

The Female Body in Catholic Theology: Menstruation, Reproduction, and Autonomy

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Female bodies as sexual and reproductive are subject to much scrutiny in Western societies and the church. Mysteriously missing from discourses related to such scrutiny is the reality of menstruation and its place in theology and females' lives. From within a feminist theological perspective, this article aims to recover menstruation and menstrual awareness, and to advocate for the positive possibilities of widespread recognition and acceptance of, and engagement with, these realities to advance female presence in sexual theology and related discourses. In engaging contemporary social discussions, Jewish and Christian histories of menstruation, contemporary sexual theologies, and varied feminist theologies, this article proposes a robust view of menstruation in the sexual lives of faithful females.

Keywords: menstruation, sexuality, females, Catholic, *mikveh*, menstrual awareness, self-determination

Introduction: Female Bodies

MENSTRUATION is at once a physical marker of religious status and a socially taboo reality; women have long navigated the social and religious boundaries around menstruation and their bleeding bodies. From the purity and holiness codes in the book of Leviticus to modern papal statements and contemporary movements, such as Purity Pledges/Balls and Pure Fashion, the place of menstruation in females' sexual and reproductive lives, and the place of the menstruant herself, have been both personally and communally circumscribed.

Contemporary discourses pertaining specifically to female bodies loom large in both Roman Catholic feminist theology and other feminist disciplines.

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Notions of purity are particularly prevalent in these discussions. The broad context for this article is an investigation into the various histories, and social and religious constructions, of purity in the Jewish and Christian traditions, with an eye on contemporary Roman Catholic theologies. The more specific focus is on the place of menstruation, as a historically significant aspect of sexuality, in Catholic sexual theology. In the religious and social history of purity in Western cultures, menstruation has figured variably over time and context.

I will address the mysterious lack of attention to menstruation in contemporary Roman Catholic teachings and theology pertaining to females, reproduction, and sexuality. I understand menstruation as a biological phenomenon that is individually experienced by most females and socially constructed in context. Females' experiences of menstruation are varied and therefore not subject to universal statements, even while the biological reality is relatively uniform. Not to romanticize menstruation, which often brings discomfort, pain, anxiety, and stigma, females still experience it as a group, as a marker of sexuality and fertility, and as sign of creation in the image of God. That menstrual blood is the visible presence of these phenomena invites exploration of its place in Christian theology.¹

I begin with an overview of constructions of the female body in Western culture, particularly North American culture, and then engage contemporary theological and other constructions of the female body. Following an exploration of menstruation in Jewish and Christian history, I advocate for menstrual awareness, at times also referred to as fertility awareness and menstrual hygiene awareness; although these terms are not completely interchangeable, they are interconnected and cover many of the same concerns. By menstrual awareness I mean access to and application of information about fertility through the life cycle for individual persons in their particular circumstances. This information includes basic menstrual cycle awareness, individual bodily awareness of menstrual patterns, how pregnancy occurs, and when pregnancy is most likely to occur within one's cycle and life course. Menstrual awareness typically also includes information about different contraceptive methods: how they work to affect fertility and how they are used. Both

¹ Although there are obvious and worthy explorations to be undertaken regarding menstrual blood, the blood of Christ, and the blood of violence, such exploration is peripheral to this particular discussion. For perspectives on these issues, see Tina Beattie, *God's Mother, Eve's Advocate* (London: Continuum, 2002), 19–98; Kristin De Troyer, Judith A. Herbert, Judith Ann Johnson, and Anne-Marie Korte, eds., *Wholly Woman, Holy Blood: A Feminist Critique of Purity and Impurity* (Harrisburg, PA: Trinity Press International, 2003); Joan R. Branham, "Bloody Women and Bloody Spaces," *Harvard Divinity Bulletin* 30, no. 4 (2002): 15–22.

females and males benefit by understanding menstruation and fertility through the life span, and awareness fosters communication between partners. Awareness also empowers females to challenge stereotypes and social structures that negatively impact menstrual health, while nurturing healthy sexual development.²

I advocate for menstrual awareness as a means of bridging a gap between two contrasting schools of thought regarding female sexuality and morality. One school of thought champions autonomous determination, individual conscience formation, and choice among females as the primary ethical standards for sexual activity. A second school of thought champions a more communally iterated and regulated purity status, which controls sexual self-awareness and normative sexual behavior. While both positions have positive and negative dimensions, neither satisfactorily accounts for menstruation, its social context, and its place in female sexuality and sexual activity.

