designed based on the study of:

- 1) 263 articles from 6 digital media outlets - The Quint, The Times of India, The Print, Firstpost, Huffpost and The Scroll. These media outlets were chosen on the basis of their readership in the mainstream, credibility and availability of archives (Jan 2018 - June 2020). These were studied for inclusive language, sensationalism in headlines, follow up stories (whether present or not), credibility and expert opinion, and whether their focus was rural or urban.
- 2) 24 survey responses from journalists to a survey designed for understanding the perceptions and bottlenecks about current coverage.
- 3) 24 survey responses from individuals working in the MHM/MHH space.
- 4) 63 survey responses from persons of marginalised communities including persons with disabilities, persons from Dalit, Bahujan and Adivasi communities, menstruators living with menstrual disorders and trans persons.

However, getting just 1 response out of the 63 from an Adivasi person makes this particular intersection underrepresented in the findings of the surveys. This is a limitation of this survey tool with respect to sampling in the times of early covid onset in India in 2020.

### Number of Respondents



## Executive Summary

To do justice to the topic, Menstruation, its different intersections like education, infrastructure, culture, lifestyle, need to be explored. The fast paced digital era that we live in today makes this challenging. This challenge extends to the media.

Trends from the reports studied:

Considering that across 6 media outlets, only 263 articles had been written over a period of 30 months (Jan 2018 - June 2020) brings it to ~8 articles a month across 6 platforms, which comes to a shocking 1.3 articles a month, per outlet.

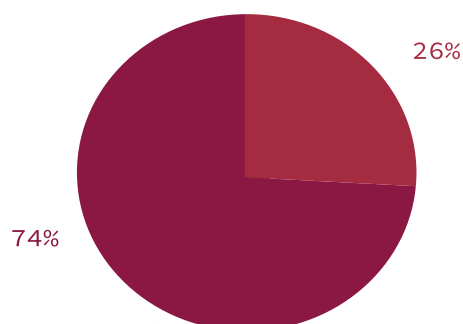
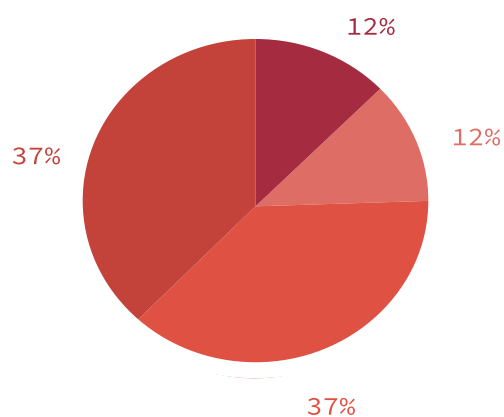
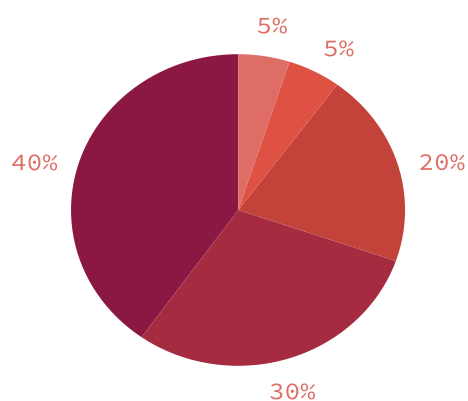
Of this, almost 1/3rd of the coverage around menstruation has been based on trends while analytical pieces that focus on government or academic reports, studying the implementation of government schemes or reporting on the ground realities of menstruators in rural India, are at an abysmal 2%.

It is also interesting to note that 85% of the media's coverage on menstruation does not add any critical perspective to the subject. The premise of these articles are so indistinct that they do not need to be supported by data points or professional opinions. Merely 9% of the entire coverage had stated data points which helps demonstrate the universal implications/ concerns of menstruation to their readers. Articles on menstruation cannot be limited to documentation of events. The media must speak truth to power. Pursuing follow up opportunities is one way of critically reporting on the subject, however, only 7% of the articles studied were follow up stories.

Not all menstruators are women and not all women menstruate. So, how often does the media talk about the menstrual experiences of a trans person or a non- binary person? While there is a major gap in the reportage around menstruators from minority communities, only 3% of the coverage used inclusive language that did not erase their lived experiences.

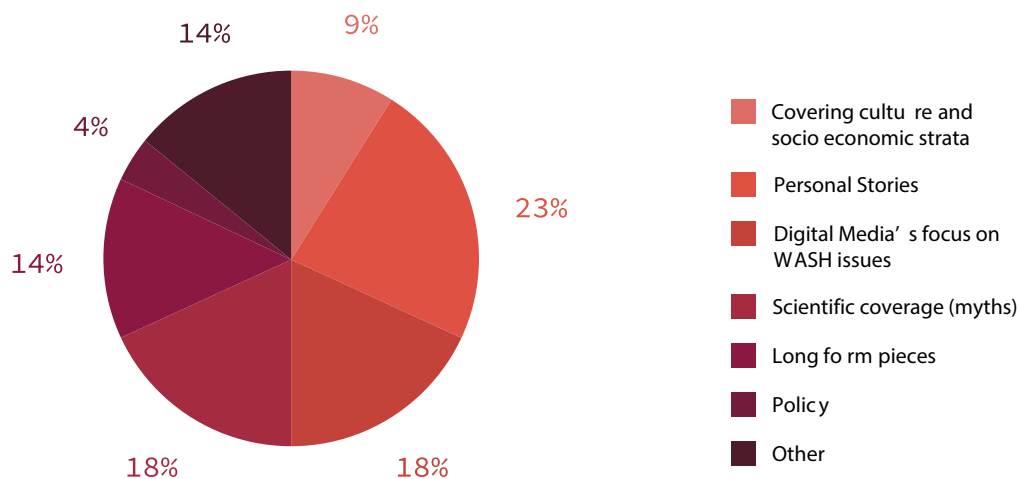
**Trends from the surveys:**

When asked to rate the current coverage by the media around menstruation (1 being the best and 5 being the worst), the three stakeholder groups in our survey responses seemed to all think that there is a lot to be desired with the status quo considered.

