



## “I Treat My Daughters Not Like My Mother Treated Me”: Migrant and Refugee Women’s Constructions and Experiences of Menarche and Menstruation

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Menstruation is a material reality at some point in most women’s lives. Yet, the discursive meaning assigned to menstruating bodies and the way in which they are experienced is dependent on the sociocultural and historical spaces which they occupy (Lee and Sasser-Coen 1996, 13). Across cultural contexts, menarche is constructed as a symbolic transition from childhood to womanhood, a period of growth and change, often linked with sexual maturation (Lee 2009, 622). While menstrual activists, artists, poets, and women’s rights organizations are challenging negative representations and practices surrounding menstruation (Bobel 2010, 42), dominant discourses often still portray menstruation as something dirty and disgusting, and a bodily function to be silenced and concealed (Brantelid, Nilvér, and Alehagen 2014, 606; Mason et al. 2013, 4; see also Wood [Chapter 25] in this volume).

While globally there are similarities in the way menarche and menstruation are experienced, there are also cultural differences, including specific beliefs, practices, and restrictions placed on women during menses (Uskul 2004, 676). For instance, at menarche girls in Nepal may be required to undergo a period of seclusion (Crawford, Menger, and Kaufman 2014, 431; see also Rothschild and Shrestha [Chapter 66] in this volume), while women from rural India have reported that during menses, they are not allowed to attend to certain household chores, such as cooking or preparing food (Behera, Sivakami, and Behera 2015, 514). Many cultures also have positive or celebratory rituals and practices toward girls at menarche. For example, women from African countries such as the Republic of Benin, Cameroon,

and Zambia have reported receiving special treatment at menarche, including gifts of perfume, underwear and jewelry (Uskul 2004, 676; see also Cohen [Chapter 11] as well as Gottlieb [Chapter 14] in this volume). Understanding these cultural differences is important as they shape the way in which menarche and menstruation are experienced by women (Hawkey et al. 2017, 1481).

Religious practices associated with menarche and menstruation also differ across sociocultural contexts (Guterman, Mehta, and Gibbs 2008, 5). For example, Orthodox Jewish women report being required to observe *niddah*, a practice which prohibits physical contact between men and women during menstruation, and for seven days thereafter (Hartman and Marmon 2004, 393; see also Mirvis [Chapter 12] in this volume). Islamic law also states that menstrual blood is impure and thus, women are restricted from attending mosques, touching religious texts, and abstain from pray or fasting during menstruation (Guterman, Mehta, and Gibbs 2008, 3). Such regulations may be experienced ambivalently by women, both seen as an inconvenience or burden, but also as a source of power (Hartman and Marmon 2004, 401), or a means for women to identify with each other, forming a sense of community (Dunnivant and Roberts 2013, 129; see also Cohen [Chapter 11] in this volume).

While there have been studies that explore heterogeneity of menstrual discourse and practice both within (see Mason et al. 2013), and across cultural contexts (see Uskul 2004), few studies explore how women negotiate menstrual discourses and practices when transitioning from one cultural context to another. Understanding migrant and refugee women's<sup>1</sup> experiences and constructions of menarche and menstruation is important, given women may have transitioned between two differing cultures and might need to negotiate conflicting cultural ideals associated with reproductive health (Salad et al. 2015, 8). Further, understanding women's embodied experiences of menarche and menstruation is important as they have significant implications for women's sexual and reproductive health more broadly. For example, women who have negative attitudes toward menstruation are more likely to support suppression of menstruation through long-term oral contraception use (Johnston-Robledo et al. 2003, 72). Menstrual shame has been linked to increased sexual risk-taking (Schooler et al. 2005, 329) and embarrassment toward other reproductive functions, such as childbirth (Moloney 2010, 156) and breastfeeding (Johnston-Robledo et al. 2007, 33). Mothers' attitudes toward menstruation shape the menstrual education girls receive, which if inadequate, might negatively affect their daughters experiences of menarche and ongoing perspectives toward menstruation and sexuality (Costos, Ackerman, and Paradis 2002, 56). However, to date, migrant and refugee women's attitudes and experiences of menarche and menstruation have largely been ignored, despite being intimately linked to fertility, sexual health, and a women's identity (Brantelid et al. 2014, 606; Teitelman 2004, 1300).

