



## Phenomenological Analysis of the Menstrual Experience of Girls Living in Tehran

Marzie Barari<sup>1\*</sup>, Mahmoud Shahabi<sup>2</sup>

- 1- PhD in Cultural Sociology, Department of Sociology, Faculty of Social Sciences, Allameh Tabataba'i University, Tehran, Iran
- 2- Associate Professor, Department of Sociology, Faculty of Social Sciences, Allameh Tabataba'i University, Tehran, Iran

**Received:** 26.11.2018  
**Accepted:** 16.02.2019  
**Published online:** 20.09.2020

**\*Corresponding Author:**  
Marzie Barari

**Email:**  
[marziyebary11@gmail.com](mailto:marziyebary11@gmail.com)

**Citation:**  
Barari M, Shahabi S.  
Phenomenological Analysis of  
the Menstrual Experience of  
Girls Living in Tehran. J Qual  
Res Health Sci. 2020; 9(2):  
145-154.

### Abstract

**Introduction:** Menstrual experience is one of the most important physical experiences of girls. The main question in the present study was not only how to understand and give meaning to this experience, but also how it could be related to social and cultural fields.

**Methods:** This qualitative study was carried out using grounded theory method and through encoding phenomenological interviews with 24 girls who lived in Tehran and experienced menstruation.

**Results:** Five main categories and sixteen sub-categories were identified; The main categories included "Context of menstrual experience", "Causal conditions of menstrual experience", "Intervening conditions of menstrual experience", "Action strategies of menstrual experience", and "Consequences of menstrual experience".

**Conclusion:** The results of the present study indicated that the menstrual experience paves the way for girls to construe their body as an object for manipulation. From this perspective, though menstrual experiences are similar, they can be distinguished from one another whether by regarding menstruation as a defect in the normal functioning of the ideal body that needs to be concealed or as a natural event indicative of a feminine body with reproductive capacity.

**Keywords:** Physical experience, Menstruation, Phenomenology, Girls

### Introduction

The transition from childhood to adulthood is considered a definitive and critical period in one's personal and social life. Sexual maturity is one of the most important signs of this passage that appears sooner in females and is associated with dramatic bodily changes.

The undeniable development of female organs and the beginning of menstruation are the most important biological changes that women experience at an early age (in terms of social maturity). It is noteworthy to mention that these are not steady biological changes. In fact, certain important factors affect the way these changes take place and the way they are perceived. In

addition, biological changes radically and irreversibly change the lives of girls and are accompanied by special social and mental consequences for them. The perceived meaning of the first menstruation and transition from childhood to maturity are created differently in different individuals and societies, hence influencing the consequences of menstruation and the way individuals treat this experience. During this biological process, some conditions including concepts, expectations, environment, and mental and spiritual health may affect the way girls respond to this event (1).

The tensions resulted from this critical period will emerge in wider range and depth if there be an unfilled gap between sexual and socio-cultural maturity. However, it was reported that “Iranian girls experienced their first menstruation within the age range of 13- 18” (2), the age at which girls are socially and culturally considered as child rather than adult. Thus, it is research-worthy to study the possible effect(s) of the gap between sexual and socio-cultural maturity on respondents’ menstruation .

Some studies have also highlighted the harms resulting from discordance between the pace of development of sexual-physical maturity and that of socio-cultural maturity, especially in girls, and have emphasized the role of education to face the crisis originated from the above-mentioned fact (3-5). Accordingly, the present study attempted to put forward this hypothesis and explore the underlying factors, strategies and consequences resulted from this experience by narrating the girls’ experiences of menstruation as the most important sign of sexual maturity.

During menstrual period, girls experience some mental and physical changes and find

a new understanding of their bodies. In line with this topic, Martin pointed out that female body is in different conditions every month and undergoes dramatic events such as pregnancy, menstruation and menopause; therefore, it can be a complete sample to a new conceptualization of body which is flexible and constantly changing (6). For example, Butler did not consider the body as a natural sexual body, but as a continuous interactive process between bodies and discourses (7). Butler argued that not only gender is a cultural construction but it is also a fabricated construction. He argued that the homogeneous idea of woman regardless of race, class, and sexual orientation is influenced by patriarchal society and those feminists resulted from that patriarchal culture. Insistence on solidarity and unity of women leads to ignoring social, political, and cultural plurality that constructed “women” (8). Besides, Grosz considered feminine self as a combination of body and mind. He reviewed and investigated the relationship between inner and outer world of a subject (9).