**Journalists****Marginalised Communities****MHH Professionals**

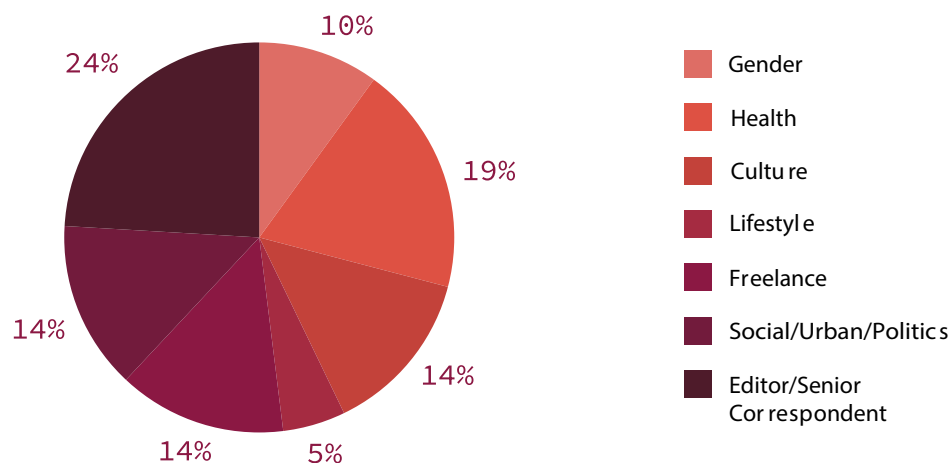


### What the Media Does Well According to Journalists



According to this graph, almost 50% of media persons believe that the media does a good job of covering varied aspects to menstruation. 23% are satisfied that the media covers personal stories well. While 18% and 9% state that the WASH (Water, Sanitation and Hygiene) infrastructural issues and the socio-economic aspects are adequately discussed. Another 18% think that the coverage on menstruation is scientific. However, according to our research, barely 3% of the articles published by the mainstream media were cognizant of these aspects. While we have received inputs from 24 journalists, we have tapped into various beats that they report on in this sample set (see graph below).

### The Beats Covered by Journalists who were Surveyed

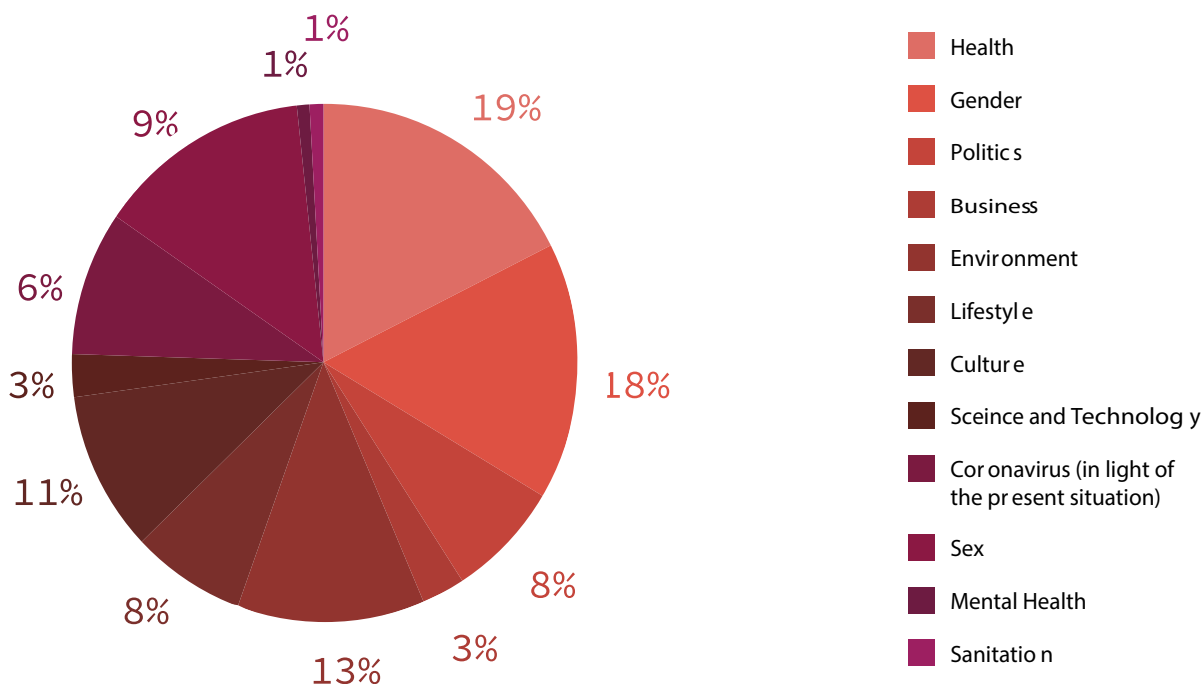




When this diverse set of journalists was asked which beats they think menstruation should be covered under (graph below), the distribution shows that about 45% of the respondents put menstruation under Gender, Health and Politics - indicating the need to push for a multi-dimensional approach to coverage.

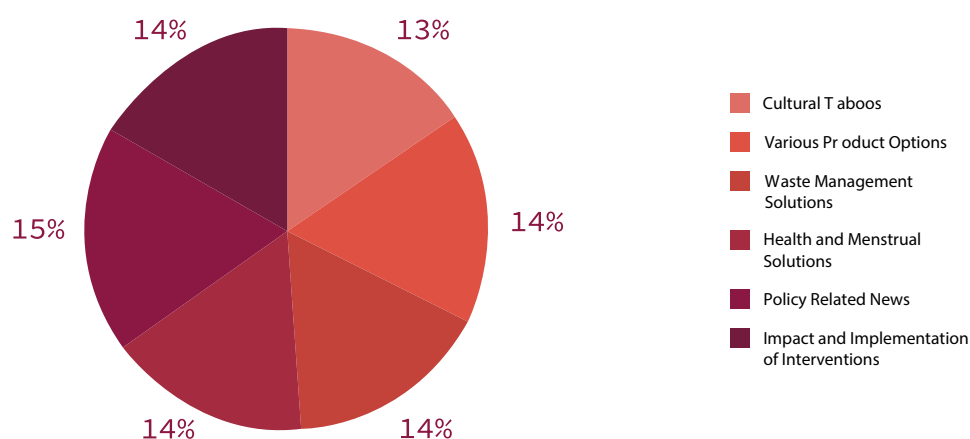
A critical thing to make note of is that Mental Health seems to be the least chosen beat in this chart. This cements the general perception that menstruation and mental health have no interconnection. However, menstrual disorders like Premenstrual Dysphoric Disorder (PMDD) and Premenstrual Exacerbation (PME) clearly establish such a correlation with one's mental health.