This chapter will explore this issue, drawing on the findings of a recent research study examining women migrating to Australia or Canada from a range of cultural backgrounds, the detailed methodology of which is published elsewhere (Ussher et al. 2017, 1904; Hawkey et al. 2017, 1475). In summary, we conducted eighty-four individual interviews and 16 focus groups with 85 participants (total  $n=169$ ) with women aged 18 years and over (average age 35), who had settled in Australia or Canada in the last ten years, having migrated from Afghanistan, Iraq, Somalia, South Sudan, Sudan, Sri Lanka (Tamil), India (Punjab) and varying South American countries (Latina). Women practiced a range of religions, including Islam, Christianity, and Hinduism. All participants, except for one Latina woman, identified as being heterosexual. Participants were recruited from Western Sydney, Australia, and Eastern or Greater Vancouver, Canada, regions that are typically of lower socio-economic status, with high concentrations of migrant communities. In this chapter, we draw on a material-discursive-intrapsychic theoretical framework, an approach that considers the biological, psychosocial, and discursive aspects of a phenomenon or experience, without one being privileged over the other (Ussher 2000, 207). Theorizing women's constructions and experiences within this approach allows for a detailed and integrated examination of the multiple factors that shape adult women's experiences of menarche and menstruation. For instance, this includes acknowledgment of the 'materiality' of menstrual blood and its 'discursive' meaning within specific cultural contexts, as well as 'intrapsychic' aspects of the embodied experience of menarche and menstruation, such as shame, fear, or anxiety. In this chapter we draw on retrospective accounts given by adult migrant and refugee women in relation to their own experiences of menarche and menstruation; we also explore how mothers address menstruation with their daughters today. Women will be referred to by their nationality/culture of origin to allow for examination of accounts within and across cultural groups.

### BECOMING A WOMAN: MENARCHE AS A MARKER OF WOMANHOOD

Menarche is a time of significant psychological and sociocultural adjustment, potentially leading girls to reconceptualize their identity as women within the patriarchal societies they live (Jackson and Falmagne 2013, 382). Menarche is discursively positioned as a marker of adulthood and reproductive maturity across many sociocultural contexts (Chang, Hayter, and Wu 2010, 457), as found in our study. A majority of women across all cultural groups described the material onset of bleeding as a discursively symbolic point in which they transitioned into womanhood. For example, participants told us, "you start bleeding and you become a woman" (Somali), "the day when the period comes, like she becomes a woman" (Iraqi). A number of participants positioned this as a positive transition they had been waiting for, with woman saying, "finally I am a woman" (Afghani) and "it was kind of a relief" (Somali).

When further questioned about what being a woman meant, a number of participants disclosed constructions centered on marriageability and child-bearing: “In South Sudan, when the girl has the first period . . . it’s associated with marriage . . . you’re going to get married and you are going to have babies” (South Sudanese). For a number of women, a direct outcome of menarche was immediate marriage and childbearing. As one woman told us, “I remember my uncle’s wife told my dad [that I had reached menarche] and that is how I got engaged and married by 14. Before knowing anything I was already a mother” (Afghani). Early marriage was said to occur to protect women from the unwanted sexual advances of men and prevent women from engaging in premarital sex, or falling pregnant outside of wedlock, both of which were described by women as culturally and religiously forbidden (see Hawkey, Ussher, and Perz 2017). However, the majority of women did not position cultural norms of early marriage and childbirth positively, with one participant reporting it had caused her great anxiety: “I was scared because I knew that they are going to be forcing me to get married, and I wasn’t prepared for it, I was scared to be a mum” (South Sudanese). All women rejected early marriage for their daughters, supported by legal restrictions on age of consent in Australia or Canada.