It is well to recognize at the outset that, first, attention to menstruation and reproduction here does not suppose that those characteristics of sexuality wholly define females. Rather, menstruation and reproduction are biological processes typical of most females as part and parcel of their sexuality, experienced variously over their life spans. These processes do not negate the importance of desire, pleasure, and mutuality in female sexual well-being so much as accompany them in relational expression. In pointing out this view of menstruation and sexuality, I hope to avoid a dimorphic binary that underscores gender and sex roles that diminish actual human persons and capacities. One need only turn to the thoughts of one of the most influential thinkers in Christian history to grasp the difficulty of such a narrow construction. Regardless of the contextual realities of his thoughts and intentions, Thomas Aquinas' infamous perception of females as inferior to males, based upon their physiology and passive role in procreation, has had negative, lasting effects for females.³

Second, attending to menstruation and advocating for menstrual awareness is not equivalent to condemning birth control: hormonal, medical, or barrier. Rather, it is to invite an intimate awareness of the female reproductive body in contemporary culture. Regardless of females' ultimate choices for reproductive control, at the very least we ought to be comfortable with

² Institute for Reproductive Health, Georgetown University, <http://irh.org/>.

³ Thomas Aquinas, *Summa Theologica* I, q. 92, a. 1. The influence of this perception of females in the Catholic theological tradition is outlined and critiqued by Aline H. Kalbian, *Sex, Violence, and Justice: Contraception and the Catholic Church* (Washington, DC: Georgetown University Press, 2014), 30–36.

menstrual bodies as bodies. The inclination to shy away from such awareness breeds and fosters disdain for menstruation and, ultimately, menstruating females.

Third, I refer here to menstruants as female. I recognize that transgender males might choose to maintain their female reproductive organs upon transition to male, or that male-identifying persons with female physiology might menstruate. Sex identification itself is fraught with ambiguity not only for female and male sexed persons, but also for persons whose physiology and self-identity fit neither of these categories. These personal realities clearly challenge traditional and historical perceptions of dimorphic gender and sex, and the roles we occupy in contemporary society. For the purposes of this article, a female body had, has, or will have the biological capacity to menstruate. This perception is complicated by intersex and/or transgendered identities and sex identification but is, in light of the point of this article (to reclaim menstruation within a feminist theological construction of female sexuality), a necessary step. Sorting out the complexities above merits a distinct discussion.

Female Bodies in Western Social Context

Among other things, contemporary female bodies are sexual, reproductive, and public. In the first instance, there are public female sexual bodies about which legislation, policies, and guidelines are crafted. For example, in Canada, the long-disputed reality of abortion remains without formal legislation to monitor its practice, since the Supreme Court of Canada declared the then-existing law unconstitutional in 1988.⁴ In the year following the Court's decision, the sitting Canadian government (Mulroney/Progressive Conservative) proposed new legislation to the House of Commons, which was defeated. In the ensuing years, no federal parties have attempted to draft or propose a bill, even while enjoying governing majority status in the House of Commons. Although abortion is medically regulated by the Canadian Medical Association, the resources and access provided by the provinces and territories determine what services women are able to receive.⁵ Private access to abortion is available in some provinces

⁴ Howard A. Palley, "Canadian Abortion Policy: National Policy and the Impact of Federalism and Political Implementation on Access to Services," *Publius: The Journal of Federalism* 36, no. 4 (2006): 570, <https://academic.oup.com/publius/article/36/4/565/1899741/Canadian-Abortion-Policy-National-Policy-and-the?searchresult=1>.

⁵ *Ibid.*, 566–71. Witness also the public regulation of female bodies in the Canadian Assisted Human Reproduction Act, 2004 S.C. 2004, c. 2, current to September 27, 2016, <http://laws-lois.justice.gc.ca/eng/acts/a-13.4/>.

for women who wish to avoid the public system, but the cost is prohibitive for many. In short, while abortion is unlegislated in Canada, it certainly still enjoys a good deal of popular discussion among politicians and the public, and by extension places female bodies in the spotlight.