The way menstruation as a biological event is perceived influences the way a child/girl enters an adult/ woman world. The manner in that parents and other adults deal with the new body, cultural and social mechanisms affecting these changes, subject’s strategies and reactions to manage and reconstruct this new body conditions and the consequences that these biotic changes impose on the subject are the new scopes of research in the field of sociological body management, which have less been the focus of studies in Iran. Most of the researches done on menstruation dealt with physiological aspects from a pathological point of view. They have mainly emphasized either

premenstrual syndrome or menstrual disorders (10-12). Apart from physiological and pathological aspects of this menstrual biotic event, many of the other aspects experienced by women, especially the first menstrual experience, are hidden. If these aspects are explored, it may be much helpful to comprehend the feminine life. Although menstruation is a natural biological process, it may thoroughly affect the quality of one's life and create new challenges. It appears that the age during which the first menstruation occurs has a great effect on consequences and the way this experience is understood. Moreover, the way parents and other adults deal with it and the way a girl imagines her body may have some influences on the way she experiences menstruation. Besides the above-mentioned consequences, it may be succeeded by special consequences for the individual and the society. From this perspective, it is important and necessary to narrate and analyze the lived experience of girls who have recently passed through this event. By narrating these experiences, the present study attempted to pave the way for understanding the social and cultural mechanisms shaping menstruation. Hence, the main purpose of the present study was to answer the questions of how girls understand and give meaning to their first menstruation, how it is connected to the context and underlying factors, and finally, what the consequences of this experience are.

## Methods

This study was conducted based on the grounded theory method proposed by Glaser and Strauss to associate the lived experiences with the hidden context that entails the categories of lived experience.

The grounded theory is a qualitative research method, which employs a set of systematic procedures to generate and expand a grounded theory about the phenomenon under study (13). This qualitative research method leads to proposing a theory derived from the analysis of the collected data i.e. it is grounded in actual data (14). Therefore, the main purpose of a grounded theory is to systematize a number of ideas that have been obtained through the analysis of the collected data (15). In fact, the aim of this method is to propose a middle-level theory that can explain the problem under study .

In this study, the samples were selected using purposive sampling method. This sampling method is based on purposeful and standardized selection. The inclusion criteria of the study were being a woman, living in Tehran, being between 12 and 30 years old, and having a menstrual experience. Finally, a sample of 24 girls aged 12 to 28 years was selected. Since physical experiences can vary in different social classes, age groups, and educational levels and fields, to enrich the categories, it was purposefully attempted to select samples with maximum variety in such a way that the researchers deliberately and purposefully selected the participants from a wide range of social classes and educational levels and fields. Accordingly, people with special social, economic, cultural or educational background were looked for. In total, 24 interviewees participated in this study. The interviews continued until data saturation was reached i.e. to the point that no new information was provided and no new category was identified. Semi-structured in-depth interviews were used to collect data in such a way that interviews started with general questions and then the

next questions were asked. Some of the interviews were recorded with the consent of the interviewee, but in most of the interviews, the interviewees did not allow the researcher to record the sound because the discussion was about body. The interviews lasted about 80 to 190 minutes. The interviewees were selected from coffee shops, parks and clinics. However, all reasonable efforts were made to conduct the interviews at the most convenient time and place for the participants after asking their opinions several times. Thus, the researchers did their best to hold the interviews at a calm setting with the least disturbance possible.

At the beginning of each interview, the researchers attempted to follow the interview protocol. The interview protocol was designed based on theoretical sensitivity guiding researchers throughout the whole interviews. The protocol did not in any way prevent participants from discussing other issues; rather, it was a flexible plan that could be changed for subsequent interviews with the emergence of new categories.

In addition, the interview questions and procedures were reviewed and corrected several times. In the initial interviews, the researchers did their best to carry out open or semi-structured interviews. After each interview and its implementation, the analysis process was performed, the interview protocol was reviewed, and the researcher again referred to other participants to collect new data. The cycle of gathering information continued until it reached theoretical saturation.

The data collected from the interviews were analyzed using the grounded theory method based on open, axial and selective

coding procedures. Thus, the texts of the interviews were read several times and the semantic units and initial codes were extracted (open coding). In the next step, by continuously comparing the codes with each other and discovering the similarities, the main codes and sub-codes were extracted through an inductive process and the coding continued in order to abstract the data. Throughout the process, the categories were changed many times, and as the concepts of some of the codes became clearer, their place changed. Finally, the categories extracted in the form of a paradigm model were interpreted and explained in terms of causal conditions, context, intervening conditions, action strategies and consequences.