### Beats Under Which Journalists Find Menstruation Related Stories Suitable

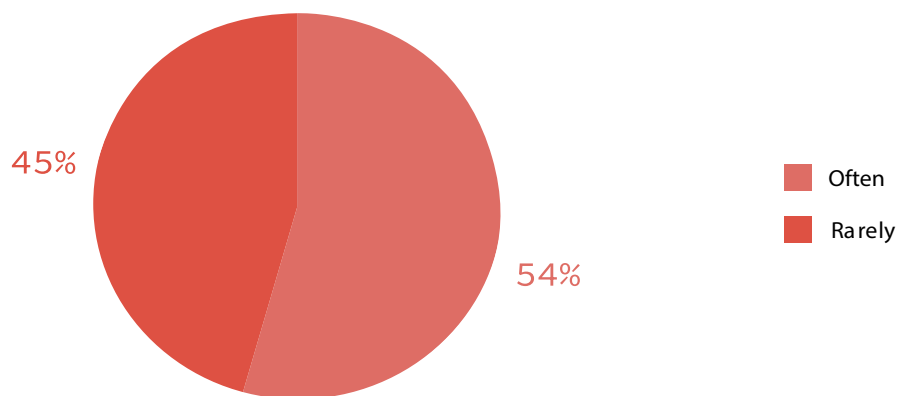


Although stories about Cultural Taboos seem to be desirable (13%) by MHH professionals, these stories tend to be negatively framed and therefore reinforce the sense of shame and taboo associated with the subject. The stories that unravel cultural taboos must offer layered perspective on Government Interventions, Laws that remain unchanged or violated while following certain rituals, Positive interventions by local NGOs, the origin of these practices and how the menstruators feel about them in their particular socio-cultural context etc. According to the chart below, 20% of MHH professionals realise the importance of inclusive language, and almost 32% think that the media must improve in presenting the larger ecology and focus on the lack of research on menstrual issues.

### MHH Professionals' Response - Increased Reportage Desired

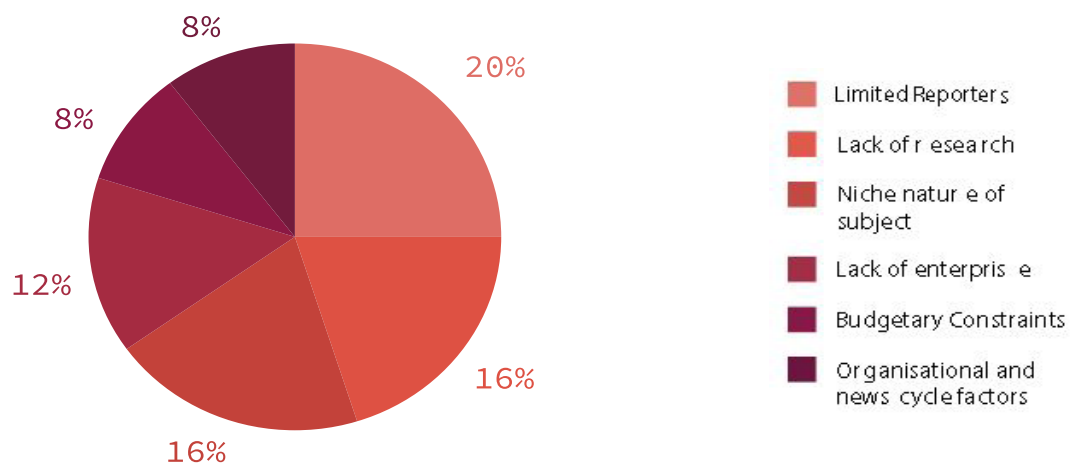


## MHH Professionals' Response: Reference of Media Reports for Interventions

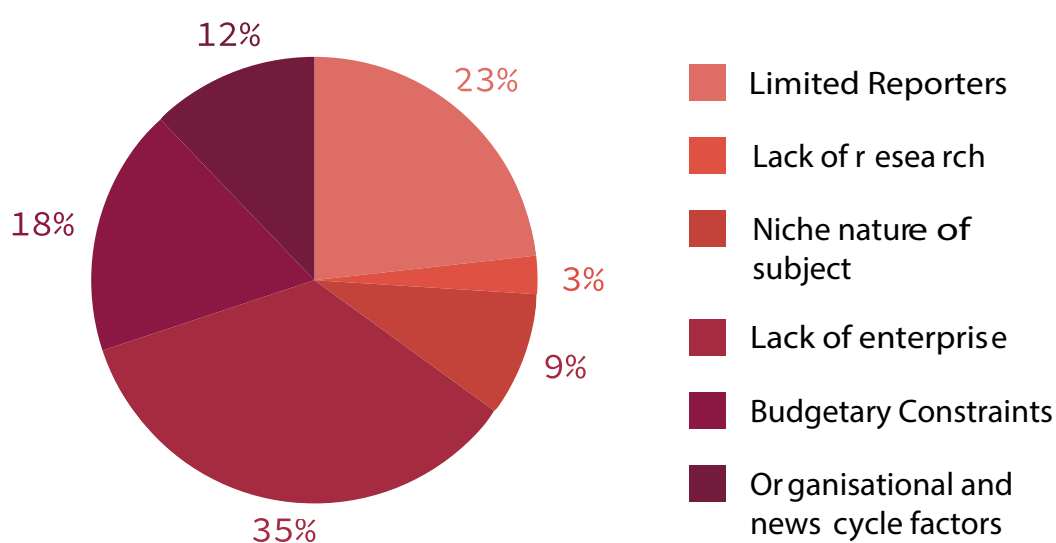


Parallely, MHH professionals do not look towards the media before interventions precisely because of the gap of credible reportage and in depth analysis. This is further aggravated by lack of research studies, sweeping statements made out of the few research papers by media, and lack of intersectional approaches to looking at menstruation that addresses: Policy, Legality, Product and Tech innovation, Environment and Sustainability, Health, Gender, Entrepreneurship, Clinical perspective, etc.