Menarche was positioned as a time in which young women’s emerging sexuality was discursively positioned as problematic, both prior to and post migration. “Becoming a woman” was aligned with a woman’s nascent sexuality, with participants repeatedly disclosing that they were warned to “avoid boys,” “be more careful,” and “watch your steps” after menarche. Such cautionary advice was predominantly delivered by mothers and was frequently at the forefront of girls’ menstrual education, as one participant said, “My mum always told me . . . when you get the period, don’t come closer to the men, don’t sit with the men . . . you’re going to fall pregnant” (Sudanese). However, warning messages received by menarcheal girls were often difficult to understand, given absent or incomplete information about the association between menstruation, sex, and pregnancy, as one woman commented, “they don’t give any information . . . like any sexual relationship or anything . . . they won’t tell” (Tamil). Focusing on warning messages and the avoidance of men following menarche, with no concomitant explanation as to how menstruation is linked to pregnancy, has been found to be confusing for young women (Costos, Ackerman, and Paradis 2002, 54): it may also lead to fears that any expression of sexuality would lead to pregnancy, which could result in young women associating their developing bodies and sexuality with shame, danger, or victimization (Mason et al. 2013, 4; Teitelman 2004, 1301).

## CELEBRATING WOMANHOOD: RITUALISING THE MENSTRUAL FLOW

Around the globe, menarche is acknowledged through cultural celebrations, ceremonies or rituals (Uskul 2004, 676); however, in many contexts these practices are undergoing change due to modernization and deviations to traditional belief systems (Crawford, Menger, and Kaufman 2014, 435). Among participants in our study, menstrual celebrations were most commonly discussed among Tamil and South Sudanese participants and included prayer, ceremonies, parties, and animal sacrifice. Participants told us, "the 30th day we celebrate and invite our cultural people, relatives and friends" (Tamil); "they celebrate it . . . young girls my age will come and you will be treated like you are getting married" (South Sudanese). Most participants positioned menstrual celebrations as a public recognition of their entry into womanhood: "just marking that she has become a woman" (South Sudanese). In other cases, participants disclosed that they "don't know" the reason for menstrual celebrations or believed their purpose has changed over time:

Now it's like they do these things for fun . . . before, I think my parents' time . . . they do this sort of celebration to show the other people, I've got a girl . . . whenever you are ready, you can marry that girl. (Tamil)

Participants revealed obvious discomfort in the role that menstrual celebration played in announcing to the wider community that they were now menstruators. For example, participants described intrapsychic consequences of feeling "shy" and "embarrassed"; "I was really shy you know it's not good when people come over and say oh, she got [her] period, now she's a big girl" (South Sudanese); "I felt embarrassed . . . [they] look at you in like a different way" (Tamil). Menarche is generally considered a personal event, and many girls feel anxious about people knowing they are menstruating, thus go to great lengths to conceal it (Jackson and Falmagne 2013, 388). The discomfort with menarche celebrations reported in our study might therefore be associated with the public sharing of an intimate bodily process and being "viewed differently" among their communities. As argued by Johnston-Robledo and Chrisler (2013, 12), even though menarche celebrations attempt to promote positive messages, such as 'welcoming' into womanhood, it may be confusing to process as girls across cultural contexts are often simultaneously receiving stigmatizing messages about the taboo nature of menstruation, a bodily function to be contained and hidden.

Following migration, most Tamil and South Sudanese women positioned menarche celebrations as being redundant, outdated or inappropriate, with no sense of loss. For example, one participant said, "They [daughters] grow up in Australia and they see it's not [an] appropriate thing to announce" (South Sudanese). Other women told us,

My daughter . . . she said, why do you want to have a function for getting a period . . . I also realized that it's true. It's the normal process in the body, so why should we have [a] party . . . I'm not going to follow it. (Tamil)

In another account, a woman living in Australia said, "they call it a Saree Party here" (Tamil), referring to the 'coming of age' party in a Western context where a girl wears a saree for the first time. These findings suggest that for a minority of women, where menstrual celebrations do continue to occur, they might do so in an adapted form.

