

Bloody war: menstruation, soldiering, and the 'gender-integrated' United States military

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ABSTRACT

Against the backdrop of an unprecedented number of women deploying in a new array of roles in the so-called "global war on terror" and the official opening of combat arms units to women in the United States military, menstruation has served as a key idiom in debates about what it means for women to wage war. In this article, I explore what public curiosity about and military anxieties over soldier menstruation can tell us about the banal and bodily nature of women's militarization as a deeply affective, sensorial, and embodied process, and the tensions these anxieties reveal within liberal promises of a gender-integrated US military. Drawing on discourse analysis and ethnographic interviews, I examine efforts within US military medicine to hormonally regulate women soldiers' menstrual cycles as a matter of military operational concern, alongside public narratives by women soldiers who deny the significance of menstruation to the work of soldiering. I argue that both of these discourses enact a conflation between womanhood and menstruation in the debate over women's role in and at war, in a manner that circumscribes the possibilities of what we can apprehend – and feel – about war and soldiering as gendered experience.

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Introduction

On the question-and-answer website, Quora.com, where questions are asked and answered by its community of users, one forum has garnered nearly 30 thousand views since its creation in August 2016. Member 'Beth Divine' posted the question, 'What do female soldiers do when they get their periods?' In a response post, member 'Jessica Girard' addresses the question with the authority of personal experience, reporting that 'having my period in the field was really not as big a deal as many people assume.' With blunt practicality, she explains for the uninitiated, 'I would just change my tampon when going to the washroom. If no bathrooms were available, I would either bury my feminine waste, in the same fashion that I would for a poop, or I would put it in a zip-lock that comes in our ration packs and dispose of it with the garbage from my ration at the next opportunity.'¹ For Jessica and her curious public, menstruation in war matters as a concern of quotidian bodily management and discrete improvisation: of zip-lock bags, dirt holes, and buried waste. It is also at the intimate level of low-tech toileting that Jessica refuses the exceptionality of women at war implied in

Beth Divine's question. By casting menstrual blood as just another form of human waste, she asserts bodily equivalence – and thus equivalence in fitness for combat – between men and women soldiers.²

While Beth Divine's motivation for posing this question is unclear – perhaps she is considering enlisting or is merely curious about the logistics of menstruation in war – the timing of the forum is telling. In December 2015, just months before Beth Divine's post, then-United States Defence Secretary Ashton Carter announced the opening of all military services to women without exemption, lifting the 1994 ban on women service members serving in ground combat units.³ The decision to repeal the so-called combat exclusion policy was and remains controversial, and has reignited long-standing debates cast in the terms of physiological and psychological differences between men and women, impacts on military readiness and unit cohesion, military sexual assault, and the provisioning demands of accommodating women in combat, among others. These debates emblemize the tense and contested nature of what feminist scholars have called the 'feminization of military manpower' (Feitz and Nagel 2008) and the expansion of 'militarized femininities' (Enloe 1994, 2000).

Against the backdrop of an unprecedented number of women deploying in a new array of roles in the post-9/11 wars, the public exchange between Beth Divine and Jessica Girard suggests that women on the battlefield are 'not *soldiers* but *women soldiers*' (Sjoberg 2007, 83; emphasis in original). Their gender marks their identities, bodies, and presence in war in a manner that underscores the gendering of the construct of war itself (D'Amico 2007). Taken to be part of a broader concern for 'feminine hygiene' and a 'natural' fact of women's bodies (Martin 2001), menstruation, together with pregnancy, has served as a key idiom in debates about what it means for women to wage war (DeCew 1995; Jeffreys 2007; Oliver 2008). In the context of the post-9/11 US-led wars in Iraq and Afghanistan, debates around gender integration and menstruation have centred on concern for how irregular sanitary supplies, limited access to hygienic toileting facilities, conditions of extreme heat, and increased overall discomfort during menstruation may impact women soldiers' 'mission-readiness.' But as Beth Divine's post suggests, soldier menstruation also features in American popular imagination as a topic of stigma and curiosity: an embodied reality of women's war-making seen as both exceptional and thoroughly banal. As such, it serves as a powerful idiom through which the public imagines, in embodied, affective, and sensorial terms, what it means to be 'at war' as gendered experience. Yet, it also contributes the terms by which military voices like Jessica's seemingly flip the script in order to assert women's place on the battlefield.

In this article, I consider what this preoccupation with, curiosity about, and anxiety over soldier menstruation might tell us about the affective and sensorial nature of militarized embodiment as gendered experience. I explore how debates about women in combat hinge on the conflation between menstruation and womanhood, and the tensions this reveals within liberal promises of a gender-integrated US military. Scholars have explored the militarization of women's everyday lives (Enloe 2000, 2007; Sjoberg and Via 2010), the gender discourses that sustain hegemonic military masculinity and armed conflict (Basham 2015; Cohn 1993; Elshtain 1987; Sasson-Levy and Amram-Katz 2007; Woodward and Winter 2007), and the gender identities of women soldiers (Herbert 1998; Sasson-Levy 2003). Collectively, these studies motivate an inquiry into the embodied and bodily dimensions of women's militarization, particularly since

feminist research on the military as a gendered institution has rarely addressed menstruation of combatants (though see McCracken 2003a), and has not done so ethnographically. Everyday practices, bodily techniques, and metaphors of menstruation and menstrual care among soldiers are revealing sites for exploring militarization in its bodily, but also affective and sensorial, manifestations (cf. Dyvik and Greenwood 2016; MacLeish 2012, 2015; McSorley 2013). Drawing attention to a banal but also denigrated aspect of militarized embodiment, and doing so in relation to the understudied domain of women soldiers' experiences, may also offer new explorations into the 'extra/ordinary' nature of militarized embodiment (Wool 2015).