To establish the reliability, member check or respondent validation as well as audit technique were used. The interviews and extracted categories were presented to four expert colleagues having experience in fieldwork and qualitative research. By considering their comments, the concepts and categories were reviewed and consolidated. For member check, the extracted concepts and categories were presented to several participants and they were asked to evaluate the topics and categories. Finally, the results were confirmed. Ethical considerations were taken into account in this research. In order to protect the right of the participants, first, the researchers presented information about the nature of the research to each participant. After providing detailed explanations and obtaining the informed consent, the participants were invited to participate in the interviews.

The participants were free to choose whether to take part in the interviews or not. The researchers also tried to provide comfort and convenience to the participants. The time of the interviews was determined

by the participants themselves. Regarding the place of the interviews, the researchers attempted to select places which were relatively comfortable and quiet. The researchers attempted to speak in such a way that the interviewed girls did not feel ashamed of expressing their physical problems and experiences. The questions were asked in such a way not to induce anxiety. Moreover, when the participants did not consent to record their voices, their rights were respected and the recording was stopped. Finally, in this research, confidentiality principles, regarding the identity of the

participants, were also observed .

## Results

Five main categories and sixteen sub-categories were identified in this study. The main categories included “Context of menstrual experience”, “Causal conditions of menstrual experience”, “Intervening conditions of menstrual experience”, “Action strategies of menstrual experience”, and “Consequences of menstrual experience”.

**Table 1. Subject and Main Categories**

Sub-categories	Main category
Underlying diseases, Age at menarche, Traditional religious family, Premenstrual syndrome	Context of menstrual experience
Religious beliefs, Mother's interpretation of the menstrual experience, Satisfaction with one's gender, Age, Awareness of one's body	Causal conditions of menstrual experience
Experience of sexual intercourse, Pain threshold	Intervening conditions of menstrual experience
Following traditional advice, Raising self-awareness of female body, Paying attention to body	Action strategies of menstrual experience
Physical transition to gendered body, Identity transition to adulthood	Consequences of menstrual experience

### Central phenomenon of the research: girl's body as an object for manipulation

Menstrual experience, in terms of the meaning that the girl gives to it, is placed on a continuum with two ends. At one end, menstruation is regarded as an event that needs to be concealed and at the other, it is considered as an indicative of femininity. If it is experienced as a taboo and a defect in the body compared to the ideal male body, the girl interprets the menstrual period as a problem related to the body's natural function preventing her from daily life and the end of this period is construed as an opportunity to recover health. Such a menstrual experience is fundamentally different from a menstrual experience in that a woman interprets her menstrual cycle

as an event that guarantees her physical health and reproductive capacity.

### Menstruation: transition from ungendered to feminine body

Based on two conceptual frameworks, one regarding menstruation as a defect in the body's natural function and the other considering it as a taboo that requires concealment, the menstrual experience turns into an unpleasant physical experience for a girl during which she attempts to manipulate her body by concealing the physical manifestations of puberty in a way that makes it similar to an ideal male body as much as possible. Within two other conceptual frameworks, one interpreting menstruation as a sign of health and reproductive capacity of the female body



and the other regarding it as a natural-biological event, menstrual experience turns into a pleasant experience for a girl during which she perceives her body not as an object for manipulation but as a normal body.

“I've heard a lot of girls say we got sick. I say what is sick? I was a child myself, I wanted to tell my mom to buy a sanitary pad, I said, I got sick” (Participant 2, 27 years old). “I'm so embarrassed to go out and get a sanitary pad. I must have got some black plastic bag from the pharmacy so I wouldn't bring it home like that” (Participant 24, 18 years old).

### **Context of menstrual experience**

#### **Underlying diseases**

Women with underlying diseases such as hormonal disorders, anemia, ovarian dysfunction, and ovarian cysts experienced menstruation more as a type of illness, as a result, they reported their menstruation as an unpleasant experience.

#### **Age at menarche**

The younger the girls experiencing menarche, the more likely they were to regard it as a disease as well as a female secret, resulting in unpleasant and painful experiences in their mind.. “When I saw I was bleeding, I started screaming, it was my first reaction, I shouted because I was shocked” (Participant 4, 12 years old).