Other traditional rituals that took place at menarche included ceremonies with leaves, dirt and water, slapping, dietary changes, flour hand dipping and wearing of new clothing. For example, one participant told us, "they put some tree leaves around her hand . . . to wish the girl luck to get married and have children" (Sudanese). Tamil women also reported specific dietary changes associated with menarche:

They don't give any spicy food, no chilli . . . first they give us the raw egg . . . and the sesame oil . . . [in] our culture they believe there's a wound inside because of the new eggs produced and it [has to] come out, the blood and all that, to heal. (Tamil)

This account illustrates the cultural construction of menarche as a time when women have an internal wound that needs healing. Dietary changes were also positioned as a means to strengthen the reproductive system and avoid menstrual pain: "they think that it directly works with the womb you know the reproductive system will get the strength" (Tamil). One participant described continuing to give her daughter raw eggs at menarche: "here [Australia] I give my children only one egg a day, over there three eggs a day" (Tamil). However, another stated, "just a fresh egg . . . they think it's healthy, but after I came here I know it's bad, because it's not even boiled, it's not good for the health" (Tamil).

In this study, for a number of Tamil women, the menarche celebrations described above occurred following a period of seclusion, reflecting a complex cultural construction of menstruation: "I was made to stay in the room for one month until they had the ceremony" (Tamil). Although some participants who had experienced menstrual seclusion positioned it as being "natural," others found seclusion challenging: "you can't go outside that was tough" (Tamil). Women provided few explanations for menstrual seclusion; however, one participant described it in terms of the need for recuperation, drawing again on the concept of an internal wound: "there is some wound inside and the wound has to be healed, that's why they keep the girls in the room" (Tamil). It is possible however, that in the absence of a coherent explanation of menstruation prior to menarche or reasoning for menstrual seclusion, such practice might be confusing, and lead girls to associate

their menarche with isolation (Crawford, Menger, and Kaufman 2014, 432). Participant accounts demonstrate how migrant and refugee women variably adopted, adapted, and questioned cultural practices surrounding menarche celebrations and rituals, demonstrating women's negotiation or navigation of differing cultural contexts following migration.

### SILENCE AND SECRECY: EDUCATION AND COMMUNICATION AROUND MENSTRUATION

Preparedness for menarche plays an important role in how it is experienced, with girls who receive menstrual education prior to menarche reporting more positive experiences of this transition (Marván, Morales, and Cortés-Iniestra 2006, 327). However, many women in the present study described receiving little or no pre-menarcheal education in their countries of origin. Participants told us, "nobody tells us, nobody talk about it" (Somali); "we don't really talk about stuff like that" (Afghani). Participants stated that the reason menstruation was not discussed was because of shame and wider disapproval from family and friends: "they think it is shameful, it's disrespectful, you don't have respect for yourself" (Afghani).

Across cultural groups, many participants described receiving little or no preparatory menstrual education or support from their mothers, a finding that is not unique to migrant and refugee women alone (Cooper and Koch 2007, 65). When asked the reason for such reluctance on the part of mothers, it was described as a "cultural thing" which could not be challenged, as one woman said, "They are very secret about this stuff . . . my mum doesn't talk about periods or childbirth . . . maybe it's a cultural thing" (Tamil). In other instances, the information that participants described receiving was incorrect, or women were unsure of its meaning. For example, one participant's mother told her "not to sit anywhere dirty during our period because . . . everything is sort of open and you can get all kinds of infections" (Afghani). Despite being unsure of the meanings of the warnings women received, some participants passed this information on to their daughters who began menstruating following migration:

I said ok if you want my advice when you got your period . . . you can't let the boy touch you . . . I told my daughter, she do it now . . . I don't know whether it is good or bad, I don't know. (South Sudanese)

This finding suggests that it may be useful to work alongside migrant and refugee women to understand where such cultural practices have evolved, and to highlight to women the possible consequences to their daughters if such beliefs are internalized, such as feelings of shame toward their bodies in relation to a normal healthy bodily function.