Drawing on discourse analysis and 8 months of anthropological fieldwork with US veterans of the post-9/11 wars conducted between 2016 and 2017, I explore two domains concerning soldier menstruation and menstrual care. The first involves the growing field of women's military health, and its production of bodily difference through anxieties over menstruation and the reproductive potential it signifies. Military efforts to hormonally regulate soldier menstruation seek to synchronize menstrual and reproductive cycles to the tempo and operational demands of post-9/11 global counterinsurgency. The second domain involves public accounts and apocryphal stories of menstruation in deployment, and the role such accounts serve in normalizing the place of women on the battlefield. While the US military positions menstruation as exceptional and an impediment to 'mission-readiness,' in the public sphere women soldiers assert that the significance of menstruation – its physiological realities and material inconveniences – gives way to the high-stakes work of soldiering so that, as one woman Marine put it to me, 'it's just not something we worried about.' By holding together these opposing perspectives – one that produces difference in order to regulate it and another that erases difference – my intention is not to adjudicate between them in order to somehow determine whether menstruation matters to soldiering or not. Rather, my point is to illuminate how, in both guises, the militarization of women's bodies hinges on the conflation between womanhood and menstruation, and how this conflation becomes the very grounds for debating women's place in war-making in deeply affective and moral terms. Taken together, the production and erasure of difference as ascribed to women soldiers reveal how bodily difference is partially subsumed yet incompletely absorbed by liberalism's promise of equality through intimacy with war violence.

The research on which this article is based draws on 20 semi-structured interviews and five focus groups with US active duty service members and veterans of the wars in Iraq and Afghanistan, including three focus groups with women veterans. Interview participants were men and women who represented all military branches and resided in North Carolina or Virginia at the time of interview. Interviews and focus groups explored gendered dimensions of participants' military service experiences, including encounters with medical care providers during and after service. Interviews were also conducted with 8 family members, primarily spouses and children, of military personnel. Research informing this article also draws on digital ethnographic fieldwork I conducted of online communities, as well as ethnographic observation conducted at military health conferences and trainings.⁴

It bears mentioning the methodological issues that can arise when researching menstruation in relation to masculinist institutions like the US military. In the course of conducting interviews about gender and military service, I was struck to find that women

frequently raised issues of hygiene, menstruation, and pregnancy in focus groups and interviews without prompting. It was this ethnographic observation that in fact inspired my interest in tracking the social meanings and embodied politics of menstruation in the military. While focus group participants openly noted their relative comfort being able to speak about such topics with other women veterans, and in a space coordinated by our research team (consisting of myself – a woman faculty researcher – and two women student-veterans), their willingness, and even enthusiasm, to speak about menstruation and pregnancy in this space seemed to stem in large part from their desire to deflate masculinist discourses about their own bodies. It was not unusual, for example, for women veterans to cite anxieties over soldier menstruation as evidence of the flimsiness of arguments against gender integration. In one-on-one interviews, when women were asked directly about menstruation, most spoke bluntly and practically about it as a reality of deployment life that they found their own ways of managing – little different, in this sense, from the ways they spoke about other deployment realities like unappetizing MREs (Meals Ready to Eat) or the lack of privacy. These conversations unfolded organically, in tandem with broader discussions about deployment and military service.

‘The hygiene issue’: menstruation as operational challenge in the US military

On 21 February 2013, the Centre for National Policy sponsored and hosted an online forum on ‘Women in Combat: The Changing Roles of Women in the Military,’ featuring Kayla Williams, a retired Army sergeant and Arabic linguist who deployed to Iraq.⁵ At the event, which was promoted as a discussion on the merits of the lifting of the ban on women serving in combat units in the US military, Williams raised common arguments against the repeal of the combat exclusion policy in order to systematically discredit them. After addressing concerns about physical readiness standards and contextualizing the issue of military sexual assault, Williams turned to debunking what she referred to as ‘the hygiene issue,’ remarking: ‘Women can use hormonal birth control to regulate or eliminate their periods during deployment. It’s just not that hard.’ Throwing back the concern onto those who have raised it, Williams said in a challenging tone: ‘What *about* the hygiene issue? Look, frankly I don’t even know what that means. People say this in this hushed tone as if the vagina is a secret. If women died without access to indoor plumbing, the human species would not have survived long enough to develop showers.’ In tackling ‘the hygiene issue’ at a high-profile forum on the topic of women in combat, Williams meant to defang a mainstream argument made by detractors of gender integration. Even as Williams overtly challenged the very validity of ‘the hygiene issue’ as a *thing*, her euphemistic referral to it – in a manner that required no explanation – suggests that this ‘issue’ has acquired a social life of its own. While soldier hygiene in the prevention of disease and the maintenance of health has been a long-standing concern for military medicine, Williams’ reference is undeniably gendered: this is a ‘feminine-hygiene issue,’ as critics of the repeal and others have phrased it (see, for e.g. Fredenberg [2015]). In the context of gender integration and the US military, the hygiene issue refers to biological and physiological realities taken to be distinctly ‘female.’

While referring to any number of aspects of gynaecologic, urogenital, and reproductive health and their associated ideas of bodily difference and behavior, the “feminine-hygiene issue” operates in military-related debates to construct a leaky, open, volatile, and

vulnerable female body against an unmarked, tightly regulated, and neutral (male) soldier body (cf. Oliver 2008). Folded into this diametrical construction is a wide range of metaphorical ideas of physiological and biological difference. In interviews, multiple women veterans described what they saw as their male leadership's' half-joking, but also paternalistic, naïve, and misplaced concerns for women's' uteruses 'falling out' in deployed environments characterized as unhygienic and austere, something which one woman Marine described as akin to earlier arguments that women should only ride bicycles side-saddle. Discussions of 'the hygiene issue' illustrate the hegemonic and often-euphemistic ways the body and embodiment are displaced onto women soldiers, whose capacity *as* soldiers is conflated with 'female hygiene' and thus marked by the excesses from which male soldiers are ostensibly unencumbered. Such arguments have a long history in debates concerning the place of women in war. Back in the 1990s, in his now infamous 'giraffe hunting' speech, then-Speaker of the House Newt Gingrich declared that women couldn't go into combat due to hygiene issues. Imagining the context of trench warfare, Gingrich stated that 'females have biological problems staying in a ditch for 30 days because they get infections, and they don't have upper body strength.' But, he averred, if combat 'means being on an Aegis-class cruiser managing the computer controls for 12 ships and their rockets, a female may again be dramatically better than a male who gets very, very frustrated sitting in a chair all the time because males are biologically driven to go out and hunt giraffes.'⁶ Like the conflation of men with the 'biological' impulse to hunt lanky game, the conflation of women with problems of 'female hygiene' illustrates the 'strict anatomical sex/gender system' that characterizes the binary understanding of 'male' and 'female,' 'man and woman,' on which modern military institutions are built (Yi and Gitzen 2018, 384).⁷