## MHH Professionals' Response: What the media can improve

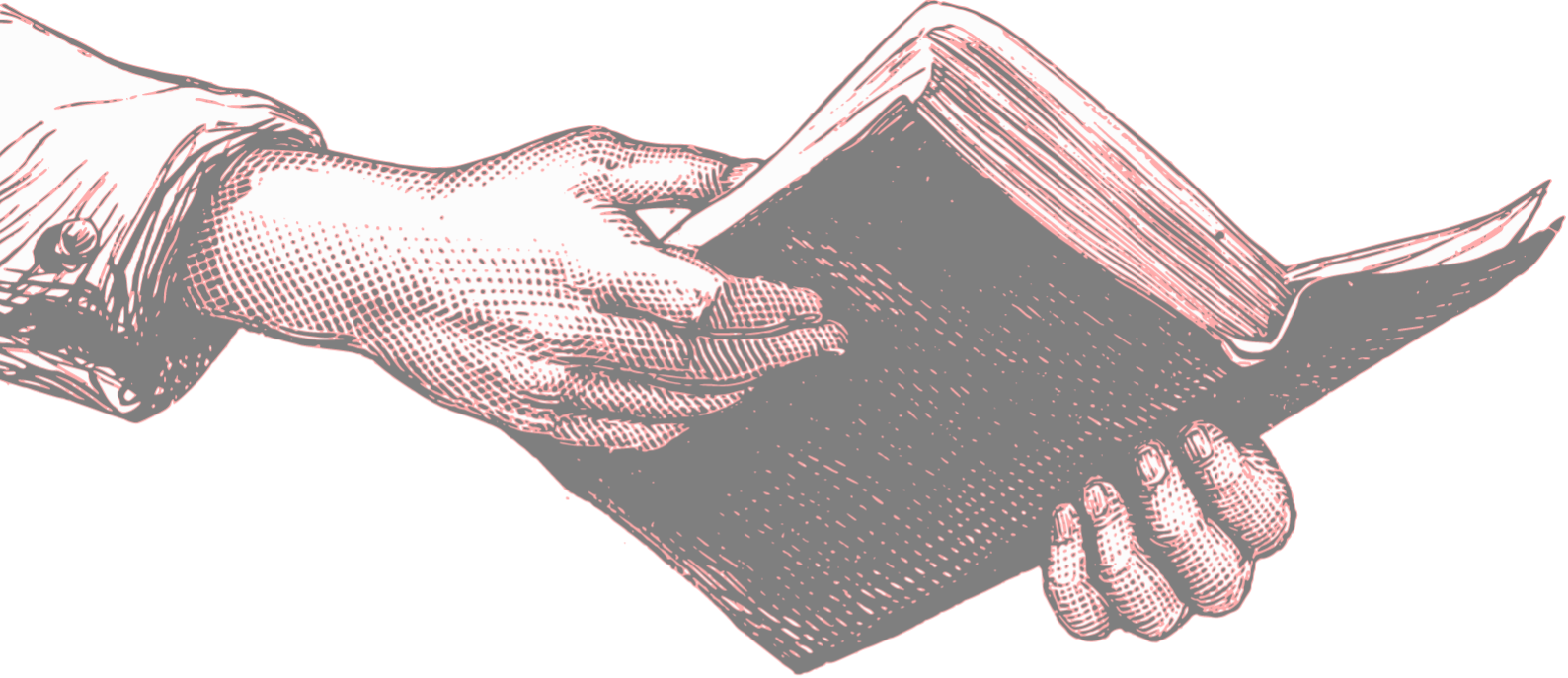


## Journalist Response: Constraints in Reporting on Menstruation

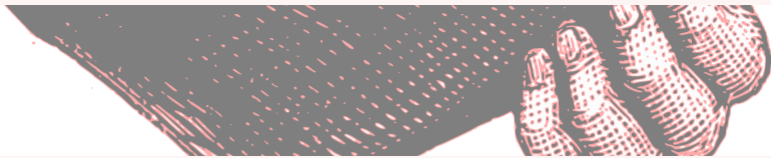
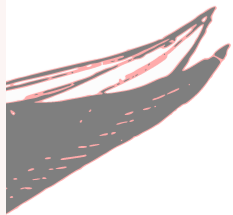
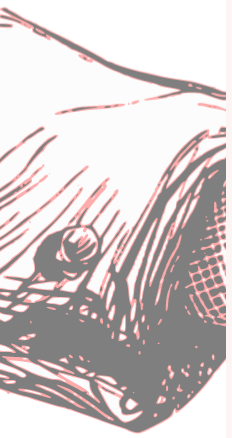


Journalistic stakeholders seem to represent lack of expertise, budgetary constraints and news cycle factors as key elements in bottlenecks to reporting on menstruation. In conjunction, when we read the graph on how stories are allocated, they seem to be disconcerted. One can safely conclude that the majority of the pieces allocated are selected by editors and some based on interest of journalists. Improving their sensitivity to reportage would be the first step in plugging the gap in lack of reporters. Some of the aspects of key improvement on inclusive language, data driven stories, larger perspectives on Policy, ecology, etc.

As an experienced MHH professional, there are a few long form based reporting formats by select media houses (The Ken, Swaddle, etc) that have shown the rigor and help question the authority, agency and consensus on menstruation. The insipid discrimination with PwDs, DBA and trans/queer menstruators and their issues continues to be amiss in the narratives of reportage.