Perhaps more insidious and influential than overt political discourses over female bodies in contemporary Western culture, however, is the social monitoring of female bodies, situated within ubiquitous public scrutiny and display. Consider, for example, the following contemporary social phenomena and ensuing public commentary. First is the sexualization of girls and women, whereby females are introduced early to sexuality or reduced to their sexuality, typically in some form of commodification,⁶ all while they are subject to social and religious campaigns for female sexual purity.⁷ Female bodies are undeniably monitored as sexual entities, often from within conflicting social messages, which create dilemmas of sexuality and sexual expression.

Another example of social monitoring of female sexuality is the sexual shaming of females who are targeted as sluts when openly sexually active or even when perceived to be sexually active (as in the practice “slut-shaming”).⁸ Unlike their male peers, females who choose sexual activity for themselves, particularly outside of marriage, are targeted for social ostracizing, while males are built up for their sexual prowess.⁹ In contrast to such sexual shaming is the advocacy of female sexual emancipation and empowerment in sexual self-determination: women taking control of their sexual lives, as they desire, with little regard for external social perceptions.¹⁰

⁶ American Psychological Association, Task Force on the Sexualization of Girls, *Report of the APA Task Force on the Sexualization of Girls* (Washington, DC: American Psychological Association, 2007).

⁷ As an example, consider the Purity Ball, wherein a girl pledges her sexual purity to her father until she marries. See “What Is a Purity Ball?,” Generations of Light Ministry, <http://www.generationsoflight.com>.

⁸ Regarding “slut-shaming,” the parlance in popular discourse is as contentious as the practice. See *Urban Dictionary*, s.v. “slut-shaming,” <http://www.urbandictionary.com/define.php?term=Slut+Shaming>.

⁹ There seems no equivalent derogatory word for males who simply engage in sexual behavior; dictionaries tend to associate “slut” specifically with females, e.g., *Oxford English Dictionary*, s.v. “slut” (n), www.oed.com. The term “fuck boy” for males, although also derogatory, does not denote simple sexual activity so much as a male engaging in manipulative, noncommittal, and generally misogynistic sexual behaviors. See *Urban Dictionary*, s.v. “fuck boy” (n), <http://www.urbandictionary.com/define.php?term=fuck+boy>.

¹⁰ Jessica Valenti, *The Purity Myth: How America’s Obsession with Virginity Is Hurting Young Women* (Berkeley, CA: Seal Press, 2009).

Generally, such control rejects the double-standard notion that males who are sexually active “sow wild oats,” while females who are sexually active “give away their virtue.”

Further, public discussions about the practice of breast-feeding in public abound, concurrently with the sexualization of females (their breasts, in this case),¹¹ as a means of monitoring female reproductive bodies. Contentious discussions among mothers about whether to breast-feed at all complicate the notion of the sexual female body as socially monitored.¹² And current social expectations of ideal mothering and the health benefits of breast milk for babies work to diminish females choosing not to breast-feed their children. Meanwhile, previous generations of physicians did not actively encourage women to breast-feed (if they did not actively discourage them), during periods in which pregnancy and birth were handled solely within a patriarchal medical model. Women’s health groups advocating for nonmedical and nonmedicated childbirth, for mother-child contact and bonding immediately at birth, and for preconception and prenatal education shifted perceptions of breast-feeding from “uneducated” to “healthy and natural.”¹³ Yet, with the sexualization of female breasts comes the “Free the Nipple” campaign to stop censorship of female breasts online and in public where no such censorship exists for males.¹⁴ Beneath the overt double standard in relation to sexed bodies lies the social angst around the female breast that both nurtures and arouses.

¹¹ Brad Pitt, “Photo of Angelina Jolie Breastfeeding,” *W Magazine*, November 2008, cover, <http://www.wmagazine.com/story/when-brad-pitt-photographed-angelina-jolie-for-w-magazine>; Annie Reneau, “What’s Hard about Covering Up to Breastfeed?,” *ScaryMommy* (blog), <http://www.scarymommy.com/articles/whats-so-hard-about-covering-up-to-breastfeed-in-public?section=feeding&u=unknown>; Amber Hinds, “Why I’m Glad Someone Told Me to Stop Breastfeeding in Public,” *Huffington Post*, April 17, 2013, http://www.huffingtonpost.com/amber-hinds/breastfeeding-in-public_b_3095644.html.