The idea of the female body as pathological or otherwise in need of constant maintenance is hardly particular to the military. Feminist scholars have written extensively on the construction of the porosity of the female body and of female sexuality as an uncontrollable seepage or flow (Grosz 1994; Kristeva 1982; Martin 1998). The seepage of menstrual blood in particular is freighted with potent social, symbolic, and political meaning. Scholars have pointed to the ways menstruation has been viewed as vile, dirty, and polluting (Delaney, Lupton, and Toth 1988; Douglas 1966; O'Brien 1981; O'Keefe 2006). Seen as doing 'both symbolic and practical harm' (McCracken 2003b, ix), menstruation and its products thus demand elaborate forms of 'menstrual etiquette' in order to protect others against impurities (Laws 1990). In exploring the politics of menstruation, others have shown how femininity and womanhood are not only problematically equated with menstruation, but also 'take for granted women's inferiority to men,' where menstruation itself 'may be interpreted as a sign that women are simply badly designed (worse designed than men, that is)' (Laws 1990, 3; Bobel 2010). One doesn't have to look far for examples of how the politics of menstruation play out in broader American public discourse outside the context of the military. In 2015, when Donald Trump wanted to dismiss Fox News host Megyn Kelly for treating him too harshly during a Republican presidential debate, he drew on familiar metaphors as a means to dismiss, discipline, and dehumanize her: 'There was blood coming out of her eyes, blood coming out of her wherever.'⁸

In the context of soldiering, concerns for menstruation and menstrual blood acquire distinct dimensions and operate as salient sites for debating what it means for women to do the work of war. Menstruation – and specifically, how it is to be handled in combat

zones – is characterized by the US military and military medicine as an operational problem: a challenge to ‘military readiness’ that has implications for the individual, unit, and mission. Chapter 3 of the US Army’s *Guide to Female Soldier Readiness*, entitled ‘Mission Impactors,’ notes that ‘Rapid and frequent deployments require a current high level of military operations and the combat readiness of every military member. Women have unique operational issues of menstruation and unintended pregnancy which can decrease a female member’s military readiness and affect her deployable status’ (United States Army Public Health Command 2010, 41). From the perspective of the US military, menstrual symptoms may compromise active duty hours and soldier deployability. Menstruation creates provisioning demands and tactical challenges, such as access to sanitary supplies and hand washing and toileting facilities, while also introducing new hygiene and health risks in the ‘austere, unclean conditions of the deployed environment’ (Trego 2012, 284), including genitourinary infections and toxic shock syndrome (Christopher and Miller 2007; Trego 2007). Menstruation also signifies women soldiers’ reproductive potential, and thus the risk of unintended pregnancies, disrupted deployments, and compromised human resources. Concerns for women’s menstruation as a ‘mission impactor’ highlight the operational challenges associated with the feminization of the military, and speak more broadly to tensions in the mainstreaming of gender in the armed forces globally.⁹

In less technical but no less influential terms, detractors have also argued that premenstrual syndrome (PMS) may have volatile effects on women soldiers’ performance. ‘The impact of PMS on unit effectiveness is compounded by the natural involuntary tendency of women living in close quarters to synchronize their menstrual cycles,’ writes Brian Mitchell (1998, 149), author of the book, *Women in the Military: Flirting with Disaster*. A *Huffington Post* article provocatively titled, ‘Elite Combat Troops Deeply Troubled by PMS,’ reports that a 2014 survey released by the Pentagon reveals that many Special Operations troops do not support the repeal of the combat exclusion policy (Vagianos 2015). The article includes comments made by several survey participants about women’s menstrual cycles specifically, and how PMS would affect women’s performance in combat. One E-6 Special Warfare Combatant Craft Crewman responded, ‘I think PMS is terrible, possibly the worst. I cannot stand my wife for about a week out of the month for every month. I like that I can come to work and not have to deal with that.’ Another Special Forces E-8 stated, ‘What about PMS and that time of the month? Do we just stock Midol and carry that around with us? There’s nothing good about that.’ And finally, an E-5 Navy Seal shared, ‘I have a wife. She’s very independent. But when that time of her month comes, she’s weaker.’ The monthly ‘burden’ of husbands is mobilized as a certain kind of experiential knowledge to justify exclusion of women from combat. The figure of the menstruating wife whose proper place is in the home works to shore up distinctions between public and private, masculinity and femininity, warfront and homefront, distinctions on which the military’s gendered myths of sacrifice depend (Pin-Fat and Stern 2005). Discourses of menstruation as operational concern thus run a wide gamut – from clinical and operational, personal and professional, to anecdotal and unapologetically misogynist – suggesting the ways a variety of discourses, ideologies, social worlds, and actors shape the role of menstruation in debates concerning women soldiers’ mission-readiness.