# Key Recommendations



**The following recommendations are to be looked at together for any piece of reportage to be sound, nuanced, accountable and evocative; and not as stand alone key recommendations.**



## 1

## Source Veritable Data Points in Articles



Seated in her concrete shanty in Siddharth Nagar, a cramped settlement in Mumbai's Worli area, Jayshree Kamble talks animatedly about the sanitary napkins she sells. "Ladies shy away from going to a chemist because they are usually staffed by men," she says of her neighbours. Add to this, price concerns and a lack of hygiene-related awareness, resulting in most women using cotton rags, she says.

Her narrative echoes in a 2011 survey by AC Nielsen, which found that only 12 percent of India's 355 million menstruating women use sanitary napkins.

Consuming news through online spaces allows one to actively engage with what is presented in front of them. This leaves room for criticism and scope for further research and development to influence the menstrual health and hygiene space.

This is precisely why it is important to mention/hyperlink the data source mentioned in a report. While some articles do mention the title of the paper referred to support their narrative, some fail to mention if the paper is available for public viewing/can only be viewed by subscribers of that particular research platform.

In case, a writer tried to find data points while researching any aspect related to menstruation and could not find any, it is helpful to state that there is a gap in the research material available. This way we can kill "zombie statistics." This in itself becomes critical to flag and can encourage researchers and professionals working along the lines of gender studies, WASH, sexual health and reproduction and/ menstruation, who closely follow media reports on the topic to take more research projects.



the 12% number often quoted. The study was conducted by A.C.Nielsen and endorsed by Plan India in October 2010, which stated that only 12% Indian women use Sanitary Napkins and the rest are using unsanitary methods of managing menstruation. However, this study titled "Sanitary Protection: Every Woman's Health Right" is *not* available on any public domain.

## 2 Use and Advocate Strongly for Inclusive Language



Keeping in mind the importance of female hygiene and menstruation products, something that has always bothered me is the fact that women are forced to shell out a lot of money every month, for something that we have no control over.

Across several articles reviewed, it was noticed that when talking about menstruation, the subjects were always referred to in the binary through use of the word 'women' rather than the appropriate phraseology - menstruating person/menstruator/people who menstruate, women/girls, trans, womxn. Not all people who menstruate are women and not all women menstruate.

Menstruation belongs to some uteruses, but not all. Many female athletes do not menstruate, and neither do many women who have had intense cancer treatments, for example. Does that make them less of women? Transmen, or people born female that transitioned to men - can also menstruate. Gender has nothing to do with the menstrual cycle, but rather sex and biology do. Gender is socialized - it is created between our ears - whereas sex is about body parts, which are created between our legs. Gender minorities like trans and non-binary people also menstruate and stating it as a '(cis)women's issue' further marginalises their menstrual experiences.

Representation of transgender menstruators and non- binary menstruators is absent in the current coverage. Gap in coverage of this demographic's lived menstrual experiences adds to the already lacking medical knowledge and public discourse on the same. Normalising the nuanced relationship of the LGBTQ+ community with menstruation can positively inform the services provided to them in this area, like period products and medical treatments.



The hurdles some trans men and gender-nonconforming people who menstruate say they face include the high cost of period supplies, lack of access to the products, safety concerns and inadequate medical care. Some of these challenges were recently brought to light when a story about menstruation product maker Always removing the female sign from its sanitary products went

# 3 Add Expert Opinion



You can use sesame seeds as a home remedy to prepone your periods as it causes a lot of heat production in your body. Just mix one teaspoon of sesame seeds with one teaspoon of honey and have this mixture twice or thrice a day. Do this for a week before your due date!

The taboo around menstruation restricts open conversations about it. This leaves a lot of questions unanswered where the media has an opportunity to challenge myths and gaps in knowledge with credible facts rooted in research and medical findings. It is here that comments/inputs from gynecologists/psychiatrists/government authorities etc. become essential. It is the media's responsibility to question, challenge, subvert and seek rigor in content, even that which comes from an expert. This is particularly relevant to medical opinions/advice in relation to menstrual health; such opinions are not always devoid of moral/judgemental values. Further, those who share their experiences with the medical professionals are often met with medical gaslighting. The media could do well to be mindful in showcasing medical advice/opinions free from such undertones and flag the rampantness of medical gaslighting.

In addition, media has a role in challenging the effects of medical gaslighting (where health care professionals downplay or invalidate menstrual symptoms with non-medical or emotional responses) which results in patients doubting themselves or thinking that they might in fact be exaggerating their struggles. Apart from this, it is also important to give due, utmost and unchallenged credit to the lived experiences of menstruators and keep in mind that menstrual experiences are vastly heterogeneous. This in turn, also adds the responsibility of not compromising an individual person/ a community's agency and consent when being represented in the media. It is important to be mindful of not treating menstruation as a psychological abnormality, especially when it comes to reporting on stories that speak of the relationship between certain menstrual disorders like PMDD, PCOS, PMS and mental health.



Scientists [seem to have discovered](#) what is behind the debilitating pain that some women suffer from. It's inflammation!

**A new study suggests that the pain is caused by acute inflammation, as measured by the C-reactive protein (CRP). CRP is a protein produced by the liver; its levels rise when there is inflammation present in the body.**

[Report in the US National Library of Medicine](#)

So eating an anti-inflammatory diet loaded with antioxidants, essential minerals and fatty acids is the way to go.



# 4 Avoid Sensational Headlines. Provoke Thought.



**Ladies, Karma is a 'Bitch', if This Swami is to Be Believed**

The media space that is replete with sensationalism or 'clickbait' as a way of getting readership. The headline above, for example, doesn't serve the purpose of summarizing the piece and its contents, as a headline should. Rather, it only acts as click bait adding no contextual value to clarify that the piece is about menstruation or that it is the 'karma' of cooking on one's period that's being talked about.

The headline below however does a better job as the reporter takes a stand and objects the Godman's statement and while also clarifying to the reader the statement being discussed.