#### **Traditional-religious family**

The girls from more traditional-religious families experienced menstruation mainly as a disease and also as a female secret. They often perceived it as an unpleasant experience “My family was religious. My mother used to buy sanitary pad and give it to me stealthily. I hid it from my father and brother” (Participant17, 18 years old).

### **Premenstrual syndrome**

It was observed that the menstrual experience was more unpleasant when the premenstrual syndrome was more severe and the girls were less aware of it and had lower knowledge of how to deal with it.

### **Casual conditions of menstrual experience**

#### **Religious Beliefs**

The more girls adhered to traditional religious beliefs, the more they experienced menstruation as a disease, a life-breaking period, as well as a female secret, and it was often referred to as an unpleasant experience.

#### **Mother's interpretation of the menstrual experience**

It was observed that in the respondents' narrative of their menstrual experience, the way their mothers faced this experience and the way they reacted to it affected the girls' interpretation of menstrual experience. This impact was particularly significant in the early years of this experience. Thus, respondents who experienced menstruation as a disease as well as a female secret identified their own mothers as the main source of information and simultaneously pointed to the learning of do's and don'ts about menstruation through their mothers. “When my mother found that I was menstruated, she was upset, so I was sad, too. I thought it was a disease, for example, something I shouldn't have done now. Yes, I was hiding. My mother would buy sanitary pad and give it to me secretly” (Participant 7, 15 years old).

On the other hand, respondents who experienced menstruation as a sign of health as well as a natural-biological thing, mostly introduced their mothers as the main factor leading to such attitude towards menstruation. “My mother told me

at which age I undergo menstruation. It was so informative in details, and it was a good experience for me in general” (Participant 10, 19 years old).

### **Satisfaction with one’s gender**

The more satisfied a person was with being a girl, the more she interpreted menstruation as a sign of physical health and was happy to repeat this cycle in her body.

### **Intervening conditions of menstrual experience**

#### **Age**

As women got older, they interpreted menstruation as a sign of good health and as a natural-biological thing, and menstrual experiences were more pleasant for them.

#### **Awareness of one’s body**

The higher the respondents' awareness of their body, the more they perceived the biological experience of menstruation as a natural-biological matter and a sign of their physical health, and consequently, experienced a more pleasurable menstruation.

#### **Pain threshold**

Respondents who had a higher pain threshold were more likely to experience menstruation as a natural-biological process and a sign of physical health and experienced a more pleasurable menstrual period.

### **Menstrual experience strategies**

The developed strategies are adopted to manage and deal with, carry out, and show sensitivity to the main research phenomenon under certain conditions. These strategies fall under four categories: practicing traditional advice, practicing medical instructions, raising self-awareness about the body, paying attention to the body, and how it is represented.

### **Practicing traditional advice**

The girls who experienced menstruation more often as a disease and a female secret were more likely to follow a variety of traditional do's and don'ts in the face of their menstrual experience. They did things like drinking a variety of herbal teas, fastening the back and keeping it warm, not sitting in a cold place, and following a variety of religious instructions related to menstruation. The extent to which the respondents interpreted menstruation a sign of health and a natural-biological process, the likelihood of adhering to these traditional recommendations diminished, “When I was younger, I adhered more frequently to traditional advice. For example, I heard that if you ate saffron, menstruation would occur sooner. I did this many times, but not now. As I got more mature, I got to know things better” (Participant 16, 25 years old).

### **Raising one’s awareness about the female body**

Women, who interpreted menstruation as a natural-biological process, were more likely to try to raise their awareness of the female body and consciously encounter some physical, especially mood manifestations of menstruation. “Contrary to the common belief that a woman is in bad mood during her menstruation period, and nobody should mess with her, I try to have more control over my behavior and not get easily irritated when I am menstruated, but I cannot say that I do not get angry at all” (Participant 1, 19 years old)

### **Focusing on the body**

A majority of the participants stated that they pay full attention to their bodies during menstruation and take full care that blood stains do not appear on their outer clothes. “I always have to be careful that no blood

spot leaks out. Most of us prefer to use a large sanitary napkin so that our clothes do not get dirty. I do not wear light-colored clothes on the first day of menstruation so that if they are stained they won't stick out a mile" (Participant 24, 18 years old).

### **Consequences of menstrual experience**

Consequences, which may be tacit or real, are actions and reactions that result from interactions. These consequences fall under two categories: physical transition to gender-specific bodies and identity transition to adulthood.