The framing of menstruation as operational challenge is common to critics and proponents of gender integration alike, with the former drawing on these arguments to legitimate women's exclusion, and the latter seeking to bring to light and address them in order to 'enhance a critical manning asset and to strengthen a valuable component of mission accomplishment' (Christopher and Miller 2007, 9). In the relatively nascent field of women's military health, research studies have emphasized how unique operational demands of the 'field environment' impact menstrual care, experience, hygiene, and health. They highlight the high tempo of field training exercises and military operations, the heat and weight of protective gear and equipment, and the 'environmental conditions that are inherent in the desert-like, unindustrialized settings such as sand, heat, and unsanitary conditions' of deployed settings in Iraq and Afghanistan (Trego 2012, 284). Several studies describe women's difficulties using menstrual products in deployment, including obtaining, changing, and disposing of menstrual supplies, and note that 'poor feminine and menstrual hygiene practices have been attributed to the extremely dirty environment and the lack of privacy during deployment' (Trego 2012, 284; Czerwinski et al. 2001; Wardell and Czerwinski 2001). Studies have suggested that military women perceive menstrual symptoms to be 'very to severely bothersome' while performing military duties (Powell-Dunford et al. 2003, 926).

Taken together, these research studies illustrate the blurring between what the military considers risks to operational readiness, and the symbolic policing of menstrual blood and waste and their polluting effects. For instance, women soldiers have reported in these studies as having trouble 'staying clean': of having to alter hygiene practices by washing hands less and using paper in place of menstrual pads, but also of having to carrying plastic baggies for prolonged storage of used products, and the inconveniences and embarrassment of having to launder soiled or stained clothing (Wardell and Czerwinski 2001).¹⁰ Women deployed during Operational Desert Storm reported concern that the difficulty of obtaining and disposing of menstrual supplies would tear down team efforts if they stopped to attend to menstrual needs (Wardell and Czerwinski 2001). What constitutes mission-readiness in military operations is therefore braided with broader cultural ideas about menstruation as a 'hygienic crisis' that must be effectively managed against stain, odour, and inconvenience in order 'to conceal evidence of menstruation and to prevent the embarrassment of others' (Roberts et al. 2002, 132). Not only is menstruation expected to be privately managed – the mechanics of hiding menstruation must also themselves be concealed (Martin 2001, 93; Laws 1990). This is arguably all the more challenging in deployed contexts where privacy in toileting can be a luxury.

Synchronizing to war: hormonal control and menstrual suppression

While the military's framing of menstruation as an operational challenge resonates with broader cultural constructions about menstrual pollution, these anxieties are also important for what they reveal about the female body's 'natural' potential to become encumbered in conditions of war. Characterized as a challenge to 'mission-readiness,' menstruation creates multiple problems for the military: problems that pertain to human resources, supply and provisioning, and deployment infrastructure. But these problems can also be read for the ways they illuminate the particular

operational challenges, strategic and tactical objectives, and embodied demands of post-9/11 counterinsurgency in Iraq and Afghanistan. The military's anxiety that menstrual pain may cause women soldiers to lose active duty hours or compromise deployability must be understood in the context of an already tightly stretched all-volunteer US military force that has seen an unprecedented pattern of prolonged and repeated deployments in the 'global war on terror.' Concerns over infrequent changing of tampons and sanitary napkins, as well as the concern for leaks and stains, also reflect the tactical nature of counterinsurgency doctrine in Iraq and Afghanistan, which requires the mobile vulnerability of riding in convoys or patrols for hours without stopping (MacLeish 2012). A prominent example in public conversation on the topic – that of the woman soldier who 'forces' a convoy to stop so that she can change her tampon, thus exposing herself and her unit to a roadside blast or enemy fire (see, for example, Ritchie 2012) – suggests that military concerns for menstruation both reflect and are shaped by the particular operations and tactics of post-9/11 counterinsurgency.

In light of these concerns, it is unsurprising that hormonal contraception for menstrual cycle control during deployment has been strongly advised by military healthcare providers and researchers (Christopher and Miller 2007; Powell-Dunford et al. 2011; Ritchie 2001; Trego 2007). Through the consistent use of an oral, transdermal, or vaginal ring contraceptive method, menstrual cycle control involves the use of exogenous hormones to manipulate the menstrual cycle to achieve a period acceptable for women. Use of oral contraception can provide predictability of cycles, decrease symptoms and bleeding, and when used continuously, can eliminate cycles altogether. The military views hormonal contraception as offering other collateral benefits to operational readiness: studies promoting contraception access and use among military women note that it is 'crucial,' not only for the benefits of menstrual suppression for deployment, but for the prevention of unintended pregnancy, 'particularly given the high prevalence of sexual assault in the military' (Holt et al. 2011, 1056).

Unlike other technologies of military medicine, it is important to note that menstrual suppression neither emerged from nor is unique to the military. US women have increasingly received messaging that menstruation is not required for good health (Jones 2011; Kissling 2013). In recent years, menstrual suppression has been marketed as 'a practice of pharmaceutical self-enhancement couched in neoliberal notions of choice and control' (Sanabria 2016, 5). While notions of choice and control do shape discourse around the US military's recommendation that women soldiers use menstrual cycle suppression, the biopolitical and organizational nature of modern military institutions means that these hormonal 'intervene at the level of biology to marshal soldiers as manipulable resources' (MacLeish 2012, 55; Foucault 1979). More than neutralizing the excesses of the female body, the use of hormonal contraception suggests how military medicine actively synchronizes women's menstrual cycles – and their reproductive presents and futures – to the operational tempo, strategic objectives, and tactics of post-9/11 counterinsurgency. Hormonal contraception is thus recruited to harmonize bodies into states of perpetual war-readiness, while women are also recruited into the work of war through the logic of hormonal control, illustrating a linkage between war and medicine that Terry (2017) describes as a relationship of 'mutual provocation.' In this way, menstrual and deployment cycles are fully harmonized.

Military discourses of mission readiness in post-9/11 counterinsurgency therefore recruit and militarize women's bodies through the logic of synchronization. In the next section, I turn to popular accounts and stories of soldiers' menstruation in combat zones to examine other embodied and affective dimensions of women's militarization from the ground up. While the US military presents women's menstruation as exceptional and a challenge to mission readiness, by contrast in public narratives women soldiers assert the insignificance of menstruation to the work of soldiering that they perform.