The coverage of this Swamiji's comment proved the importance of contextualising superstitions around menstruation and questioning the part patriarchy and the caste system play in the perpetuation of them. Ironically, the godman - a personification of brahmanical patriarchy, quotes from 'religious' texts. It is unfortunate, however, that the coverage on this incident, by and large, failed to peel back the layers and societal structures that are conducive to discriminatory attitudes and behaviours. Most articles plainly reproduced his comments without critique or perspective on the legal and social consequences (or the lack thereof) of propagating such opinions publicly. The media has power to design pieces in ways that question such problematic voices and subvert them.



**Bizarre: Gujarat Religious Leader Says Menstruating Women Who Cook Food For Their Husbands Will Be Reborn As Dogs**

## 5


## Adopt a Critical Lens. Follow up.



One of the unique powers of the media is the freedom to hold people/organisations accountable through analysis and questioning. It creates space for checks and balances in the grand scheme of things. However, most articles around menstruation that we read, served exclusively, either as a glorification of periods or as a pathos on the shame and exclusion that occurs in one off communities/tribes/families/institutions. There is little middle ground.

Media and other institutions ought to value menstruation as an integral part of reproductive labour. This goes beyond the understanding that menstruation is a biological process, therefore limiting it to certain genders, and in turn certain defined experiences of menstruation. Rather it is important to take cognizance of the fact that menstrual labour (labour/work undertaken by the body and in turn with effects on the productive function of a menstruating body) is a subset of reproductive labor, labor that makes and produces society fit for economic labor. This along with caregiving, childbirth and domestic labor is mostly invisibilized, uncompensated, undervalued, unacknowledged, even naturalized to “women”, just like menstruation unfortunately is.

Media ought to dialogue on this critical aspect of viewing labor in itself. “We can construe the process of menstruation as a labour of the body towards reproduction. In this view, the entire menstrual cycle can be seen as the monthly work put in by the body in order to maintain its reproductive potential. Further, even if it happens (mostly) outside the agency of the woman, it still needs to be accounted for and added to the rest of the work she intentionally does” as showcased in this piece by The Wire, titled ‘ Learning to See Menstruation as a Reproductive Labour.



If we want to rescue Aunt Flo from the taboos and apprehensions surrounding her, we need to accord her the status of a worker. Menstruation is work: sometimes painful, but not shameful. We need to be proud of this harmonious little factory that runs within our bodies – sometimes not so efficiently, perhaps requiring an external stimulant now and then, or even permanently or temporarily shut down. Whatever condition it may be in, it cannot be denied its due.

## 5.1

## Adopt a Critical Lens. Follow up.



However, the Bio-Medical Waste (Management and Handling) Rules, 1998 says that items contaminated with blood and body fluids, including cotton, dressings, soiled plaster casts, lines and bedding, are bio-medical waste and should be incinerated, autoclaved or microwaved to destroy pathogens.

When talking about periods, we must as a society, facilitated by the media, switch to evoking solidarity with menstruators, not sympathy for them.

Analyzing government interventions and pursuing follow up opportunities are two ways the media can make a paradigm shift towards critical, investigative reporting on WASH issues. The example above shows a classic follow up opportunity overseen. The article mentions a new rule that requires sanitary napkin manufacturers to attach disposable pouches with the product. This has evidently not come into practice in the market and allows for a compelling follow up opportunity. Although it is our responsibility as a people to hold leading stakeholders accountable, the media has the power to formalise this accountability and escalate it to said stakeholders at a much faster rate (stakeholders like the larger government bodies - Municipalities/Panchayats, MNCs that sell sanitary products, Menstrual Health Management Researchers, Waste Management Organizations, Medical Fraternities etc.)



**One-rupee sanitary pads welcome, but govt's Janaushadhi stores often don't have them**

# 6 Focus on Larger Systemic Gaps - WASH Infrastructure



It was also observed that majority (73%) of the women use cloth during periods. Most of the women, around 72%, clean the cloth where they take bath. It was unfortunate to acquire the information that they wash their used cloth during the menstrual cycle in the same source where they were taking bath.

Menstruation as a subject always involves at least 3 layers, often more:

The menstruator,

The Menstrual Hygiene and Waste Management personnel, and

The local government that is incharge of WASH (Water Sanitation and Hygiene) facilities that are available to the menstruator etc.

As per our observations, there is plenty of scope for reportage from a multi-dimensional approach integrating these layers and more. The report above is an example of how the media fails to recognise the lack of WASH infrastructure in this village, as a gap that is likely prevalent in a lot of nearby villages, as a result making for an important factor that makes a menstruator's choice difficult. The media doesn't hold local government bodies accountable for the poor status-quo.

Instead, a judgemental spotlight is shone upon the use of cloth by the menstruating women in villages as a backward choice, painting a picture of helplessness. This is only one example of several such articles with biased, morally high-handed overtones about a menstruator's choices rather than investigating/ highlighting the factors that have led to those choices.

## 7

## Explore Conversations Around Policy in Workplaces or Institutions of Labour



### Indian firm offers "menstrual leave" for women on first day of period

NEW DELHI (Thomson Reuters Foundation) - A digital media company in India is offering "menstrual leave" to female staff as part of its official policy and calling on authorities to legislate to give all working women the option of taking the first day of their period off work.

The media plays a huge role in introducing and encouraging policy changes by creating opportunities for deliberation within the public and private spheres in a society. Extending this influence to menstrual concerns can spotlight the current dearth of policies for equity and dignity in menstruation, especially in the workplace. Few corporations recognise paid period leaves as a right and there is a gap between the unique experiences of a variety of menstruators (Trans, non-binary and people with disabilities) and the institutional policies that ensure their dignity. The focus on reporting singular instances, like the article pointed out above, has unintended consequences. One of the biggest one being making certain exceptions in the area of menstruation seem like the norm. The highlighting of one off organisations' implementation of period leave, curbs the potential of the media to advocate for long term, wider-spanning solutions.

Furthermore, we need to emphasise how, especially with respect to workplaces; the evolution of labour norms, productivity and routine have predominantly evolved from the perspective of a male and a male body. We need to build systems that recognise the effects of hormonal fluctuations/cycles of menstruation on productivity and routine. In the same breath, it must be acknowledged that institutions do not have menstrual rights policies in place because they are driven by the capitalist agenda that makes prolonged 'productivity' the only metric of 'success'.