#### **Physical transition to gender-specific bodies**

Through menstruation, the women entered a new phase of their lives, at the end of which they underwent a kind of transition from a non-gender-specific and childish body to a gender-specific and feminine body, and the resulting bodily changes were mentioned as the most important consequence of menstruation. Among the various changes that girls' bodies experienced, breast enlargement was important to them, "I didn't have very feminine limbs and I had very small and flat tits. But with the start of menstruation and the first time I had the opportunity to wear a bra, I was very happy as I felt like I was a girl now" (Participant 11, 18 years old).

#### **Identity transition to adulthood**

Through menstruation, the girls stated that they entered a new phase of their lives, at the end of which they experienced a kind of identity transition from childhood to adulthood, and the resulting identity changes were mentioned as the most important consequence of menstruation. Among the various identity changes that girls experienced, the sense of responsibility was the most emphasized one. "I felt like a girl and that I

should help with more household chores, take more responsibility, and wanted to help my mom at home" (Participant 2, 27 years old).

### **Discussion**

Girls' perception of their bodies as an object for manipulation while experiencing menstruation as a biological event is interwoven with the initial excitement shaped by throwing girls into the female world which results in a unique kind of encounter with their body. Consequently, due to the circumstances in that they encounter this biological event, especially the extent to which it is kept secret and hidden from the male community; girls shape a new perception of their body as a female body. A study by Ahmadi, Borhani, and Kohan indicated that personal and private nature of menstruation makes girls consider menstruation as one of the important milestones in their life and experience different and contradictory feelings (1). In addition, the results of this study indicated that the younger the girls experiencing menstruation the more they experienced it as a disease and a female secret, in such a way that unpleasant and annoying memories about it remained in their minds.

Koff and Rierdan came to the conclusion that the girls, starting their first menstruation at the beginning of sixth-grade high school, experienced depression to a great extent (16). Moreover, Foster et al stated that age of menarche was one of the factors causing stress in girls. They proved that experiencing menstruation at younger ages increases the amount of stress (17). In addition, the results of the study by Ahmadi, Borhani and Kohan indicated that girls appreciated and acknowledged the physical and



emotional supportive role of their mothers while experiencing their first menstruation. Additionally, the results of this study revealed that by getting older and accepting female body, the acceptance rate of new female body increases. The acceptance of this female body, as a result of the appearance of female organs, was due to the perception they had of an ideal body. The initial rejection of this female body was ensued from the conception they kept in mind regarding an ideal male body, therefore, the more influenced by this ideal body picture, the more they were alienated from their own female body (1).

Young conducted an analysis based on Merleau-Ponty's study to show the differences between male and female bodies in current American culture. He argued that there are countless ways in that girls feel frustrated about engaging in a variety of activities that improve their physical skills (18). Besides, the results of the present research indicated that the biological experience of menstruation as a disruptive experience that makes the human body extremely sexual and perceived as a female body, creates a completely different body image and identity for girls. Consequently, based on this bodily perception and understanding, they react to the femininity of their bodies as a result of their menstrual experience. In line with the above-mentioned study, Brumberg argued that menstruation is not an intrinsic phenomenon but a biological one in such a way that social, cultural, and economic factors can influence it (19).

One of the limitations of this study was the reluctance of some girls to participate in the interview due to the shame of explaining their menstrual experience and the relatively long duration of the interview. Another

limitation of this study was that newly menstruated girls were embarrassed to narrate their menstrual experience; therefore, it made them reluctant to continue participating in the interview. Moreover, some mothers did not allow their girls to participate in the interview. The other limitation was resulted from the length of interview, it took a long time to interview them, as a result of this issue, some of the participants deserted the interview in the middle of way.

## Conclusion

The present study led to the identification and understanding of the interactive effects of the physiological phenomenon of menstruation and the socio-cultural issues. Based on the results, girls encountering feminine aspect of their body were more affected by social and cultural factors. They reacted first mostly by rejecting this body and manipulating it and then by accepting feminine identity and manipulating new sexual body to turn it into a sexual object.

## Acknowledgments

The present article is part of a Ph.D. thesis on the life cycle and life experience of body among women in Tehran at Allameh Tabataba'i University with code of ethics 1394.1.06. Hereby, the researchers offer their warmest thanks to all the officials and staff at Allameh Tabataba'i University, meanwhile, the researchers' warmest thanks would go to the participants who took a vital role in this research.

## Conflict of Interest

The authors do not have any conflict of interest.

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