¹² Hanna Rosin, “The Case against Breastfeeding,” *Atlantic Monthly*, April 2009, <http://www.theatlantic.com/magazine/archive/2009/04/the-case-against-breast-feeding/307311/>; Kate Evans, “The Case for Breastfeeding Is Clear,” *The Guardian*, July 5, 2010, <http://www.theguardian.com/commentisfree/2010/jul/05/breastfeeding-benefits-child-rearing>.

¹³ Anne L. Wright, “The Rise of Breastfeeding in the United States,” *Pediatric Clinics of North America* 48, no. 1 (2001): 1–12; Ellen H. Starbird, “Comparison of Influences on Breastfeeding Initiation of Firstborn Children, 1960–69 vs. 1970–79,” *Social Sciences Medicine* 33, no. 5 (1991): 627–34.

¹⁴ Lina Esco, “Facebook Wages War on the Nipple,” *Huffington Post*, June 10, 2014, http://www.huffingtonpost.com/lina-esco/facebook-war-on-nipples_b_4548832.html; “Free the Nipple,” *Facebook*, <https://www.facebook.com/freethenipple?fref=ts>.

Finally, there is the consumer juggernaut built upon so-called feminine hygiene:¹⁵ the regulation of menstruation and female reproductive cycles as social taboos, all while encouraging females to hide these realities with nifty packaging, thinner padding, and deodorant spray.¹⁶ Even with a recent evolution toward “period positive” messaging,¹⁷ companies co-opt females’ experiences of menstruation to market ecologically unfriendly and potentially harmful menstrual products.¹⁸ Each of these phenomena reflects surveillance and judgment of female sexual and reproductive bodies in broad cultural contexts, which both circumscribe and declare-liberated female sexuality and well-being.

Constructed Female Bodies

Female sexual and sexualized bodies are constructed in multiple ways. One construction posits that females are autonomous and self-determining, and advocates for unimpeded choice regarding sexual expression, bodies,

¹⁵ In the marketplace: Emma Johnson, “Can These Panties Disrupt the \$15 Billion Feminine Hygiene Market?,” *Forbes*, May 28, 2015, <http://www.forbes.com/sites/emma-johnson/2015/05/28/can-these-panties-disrupt-a-15-billion-feminine-hygiene-market/>; Stephanie Levitz, “Conservatives Remove Federal Tax on Feminine Hygiene Products as of July 1,” *The Globe and Mail*, May 28, 2015, <http://www.theglobeandmail.com/news/politics/conservatives-remove-federal-tax-on-feminine-hygiene-products-as-of-july-1/article24667909/>. I contrast the term “feminine hygiene” with “menstrual hygiene,” a more globally focused concern for sanitary menstrual supplies (e.g., reusable and/or inexpensive pads, menstrual cups) that are safe for women, culturally appropriate, and environmentally sustainable. For example, see the Menstrual Hygiene Movement, <http://www.menstrualhygieneday.org>.

¹⁶ Tomi-Ann Roberts, Jamie L. Goldenberg, Cathleen Power, and Tom Pyszcznski, “Feminine Protection’: The Effects of Menstruation on Attitudes toward Women,” *Psychology of Women Quarterly* 26 (2002): 131–39.

¹⁷ For example, the Kimberly-Clark campaign for Kotex products: *U by Kotex*, <https://www.ubykotex.com/en-ca/>.