## 8

## Cover and Engage with Broader Menstrual Ecology



World Environment Day 2020: How to be environmentally conscious with your period products



**Cloth Pads and Period Panties – Smart Women’s Menstrual Hygiene Choice**

Coming across pieces that advocate a shift to organic and sustainable products without external and/or topical encouragement like World Awareness Days including Environment (5th June) or Menstrual Hygiene Day (28th May), among others, is a rarity. It is a concern that even the few stories that do talk about sustainable products often tend to patronise/judge menstruators like in the headline above where sustainable options are called the “Smart Women’s Choice”. The narrative needs to be detached from moralisation and revolve around a menstruator’s agency in making informed choices about their bodies and products they use through scientific rigor and rationale.

There are many other reports where adoption of waste management technologies like incinerators are sounded off as harbingers of change. One must bear in mind however, that the impact of these technologies is closely tied with the socioeconomic and cultural background in which they operate. Great value can be added through detailed reportage about such interventions and their interplay with existent knowledge, attitudes and practices pertaining to menstruation.

The media must also be mindful when reporting on devices/drugs available to regulate or suppress menstrual cycles. Beyond the clinical aspects of how the solution may affect one’s body, the writer needs to investigate what factors drive such choices - autonomy, agency or coercion. It is also important to holistically report on the grey area between western or allopathic medical options, the indigenous spectrum of Indian medical solutions and the mix of one or more medicinal approaches people tend to take.



**Here's why you should make a switch to organic pads and menstrual cups**

## 9

## Coverage in Disaster Zones



### Cyclone Fani: Women were left with just one cloth to cover body, manage menstruation

In the absence of gender-sensitive disaster response mechanism, women in a Puri village tore the only cloth they had after the disaster destroyed everything

Stories that highlight the plight of menstruators under deprived and tense circumstances is imperative to initiating meaningful humanitarian/relief interventions. The reportage around menstrual experiences in disasters, refugee camps and politically volatile regions like Kashmir and Arunachal Pradesh needs to widen.

The article cited here emphasises the need for a response mechanism to be gender friendly as the lack of it has multi-layered consequences (compromising dignity, safety and health) on menstruators. We have only added one story to elucidate this point owing to the serious dearth of any more articles, ironically even incomprehensive articles, that report in this area.



#### Make relief gender-sensitive

Bisakha Bhanja, member, National Alliance of Women's Organisations (NAWO), who has visited several disaster-affected areas, said the impact is much higher on women than men.

"Provision of clothes is not yet in the government's immediate relief package and several women are facing humiliating condition due to want of clothes. The government, while providing Rs 2,000, a polyethene sheet and 50 kilogrammes rice to each affected household, should have made a point to include clothes, at least for women, along with it," said Bhanja.

## 10

**Saviour Complex Surrounding Cis- Het Men Working in Menstruation**

**These men are fighting menstruation taboos in India—and helping women leave dirty rags behind**

The framing of the headline above, is apt to point out the unnecessary veneration of cis-het, non-menstruating men working in the area of menstruation. Yes, it is important to have men onboard to discuss and participate in undoing the taboo surrounding the topic. However, this should not warrant the tone of “leav(ing) dirty rags behind”.

It is presumptuous to say that women are negligent of their health; they may, in truth, be forced to prioritise multiple other aspects of their lives because of their socio-political and economic standing in society. Men need to be presented as allies, not saviours.



“In 2004, we started providing affordable (Rs.5 for a pack of five sanitary napkins) easy-to-use clean cloth napkin made out of waste cloth for women in villages and slums. We found clothing gave these women, who neglect or are ignorant of this critical health issue, a sense of dignity and self-respect.”



## 11

Give Context. Avoid Moral Absolutism.



### Koovalapuram's curious guesthouse

In Koovalapuram and four other villages of Madurai district, menstruating women continue to be isolated in 'guesthouses'. No one challenges the discrimination, fearing the wrath of the gods and humans

The picture attached below is a quote of a 90 year old menstruating woman referring to the infrastructural development in her village and its correlation to menstruating person's experience of excluding themselves in a 'guesthouse'. This otherwise comprehensive piece could have portrayed a lot more of her lived experience of menstruation and how she may have coped with/contributed to her community or continues to do so as well.

It is also important to understand that growth/ lack of it in one aspect of menstruation like an outlook for example, is not The key to holistic MHH development. Muthuroli saying "today's girls are better off" does not make her the image of sociocultural myths surrounding menstruation. It only makes her a part of the MHH ecosystem.



Something that his sister Muthuroli, almost 90 years old, could not 'enjoy' in her time. "We had only thatched roofs over our heads. There was no electricity either. Today's girls are better off, and still they complain. But we must follow this system," she declares emphatically. "Otherwise, we will be brought to dust."

## 12

## Commit to Employing a Diverse Workforce Inclusive of Menstruators in the Media



The Global Media Monitoring Project has been conducting several studies from 1995 to at the global, regional and national level to understand “Who Makes The News”. In 2010, after reviewing 1,365 newspapers, television and radio stations and Internet news sites, 17,795 news stories and 38,253 persons in the news in 108 countries with 82% of the world’s people the report found that **“76% of the people heard or read about in the world’s news are male. The world seen in the news media remains largely a male one.”**

However, the most recent report released under the same project (2015) showed a slight 6% increase in the number of female storytellers entering the workforce between 1995 and 2015 (See image below). Interestingly, it was also found that women reported 5% more stories online than in all traditional mediums (Newspapers, Television, Radio) combined. This suggests that irrespective of the increase in women’s representation within the workforce capturing the mainstream discourse remains a struggle.