## “WHEN I GOT MY PERIOD, MY HEART KIND OF BROKE”: EXPERIENCES OF FIRST BLOOD

In the absence of any framework to make sense of menarche, women associated their first menses with excrement, injury, and guilt. For example, one participant said, “I was kind of horrified that something was wrong with me or I might have hurt myself” (Afghani). Other women positioned their first menses as a form of punishment: “I thought I had done a sin or something really bad” (Afghani). Participants used strong emotive language such as “shocked,” “scared,” and “shame” when recalling these experiences. Many women also reported self-isolation; “there was a little dark room, and I would go there and I would lay out a mattress . . . and I would just sit there and cry” (Afghani), or described not disclosing to mothers and family that they had begun menstruation, as they felt “ashamed” or “shy,” positioning their menarche experience in a negative light, “I kept praying, oh god never ever let this happen to me again” (Afghani). These findings reiterate the importance of adequate menstrual education prior to menarche (Teitelman 2004, 1298), particularly given negative constructions of menstrual blood lead women to feel humiliated and unclean, and might result in women developing ongoing associations between menstruation and contamination (Lee 2009, 621).

An additional consequence of inadequate education meant that at the time of menarche many women reported they had poor knowledge about the function of menstruation in relation to reproduction. For some, it was not until well into their menstruating years, or once they had migrated, that they became aware of the role menstruation had in childbearing: “Not until we got married, we came to know the whole thing, what happens” (Punjabi); “I really I didn’t know until I became pregnant with my first son” (Iraqi).

### RESISTING SECRECY AND SILENCE FOR DAUGHTERS POST MIGRATION

As reported previously (Cooper and Koch 2007, 71), as a consequence of receiving little or no menstrual education themselves, many women disclosed being more open or wanting to be more open with their own daughters during menarche. For example, one participant said, “I want to avoid what happened to me when no one told me, so I told my daughter she already knows” (Sudanese). However, some of the mothers interviewed disclosed being “shy” to talk in depth with their daughters or “unsure” when the right time was to address menstruation:

We’re shy from those matters and even I can’t talk to my daughter frankly and tell her what happened . . . I tell her about the period, and I tell her about the baby, but not the long procedure . . . I think I felt embarrassed. (Iraqi)



In another account, a woman described wanting to discuss menstruation with her 11-year-old daughter, but not knowing when or how: "until now I haven't said anything to her about it . . . I don't want her to experience the same as what I had . . . but I don't know when, and where and how" (Iraqi). These accounts highlight that although many mothers would like to educate and support their daughters through menarche, given their own poor experiences of menstrual education, they might lack the knowledge and confidence to do so at an appropriate time, prior to their daughter's menarche. At the same time, other participants actively sort information to better support their daughters. For example, one participant described attending a women's health course where she was provided with the appropriate information to support her daughter:

I was scared and shy to talk about this topic . . . I went to a migrant resource centre and there was a lady . . . she talked about the periods and how to tell their daughters. I learnt from that session and it encouraged me to tell my daughter. (Sudanese)

In another example, a participant disclosed wanting to talk to their daughters in the future but only when they are "old enough" by cultural standards: "I will explain to my daughters . . . at an age of you know, nine, ten. No younger than that because I think I'm still following the culture" (Afghani). This account demonstrates how migrant women may navigate two differing cultural contexts, both resisting a taboo of silence and secrecy by wanting to provide their daughters with information, but also still adhering to cultural mores that require it to be done at an 'appropriate' age. These findings emphasize the need to provide newly arrived migrant and refugee women with access to menstrual education sessions to ensure they have a sound understanding of menarche as a biological function, but also an emotional transition. Women may benefit from specific guidance on how to broach the subject of menstruation with their daughters, including ways to relay information about menarche and menstruation that position it as a positive developmental stage.