'The least worrisome kind of bleeding': normalizing menstruation in war

On the question-and-answer site, Quora.com, women soldiers' bodily experiences on deployment are a popular and recurrent topic. How do female soldiers manage going to the bathroom on the front line with male soldiers there? Why aren't female soldiers required to shave their heads? Do female military members get pregnant while deployed? Scattered among these are at least three variations on the same question: How do female soldiers deal with their periods on the front lines?

In response, 'Annika Schauer,' whose handle describes her as veteran of the US Armed Forces, laments: 'This question betrays serious deficiencies in understanding how several things work: chief among them, women, menstruation, and warfare.' In unembellished terms, she proceeds to explain to her presumably male civilian audience how menstrual care is done 'in the field':

Most (maybe nearly all) women who menstruate take care of monthly business at the same time as they take care of peeing and/or pooping. It is not a separate issue. You do it while your pants are down because it is convenient. Everyone I know pees and poops, so asking a woman how she attends to business is no different from asking a man. You take your pants down, pump/dump/wipe, and you're off.

She chastises the poster for their senseless question with a reminder of what 'really' matters in combat: 'Having your pants down in public is embarrassing, but it is something that soldiers just deal with. Because, you know, they're busy soldiering (killing people and shit).'¹¹

'Michael Peacock,' a US army veteran, offers another response to this question with a nearly visible eye roll: 'Yet another "how do female soldiers [x] on the battlefield" question.' In the patronizing tone of a schoolteacher, he launches into an explanation of life and death on the battlefield:

The first thing you need to understand is that bleeding is a common problem on the front lines, for *everyone* there. Bad things happen on battlefields and most of those bad things cause bleeding. A lot of effort goes into preventing and stopping bleeding of combatants. We have medics and wound dressings and tourniquets and intravenous fluid kits and all sorts of other methods and tools to treat combat-induced bleeding and to prevent death [emphasis in original].

Like 'Annika Schauer,' he concludes by putting a shallow civilian fixation on women soldiers' menstruation into perspective: 'Menstrual blood, which can be dealt with via the same sanitary products that civilian women use, or avoided altogether by various contraceptive interventions, is by far the *least* worrisome kind of bleeding a combat unit can possibly experience. Seriously. It's not a problem [emphasis in original].'¹²

While in the previous section I explored how menstruation has emerged as an operational concern in discourses of military readiness, here I examine the very public counterclaims made by women soldiers themselves (and, on occasion, by their male peers) about the unexceptional nature of menstruation and its irrelevance to the high-stakes work of soldiering. Forums like those on Quora.com, centred as they are on women soldiers' bodily processes, are particularly revealing, as they stage an interface between public imaginaries of military bodily experience and military insiders' felt duty to edify an uninformed public. In positioning themselves as having to educate an obtuse (male) civilian audience uninitiated to the realities of military service, deployment, and war, Annika and Michael reproduce a civilian/military divide and its cultural politics concerning intimacy with war violence (Wool 2015), even as their efforts are ostensibly spent to mitigate that divide. In doing so, they normalize the menstruating body in and at war by further conflating menstruation with womanhood, and rendering an equivalence between menstruation at home and menstruation in war. Annika does this by explaining in minute detail the banal bodily mechanics of menstrual care alongside defaecating and urinating, practices that 'nearly all women' do, regardless of whether they are civilian or soldier, at home or in a warzone. Michael, too, renders similitude between home and warzone through the menstruating body when he says that menstruation is dealt with the same kinds of sanitary products that civilian women would use at home, thus making unexceptional menstruation in war, and by extension, women soldiers *at* war.

But these posts also reflect a common convention that characterizes public accounts of menstruation among women soldiers, one marked by a particular affective economy. Here, shame, disgust, and curiosity – evoked by the 'dirtiness' and sexual seepage of menstruation – give way to the moral economy of military sacrifice: the stigma of menstruation is redeemed by the exceptional labour that menstruating soldier bodies perform. Consider how Annika and Michael both trivialize the public's fixation on women soldiers' menstruation by invoking the 'real' work of soldiering: in Annika's words, 'killing people and shit.' Michael, too, evokes normative values of martial violence when he equates, at least at the level of substance, menstrual blood to the penultimate substance of war-sacrifice: blood from traumatic combat injury. Yet, of the types of bleeding in war, menstrual blood should be the least concerning, says Michael. Michael asserts both similitude and hierarchy between menstrual blood and bloodshed in a manner that recalls McCracken's (2003b, 21) analysis of the cultural politics of blood and war:

Military heroism seems to demand bloodshed, or at least the possibility of bloodshed. But only one kind of blood is conventionally shed in war: men's blood. To be sure, women are hurt, killed, raped, and wounded in war, but women's wounds and women's deaths are usually classed under the heading of atrocities; they are the result of illegitimate violence that takes place outside the battlefield. Legitimate violence, authorized by a higher good that requires heroic struggle and sacrifice, is traditionally the domain of men in most cultures: only men should die in combat, the blood of war is men's bloodshed.

Michael normalizes menstruating soldiers by arguing that menstrual blood is just another kind of blood on the battlefield. Yet, in asserting its insignificance in comparison to the blood of combat, he falls back on cultural politics of war sacrifice that uphold the bloodshed of martial violence as the only true blood of war, in effect absorbing the issue

of bodily difference into a normative discourse on the transcendent value of military heroism. Annika and Michael furthermore mobilize a moral economy of war suffering that transforms public curiosity and disgust over soldier menstruation into gratitude for – and even guilt over – the unpayable debt of war sacrifice. In this way, shame is redirected away from the menstruating soldier body and back onto the fixated public, here cast as the uninformed civilian uninitiated by war.