(‘Who Makes The News’ Report 2015: Growing increase in Women Joining the Workforce)

## 12.1

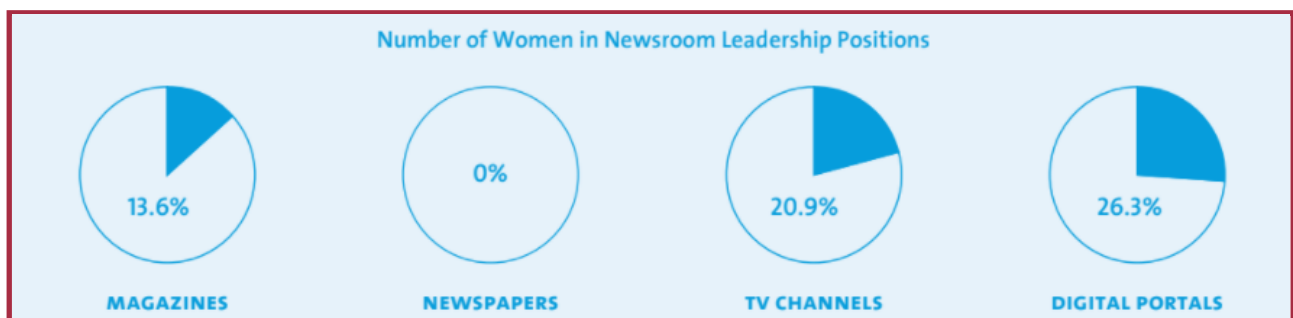
## Commit to Employing a Diverse Workforce Inclusive of Menstruators in the Media



In essence, this global statistic is in alignment with the findings of similar local reports in India. Newslaundry, an online alternative media platform, analysed the ‘Gender Inequality in Indian Media’ and found that in mainstream English newspapers “Merely 2.6% of all articles are on gender issues and only 39.6% of these are written by women.” When it comes to digital media there is a 1% increase with “Just 3.7% of all articles” discussing gender issues and 63.6% of these being written by women. However, the leadership positions held by women in the newsrooms was highest in digital portals at 26.3%. (See image below).

When it comes to caste representation within newsrooms in India, Newslaundry’s report ‘Who Tells Our Story Matters’ states that **“No more than 5% of all articles in English are written by Dalits and Adivasis.”** It was also found that none of the leadership positions in a newsroom belonged to Scheduled Castes and Scheduled Tribes. It is also crucial to note that over half of the articles related to caste were written by upper caste persons.

It is pertinent to highlight here that the representation of trans, queer, gender-non-conforming persons are not represented in the studies stated above. Having a diverse and inclusive demographic is key to moving towards a more holistic and sensitive reportortage around gender concerns.



(Gender Inequality in Indian Media NL Report 2019: Leadership Positions Held by Women in the Media Landscape)

# Glossary

**Before we go any further, here's are short explanations of some concepts that will keep coming up throughout this document:**

## **MHH**

According to the UNICEF, Menstrual health and hygiene (MHH) encompasses both menstrual health and hygiene and the broader systemic factors that link menstruation with health, well-being, gender equality, education, equity, empowerment, and rights. These systematic factors have been summarised by UNESCO as accurate and timely knowledge, available, safe, and affordable materials, informed and comfortable professionals, referral and access to health services, sanitation and washing facilities, positive social norms, safe and hygienic disposal and advocacy and policy.

## **Patriarchy**

It is a social system in which men hold primary power and predominate in roles of political leadership, moral authority, social privilege and control of property.

## **Brahminical Patriarchy**

The need for effective sexual control over women to maintain not only patrilineal succession but also caste purity, a system unique to Hindu society.

## **Cis person**

It is a term used by people whose gender identity matches their sex assigned at birth. For example, someone was assigned female and identifies at birth is a cisgender woman.

## **Transgender person**

Transgender people have a gender identity or gender expression that differs from the sex that they were assigned at birth. For example, someone who identifies as a woman and was assigned female at birth but identifies as another gender.

## **Medical Gaslighting**

Medical gaslighting happens when health-care professionals downplay or blow off symptoms and try to convince patients that they are caused by something else—or even that someone is imagining them.

## **Capitalism**

It is an economic system characterized by private or corporate ownership of capital goods, by investments that are determined by private decision, and by prices, production, and the distribution

# Glossary

## **Intersectionality**

It is a framework that acknowledges that everyone has their own unique experiences of discrimination and oppression and we must consider everything and anything that can marginalise people – gender, race, class, sexual orientation, physical ability, etc.

## **LGBTQIA+**

It is the abbreviation of Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual sexualities. The plus sign denotes all of the gender identities and sexual orientations that are not specifically covered by the other five initials.

## **MCDM**

It is the abbreviation to denote Menstrual Discomforts, Conditions and Disorder.

## **DBA**

It is the abbreviation to denote Dalit, Bahujan and Adivasi communities.

## **PwD**

It is the abbreviation to denote Persons with Disability or Differently Abled.

## **Human Rights**

It is the rights we have simply because we exist as human beings - they are not granted by any state. They range from the most fundamental - the right to life - to those that make life worth living, such as the rights to food, education, work, health, and liberty.

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## Who are we?

Boondh is a Bangalore-based social enterprise working in menstrual health along the verticals of literacy, advocacy, activism, policy and sustainable products. Our work - of building menstrual life skills among menstruators across socio-cultural strata - is informed by an intersectional feminist, culturally sensitive, multi-stakeholder and informed choice approach. Alongside direct engagement with menstruators, we are also focussed on capacity building through Trainings of Trainers (ToTs) and building open-source resources to empower folx to impart these life skills within their own communities.

So far, we have engaged with communities ranging from school children in Himachal Pradesh to athletes in Manipur to prisoners in Mysore to menstruators in urban workplaces.

Boondh also curates India's first travelling art exhibition, The Crimson Wave, that channels art created with menstrual blood and other media, into menstrual activism. The Crimson Wave has been exhibited in Chennai, Goa, Bangalore and Delhi so far, and we hope to take it across the country in times to come!

If you'd like to explore virtual sessions on how to report and discuss menstruation, reach out to us at [sonal@boondh.co](mailto:sonal@boondh.co) and/or [pratyusha@boondh.co](mailto:pratyusha@boondh.co).

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Image Credit: 'Yes, I Bleed' by Nishitha Jain