### CONTAINMENT AND REGULATION OF THE SUBJECT MENSTRUAL BODY

Although there are many cultural representations of blood, ranging from family and kinship, to violence and war, menstrual blood is almost always positioned negatively (Bramwell, 2001), as was reflected in women's accounts in this study. Participants repeatedly positioned blood as "disgusting," "dirty," "awful," and "not clean." One participant said, "You can smell there is something different . . . because the blood has come from the vagina, so I think it's dirty" (Iraqi). Menstrual blood was also positioned negatively by men in women's lives, including husbands, brothers, and fathers, requiring women to be discrete about their menstruation. As one participant disclosed,

“he [father] and my brother, they preferred that I didn’t throw out my feminine paper [pads] in the same bin that they were using. I don’t understand, it was maybe some stupid thing that they had against blood” (Latina). One of the consequences of menstruation being constructed as disgusting and contaminating was women’s desire to conceal their menstruating bodies from the wider world both prior to and following migration: “I started to wear dark colours when I get my period. I do not wear whites at all . . . it will look disgusting when it stains” (Iraqi). Many women described feelings of self-consciousness and greatly feared leakages, resulting in frequent visits to the bathroom, as one Sudanese participant told us, “I would go more frequently to the wash-room. I was afraid of my dress getting stained. It is a big problem . . . it was like a shame”; a Latina woman similarly disclosed, “I started to feel ashamed of my body . . . everybody is always telling you be careful, be extra cautious . . . you are going to be terrorised if you don’t hide it.” While self-surveillance is energy-consuming (Johnston-Robledo and Chrisler 2013, 14), these practices, in conjunction with negative cultural constructions of menstruation, are likely to result in women having negative attitudes toward their menstruating bodies (Roberts and Waters 2004, 18).

In addition, historically and cross-culturally, menstrual blood has been discursively constructed as being poisonous, magical, and polluting—a sign of the ‘monstrous feminine’ (Ussher 2006, 6). It is these negative representations of women and their menstruating bodies that have contributed to restrictions placed on women during menses (Buckley and Gottlieb 1988, 25). For instance, Sudanese women described the inability to enter the kitchen or carry out normal household duties while menstruating; a practice that a small number of women continued even following migration, “you can’t cook, you can’t wash dishes, you can’t clean the house for one week until you are clean” (Sudanese). Although such restrictions might reinforce the notion of menstruation being dirty, one Sudanese woman, who continued to avoid cooking while menstruating, viewed such restraint in a positive light given it meant she had a break from her usually demanding household activities: “seriously for me, it’s good, because I can relax” (Sudanese). Such examples were unique to Sudanese women and demonstrated how some women can position menstrual restrictions positively.

Women across cultures and religions are continually receiving paradoxical messages by which they are both demonized for their reproductive bleeding bodies, but praised for their ability to procreate (Goldenberg and Roberts 2011, 82). For example, while motherhood was highly valued across all cultural groups in this study, many women described prohibitions from religious activities, such as visiting the mosque, temple, or church, praying, touching the Koran or other religious texts, participating in religious ceremonies, and observing Ramadan, when menstruating. While the majority of women followed these restrictions due to their own interpretations of religious texts, other participants described that their mothers or older women in their family

would relay these restrictions to their daughters. One Punjabi woman told us her mother had said, "not to touch the book [holy scriptures] during periods . . . since elders said [this], we followed through without questioning." Many women continued these avoidance practices during menstruation following migration, with women saying that, "these days we can't go to the temple" (Tamil) and that, "praying is for when you're pure and clean and you're respecting yourself in front of God" (Afghani).