Similar arguments appear in a YouTube video shared with me by a Navy veteran.¹³ The short film features four women veterans responding to claims that women should not serve in combat because of PMS. The opening title screen of the short documentary reads ‘Soldier’s Period,’ until the red apostrophe floats away, leaving the revised title to assert ‘Soldiers Period.’ A woman with long, dark hair struts out confidently in front of the camera, hands on her hips, with photos of herself in full battle gear in Iraq in the backdrop. Her name is Michelle Dallochio, and she tells us with brassy irreverence that, ‘When I was out working in Ramadi, Iraq doing Team Lioness with Marine infantry units, my gender, especially a bleeding vagina, didn’t matter. It was a matter of whether or not I could do my job – which I did – and whether or not I could kill somebody – which I can.’ Marine Corps veteran, Mariette Kalinowski, tell us: ‘I didn’t care if I bled. Or if the guys knew I was bleeding. I was only worried about the headache from my Kevlar helmet, the pain in my lower back where my flak jacket dug in, or making sure that the 117 pounds of 50 calibre bullets got onto the Humvee in enough time to make it out onto the convoy run.’ By mobilizing the experiential and moral capital of being in and at war, moral assertions about the work of soldiering, levied by women who have ‘been there,’ are meant to turn the stigma and shame of menstruating bodies onto those who would fixate on them. These moral performances are ballasted by intimacy with combat as a ‘normative martial violence’ (Millar and Tidy 2017) seen to supersede the experience and importance of nearly all that is possible in the sphere of the civilian.

Studies of militarized socialization and embodied militarization – of the disciplinary processes through which bodies are made into resources of state-authorized violence – have often taken military training as their classic site of analysis (Foucault 1979; see, for e.g. Hockey 2002; Newlands 2013). In staging public dialogues between a curious public and women soldiers, question-and-answer websites and YouTube videos like these suggest that militarization also occurs through forms of boundary-work, where distinctions between ‘civilian’ and ‘military’ are policed; in this case, through the affective economy of menstruation. They also appear as the spaces where we can observe the militarization of gendered subjectivities as a performative process.

In bringing to light soldiers’ public narratives, my point here is not to adjudicate different claims concerning women’s menstruation on deployment to discern whether or how menstruation is significant to the work of soldiering. Rather, it is to recognize how, just as with military medicine’s concerns for mission readiness, arguments for women in combat conflate menstruation and womanhood. In that conflation, menstruation serves as the terms for debating women’s place in war, while also operating as a central lens through which the US public *imagines* what it is ‘to be at war’ as a banal and bodily process. At the same time, affect surrounding menstruation becomes the very means through which women’s bodies and subjectivities are militarized: Annika, Michelle, and Mariette displace the disgust and shame of menstruation by asserting the seemingly impeccable moral value of the sacrifice they perform. In the breach opened up by

public curiosity, the affective moral economy of war rushes in to normalize the menstruating soldier through higher claims to honour, sacrifice, courage, and what 'really' matters in war.

Weaponized tampons

The presence of women's menstruating bodies in combat is not only normalized in popular accounts. At its extreme, it becomes the means for new kinds of weaponization. Consider an email with the subject title, 'Tampons come to the rescue in Iraq!' which circulated widely on the Internet several years ago. While unverified, it has made its rounds on military-related listservs. Accounts suggest that it was first posted in July 2004 to a message board hosted by the Houston Marine Moms, a group that sends care packages to deployed service members. The email is a thank-you note to the Houston Marine Moms written by a mother on behalf of her Marine son, who received one of the group's care packages while deployed in Iraq. The thank-you note explains how, according to the son, another (male) Marine mistakenly received a 'girl care package.' It goes on to describe what some Marines proceeded to do with its contents in a moment of boredom, including attaching a pair of 'panties to an antenna so it blew in the wind like a windsock' (Mickelson 2007).

The thank-you note recounts how, while out on patrol one day, their convoy was ambushed and a Marine was shot. The mother writes that her son 'said the wound was pretty clean, but it was deep. He said they were administering first aid but couldn't get the bleeding to slow down.' Almost predictably, the tampon comes to the rescue. 'My son said they put the tampon in the wound. They successfully slowed the bleeding and got the guy medical attention. When they went to check on him later the surgeon told them, "You guys saved his life. If you hadn't stopped that bleeding he would have bled to death."' The mother signs off her email in gratitude: 'My sister says that she doesn't believe in mistakes. She said that God had a plan all along. She believes that female care package was sent to save our Marine. Either way ladies, our efforts have boosted the morale of many Marines, provided much needed items for our troops, AND saved the life of a Marine!'

This account of a repurposed 'girl care package' is part of a broader genre of war esoterica concerning the bizarre uses to which tampons have been put in battle, from the time of Vietnam to the global war on terror. In interviews, I was told that tampons are carried in medical kits and used on bullet wounds, not only because they are highly absorbent, but also because they are sterile, conveniently packaged, and include a string that aids easy removal. While the story of the saved Marine is often positioned as a story about Marine ingenuity, it is also most prominently a story about the tampon: it is the tampon that doesn't belong, yet which manages to 'come to the rescue in Iraq.'

My point here is less about the authenticity of these accounts or whether tampons have in fact been used in combat medicine, than about the ways such apocryphal – or at least mythified – stories work to militarize women's bodies and subjectivities. The narrative of the unleashed powers of the militarized tampon is a common one, and even appears in arguments that justify the place of women in combat. On Quora.com, 'Dallas McKay' argues that it's easy for women soldiers to manage their periods, adding: "And for the record, tampons and pads are damn handy on a battlefield...A pad makes an amazing

pressure dressing. A tampon is perfect for a sucking chest wound.' The tampon becomes the protagonist in a rags-to-riches tale: a humble piece of sanitary technology – discretely tucked away in the furthest corner of bathroom cabinets and in the deepest of purse pockets – attains transformation and redemption in the environment of war, elevated to the status of combat medicine. As such, it serves as a kind of parable of gender integration itself: women denied a place in combat become vital assets in war, just as the tampons that travel with them become unexpected and life-saving technologies on the battlefield.