A small number of Muslim women reported that they were required to undertake a cleansing bath before resuming religious activities, because menstrual blood was polluting; "when you have your period, before you've cleansed yourself, you're not allowed to pray or read the Koran" (Afghani). Religious prohibitions and the requirement of ritualized bathing may reinforce the construction of a woman's reproductive body as unclean and polluting, and thus herself as lacking purity: this might lead women to internalize feelings of shame and inferiority toward their own bodies (Crawford, Menger, and Kaufman 2014, 436). In contrast to these accounts however, some participants positioned religious restrictions as "traditional" practices and not something they themselves carried out today. As one Punjabi participant told us, "traditionally we are not meant to go to the temples . . . you don't do *puja* (prayer), but actually I don't worry about that . . . I think my mum follows it, but I don't." This account may suggest a change in religious practice following migration, however, it may also be reflective of modernisation or generational differences in relation to the continuation of restrictive religious practices associated with women and menstruation.

Nearly all women also described that sex during menstruation was strictly prohibited. Reasons for such restrictions on sexual activities included sex being "unhealthy," "harmful," and "dirty" when a woman is bleeding, and sexual abstinence being religiously sanctioned. For example, one woman said, "when it comes to religion, in Islam a man and a woman should not have sex when a woman is having their period, it is dirty, you are dirtying yourself" (Afghani). The impact of religious discourse on women's sexual practices was particularly evident among Muslim women's accounts, the majority of whom continued to avoid menstrual sex even following migration. In addition, menstrual sex was avoided as women considered it inappropriate for men to witness their menstruation "I never be near to my husband, this is a type of respect to him as a man. I don't like him to see something not good in me" (Iraqi). However, there were also exceptions to this, with a small minority of women stating that "sex is better during periods" (Punjabi) or that "it is not even an issue, having sex while I have my period" (Latina). These accounts suggest resistance to negative cultural discourses that position menstruation as unclean or disgusting, by both husbands, and participants themselves.

## IMPLICATIONS AND CONCLUSIONS

Across cultural contexts, constructions of menarche and menstruation were strongly tied to notions of ‘womanhood,’ interlinked with reproduction and emergent sexuality. Nearly all women who took part in the study discursively positioned menarche and menstruation as shameful and abject, requiring associated regulatory practices of silencing and concealment. Silencing menarche and menstruation acts as a reinforcer of the discursive positioning of a woman’s bleeding as a source of stigma (Johnston-Robledo and Chrisler 2013, 12), with material and intrapsychic consequences for women. Shame and silencing denied women the right to learn about the functioning of their reproductive bodies. As a result, women had no framework to make sense of their experiences at menarche resulting in negative attitudes toward their menstruation and poor knowledge of its link to fertility.

While there were a number of commonalities across cultural groups interviewed, there was also variation in cultural and religious discourse and practices. This was most evident in relation to culturally prescribed menarche celebrations, menstrual practices, restrictions and rituals, such as changes in diet reported by Tamil women and the avoidance of cooking described by Sudanese women. Furthermore, Muslim and Hindu women were more likely to describe religious rituals or restrictions associated with menses, compared to participants who followed other religions.

The findings of this study suggest however, that migrant and refugee women are not simply positioned within existing cultural discourses associated with menarche and menstruation, but can re-position themselves, variably adopting, resisting, negotiating, and tailoring discourses and practices associated with menstruation (Day et al. 2010, 238). While for some women the migration process facilitated such resistance or re-positioning, other women were still influenced by cultural discourse, particularly around disclosure of menstrual information to daughters. This suggests that a discourse of secrecy and silence, may be difficult to resist (Ussher et al. 2017, 1909) and new migrant and refugee girls and women need access to comprehensive menstrual support and education. Such information could be included alongside other sexual and reproductive health education, providing details about what menstruation is, its link to fertility and guidance on how menstruation can be celebrated and navigated in a healthy manner.

## NOTE

1. In this chapter the term “migrant and refugee” is used to describe voluntary migrants and people of refugee or humanitarian background, who have a cultural heritage different from the dominant Anglo Australian/Canadian culture.

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