Sex and scent: the insistence of gender

The issue of menstruation as the grounds for debating the place of women in combat can tell us much about how arguments in favour of gender integration have been largely cast in terms of liberal notions of 'equality' as premised on 'sameness' and the fantasy of disembodied individuals (cf. Brown 1995; Scott 1988; Winnubst 2006). Yet the cultural politics of menstruation reveal contradictions within liberalism between sameness and inclusion, with military medicine producing difference as conflated with womanhood, and women soldiers denying the relevance of menstruation to soldiering. As I suggest in the following ethnographic accounts, these contradictions become strikingly evident in the practical management of difference as inscribed onto women's menstruating bodies.

While hormonal control has been widely advocated in the field of women's military health, interviews revealed that practical access to these technologies involved forms of gatekeeping around sexuality and gender. A veteran of the Marine Corps, Karen explained how she decided to seek options for menstrual suppression in preparation for her deployment to Afghanistan in 2009. Seeking to get an adequate supply of oral contraceptive pills to bring with her, she explained: 'I tried to get hold of the female corpsman or medical officer, but the Chief Hospital Corpsman answered the phone. I told him what I wanted.' Expecting that she wouldn't have any difficulty getting a prescription since menstrual suppression had been suggested at a women's pre-deployment training session, Karen was struck by the Chief's response to her request. 'He said, "Well, what do you need birth control for unless you're planning on having sex in-country?" And I was like, "That's not why I want birth control." And he goes, "Well, there's no other reason for it."'

Military concerns for menstruation are not only about the operational challenges of bleeding in combat, but also about the reproductive capacities of women. As mentioned earlier, the US military views hormonal contraception as useful, not only for menstrual suppression, but also for the prevention of unintended pregnancy. Military regulations consider pregnancy a medical condition that makes a soldier non-deployable, and if a pregnancy occurs during deployment, service-specific regulations and instructions guide the policy on evacuation. Yet when hormonal suppression of reproductive capacities makes sexual freedom possible for women soldiers without compromising their deployability, it generates new anxieties. The Chief's assumption – that birth control would sanction the (heterosexual) sex that official policy technically prohibits in theatre – reflects multiple connotations and contradictions that are not centrally about the long-standing concern for venereal disease that has characterized military control of male soldier populations (Enloe 1989; Levine 2013). Rather, they illustrate two prominent anxieties that have featured in debates about gender

integration: first, sex between men and women soldiers and its presumed impacts on 'unit cohesion'; and second, pregnancies that compromise mission-readiness. While the Chief was evidently unaware of the use of hormonal suppression in support of mission-readiness, he was also unable to reconcile the use of oral contraception for the prevention of pregnancy with the notion that military women might be (hetero) sexually active while deployed. The military's desire for women's hormonal cycle control becomes an exercise in contradiction: the military cannot suffer the provisioning inconveniences or operational liability of either a menstruating or pregnant woman soldier, but neither can it have her on the oral contraception feared to sanction her sexual freedom in a gender-integrated military. In these confluences of gender and sexuality, and the feared blurring between performance enhancement and pleasure, the militarization of women's bodies through hormonal regulation bumps up against trenchant ideologies of sex and gender.

Disruptions to women's militarization are also evident in how other kinds of actors police the boundaries of the military and the role of women. The spouse of a retired air force officer, Lisa explained her reservations concerning the repeal of the combat exclusion policy by invoking a particular sensorium of being at war:

So women in combat: I personally have an issue with it because, well, if you're a woman and you're hiking and you're out in the woods and it's your time of the month, I can smell you. Well, guess what? If you're deploying with my husband in a heavy-duty war zone, I don't want the enemy smelling you. They capture my husband, they behead him. They capture you as a woman, there's a lot worse they could do before they could ever behead you.

As a military spouse and veteran herself, Lisa occupies multiple positionalities in articulating the boundaries of the military's inside and outside. In policing these boundaries, menstrual scent – which she assumes to be pre-eminently knowable by an enemy other – disrupts the 'sanitized sensorium' (Ameeriar 2012) of the ostensibly inodorous male soldier. Lisa's affectively charged comments cast the menstruating woman soldier as not only repugnant, but also as compromising the corporate body, in a manner that recalls the role of smell in the exclusion of immigrant bodies from the body politic (Ameeriar 2012; Manalansan 2006). The woman soldier is a liability and a threat, not only because her presence on the battlefield confuses ideological distinctions between protector and protected (Pin-Fat and Stern 2005), but because in the most base and bodily of terms, her smell promiscuously 'reveals' her to the enemy, jeopardizing others in the process. Smell becomes a marker of inclusion and exclusion, of which bodies can soldier and which cannot. Like Karen's account of the difficulties accessing menstrual suppression within the institutions of military medicine, Lisa's description of menstrual scent illuminates disruptions to women's militarization along ideas – and smells – of bodily difference.

The affective and moral economy of blood and war

On 24 January 2013, on the day when then-Secretary of Defense Leon Panetta rescinded the ban on women in combat, the *Los Angeles Times* published an opinion piece by veteran LA Times writer Patt Morrison. Brandishing the snappy title, 'You Go, Military Girls – to the Front Lines,' the piece features a photo of Sgt. Sheena Adams, Lance Cpl. Kristi Baker, and hospital corpsman Shannon Crowley posing together at a Marine

forward operating base in Afghanistan. They lean jauntily on one another in full gear, Sgt. Adams with one hand behind her head, her elbow resting on her friend and a rifle in her hand. It's a cheeky pose full of wide smiles.

Morrison, who makes clear her support of the lifting of the combat exclusion ban, recounts Newt Gingrich's comments about women in combat from the 1990s. She then calls him out on his logic:

Gingrich prides himself on being a historian. He should know, then, that it was American frontier women who broke the sod and tilled the soil alongside their men, who hunted when they had to and wore themselves out in drudgery, working to exhaustion on chores that would have taxed any man, who struggled through the agonies of childbirth and soldiered on, as this country was settled. But heaven forbid that women, with all their messy lady parts, should be assigned out there on the front lines – so much ickier to contemplate menstruation than shrapnel-shredded limbs or harrowing head wounds (Morrison 2013).

In terms familiar to those we've encountered in this article, Morrison draws on an affective and moral economy of women's sacrifice and labour for the nation – including the literal labouring of reproduction – to counter arguments against the place of women in combat. In doing so, she borrows from the metaphorical power of blood as the penultimate substance of both war sacrifice and childbirth in order to undermine Gingrich's – and the public's – shameful preoccupation with 'messy lady parts.' In conflating the potency of womanhood with social and biological reproduction, Morrison asserts equivalence between the blood of death and the blood of life, justifying the place of women in war while casting aspersions on those who would forget this 'history' of the nation.

The growing literature on militarized embodiment has made critical inroads into the study of the contradictions and tensions of vulnerability, injury, and trauma in the contexts and aftermaths of war-making (Dyvik and Greenwood 2016; see Ben-Ari 1998; MacLeish 2012; McSorley 2013; Messinger 2009, 2010; Wool 2015). Menstruation in soldiering expands on these concerns by considering the role of banal bodily processes in the affective, embodied, and sensory manifestations of militarization as gendered experience. Catherine Baker (2016) argues that 'to take seriously the military institution's power in shaping the bodies that constitute it' requires 'acknowledging the dynamic of identification and indeed desire that goes into producing bodies and selves that can and will take part in the ultimate task of war, the destruction of other bodies.' We have seen how menstruation and menstrual care – bodily processes seen as both exceptional and banal, stigmatizing and powerful – can serve as unexpected sites for dynamics of identification and desire.

Morrison's claims render moral equivalence between men and women's labour and sacrifice across the domains of homefront and warfront, reproduction and destruction, and they do so through the potent metaphor of blood. As such, Morrison's narrative resonates with the ways advocates of gender-integration and women soldiers purposefully conscript and re-script the meanings of menstrual blood and menstruation, borrowing the gendered politics of blood and war sacrifice in order to counter public curiosity about and anxiety over soldier menstruation. Yet in doing so, women's soldiering becomes self-referential, as women's own narratives work to counter ascriptions of

difference by defining war and women's place in it *through* metaphors, affects, and technologies of menstruation, as well as through the hegemonic value of martial violence.

There is something significant to be gleaned, moreover, from the public fixation on soldier menstruation, and the conviction in the American public imagination that menstruation will somehow offer *the* insight into what it means for women to soldier – a peek behind the veil hung between civilian and military, between those initiated to war and those who are not. Much as the idiom of 'combat' appears self-explanatory and often remains unquestioned in public and scholarly imagining in ways that reproduce the myth of heroic soldiering (Millar and Tidy 2016), the focus on menstruation as a pinhole view onto the experience of women in war suggests a domesticated imagination of war-making and its costs. I use the term 'domesticated' multivalently here, to mark how the labour of war-making is gendered, but also how this imagination of war is confined to intensely 'private, disaggregated experiences, that occur beyond the wider framing of any salient national, political or historical meta-narrative' (McSorley 2012, 52). In this process, debates about menstruation and soldiering casts the problem of menstruating bodies in places of global counterinsurgency in the terms of supply and provisioning, personal discomfort, hormonal control, and hygienic practice, rather than in the terms of invasion, occupation, and empire. They circumscribe the possibilities of what we can apprehend – and feel – about war and soldiering as gendered experience.

Notes

1. <https://www.quora.com/What-do-female-soldiers-do-when-they-get-their-periods-on-the-front-lines>. Accessed 27 September 2019.
2. I use the term 'soldier' to refer broadly to enlisted military service personnel serving in combat or in combat support roles. While I recognize that this term privileges the US Army, here I use it strategically to reflect colloquial speech. I otherwise indicate the military branch of specific individuals.
3. The US officially deployed women soldiers to a combat zone for the first time in the 1991 Gulf War. In 1994, the Department of Defense technically barred women from ground combat jobs and from being assigned to units below the brigade level whose primary mission is to engage in direct combat on the ground. Advocates have celebrated the repeal as a case of policy catching up with reality, for in spite of official restrictions, over the past two decades women service members have *de facto* found themselves serving in combat and combat support roles, in part because the distinction between 'rear' and 'front' is increasingly untenable and artificial given shifts in modern warfare.
4. This article is also informed more broadly by ongoing ethnographic fieldwork exploring the uptake, use, and embodied effects of psychoactive medications in deployment.
5. Williams is also the author of *Love My Rifle More Than You: Young and Female in the US Army*, an autobiographical account that details her life and experiences in and out of the military. She has been a public and vocal supporter of women's service in combat.
6. <https://www.nytimes.com/1995/01/19/us/gingrich-s-piggies-poked.html>. Accessed 15 October 2019.
7. Given that military institutions are often built on stark and dichotomous constructions of 'male' and 'female,' scholars have suggested the potential for trans bodies to expose the constructedness of this sex/gender system and to disrupt the militarization of gender. As Yi and Gitzen (2018, 388) write with respect to trans bodies in the South Korean military, 'Bodies, like gender, are fluid, and when set against an anatomical deterministic model of sex/gender, transitioning is itself a military transgression.'

8. <https://www.cnn.com/2015/08/08/politics/donald-trump-cnn-megyn-kelly-comment/index.html>. Accessed 15 October 2019.
9. This mainstreaming is evident, not only in the widespread inclusion of women into the armed forces around the globe, but in the international commitment to women's participation in peace and security, as advanced by the Women, Peace and Security resolutions as part of the United Nations agenda.
10. The very notion of 'menstrual hygiene' is contested, with feminist scholars arguing that menstruation was made into a hygiene concern by the feminine hygiene industry (Brumberg 1993; Kissling 2013).
11. <https://www.quora.com/What-do-female-soldiers-do-when-they-get-their-periods-on-the-front-lines>. Accessed 3 October 2019.
12. <https://www.quora.com/What-do-female-soldiers-do-when-they-get-their-periods-on-the-front-lines>. Accessed 3 October 2019.
13. <https://www.youtube.com/watch?v=pvwbG7luDDA>. Accessed 3 October 2019.

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