¹⁸ A current example of response to this phenomenon is the Robin Danielson Bill in the United States, proposed legislation to study the health effects of menstrual products, which would require the National Institutes of Health (NIH) to research whether menstrual hygiene products that contain dioxin, synthetic fibers, and other chemical additives like chlorine and fragrances pose health risks to users. This bill is named after Robin Danielson, who died of toxic shock syndrome in 1998. It was introduced to the House of Representatives (for the tenth time) on March 26, 2015, and was subsequently referred to the House Committee on Energy and Commerce, Subcommittee on Health, on March 27, 2015. Robin Danielson Feminine Hygiene Product Safety Act of 2015, H.R. 1708, 114th Congress, <https://www.congress.gov/bill/114th-congress/house-bill/1708/text>.

and reproduction.¹⁹ In this view, females ought not to be held to any external standard of morality that limits them (and their bodies) artificially, such as social or religious mores and norms constructed within perceived patriarchal and/or sexist structures. A reflection of an ongoing hard-fought struggle for emancipation and enfranchisement, females rightly claim their capacity to choose for themselves to be sexual, moral agents without necessarily intending procreation. This view has arisen in response to existing patriarchal and/or sexist cultural controls of female sexual bodies through Western history enforced by a variety of social and religious institutions. In a contrasting prominent, public construction, female bodies are circumscribed by social limitations on leaky, open, and untamed female sexuality.²⁰ We witness these limitations historically in prohibitions on participation of parturient or menstruating females in liturgies and sacraments.²¹ Surveillance and monitoring of public displays of skin, feminine hygiene, and sexual activity (real or perceived) seem required to maintain female bodies as reproductive but not overtly sexual—modest and pure.

In their extremes, these two constructions are limited in their appeal and merit for females. While there is significant fruitful ground for exploration between the extremes, contemporary Western culture seems fixated on these poles as options for female sexuality. Sadly, both constructions maintain female bodies as consumers (of reproductive products and social messaging) and consumed (by external surveillance and sexual drive), within institutional and social perceptions of reproduction. By constructing female sexual bodies as either sexual and self-determining or pure/modest and circumscribed, both perceptions lean toward stereotypical and thus limited accounts of female sexuality, at the expense of real menstruating and sexual bodies. That is, neither construction endeavors explicitly to integrate menstrual realities into female bodies as both reproductive and a signifier of general health and healthy sexuality.²² A sexually self-determining female is encouraged to

¹⁹ For a popular, nonreligious example of this construction, see Valenti, *The Purity Myth*. For a feminist theological example of this construction, see Beverly Wildung Harrison, *Our Right to Choose: Toward a New Ethic of Abortion* (Boston: Beacon Press, 1983).

²⁰ Elizabeth Grosz, *Volatile Bodies: Toward a Corporeal Feminism* (Bloomington: Indiana University Press, 1994), 192–210; Joan C. Chrisler, “Leaks, Lumps, and Lines: Stigma and Leaky Bodies,” *Psychology of Women Quarterly* 35, no. 2 (2011): 202–14, doi:10.1177/0361684310397698.

²¹ For depictions of (not arguments for) this perspective, see Teresa Berger, *Gender Differences and the Making of Liturgical History: Lifting a Veil on Liturgy’s Past* (Surrey, UK: Ashgate, 2011), 97–109.

²² American Academy of Pediatrics and American College of Obstetricians and Gynecologists, “Menstruation in Girls and Adolescents: Using the Menstrual Cycle as a Vital Sign,” *Pediatrics* 118, no. 5 (2006): 2245–50, doi:10.1542/peds.2006-2481.

access the variety of menstrual and reproductive products available as a means of controlling her own body and exercising control over her reproductive cycle (including to the point of menstrual suppression),²³ ironically, generally to satisfy prevailing social norms, like constant female sexual availability. A modest and circumscribed female is encouraged to moderate her own sexuality, be responsible for others' sexual drives, and forgo sexual activity until marriage, all without the benefit of sexual self-awareness, self-determination, and individual conscience formation.²⁴

When viewed within the specifically Catholic context, females are only invited to regulate reproduction via natural family planning²⁵ methods when planning to marry, rather than to practice menstrual awareness over the life span.²⁶ In this context, women must relinquish ultimate control over their reproductive lives. Not surprisingly, about 70 to 80 percent of contemporary practicing Catholic couples in North America (married or not) use some form of artificial (an admittedly contentious term) birth control.²⁷ In effect, both constructions of female sexuality obscure valuable discussions of female bodies as menstrual, that is, sexual and reproductive.

While each of these constructions has its merits, neither offers a complete awareness of the female sexual body: in both, at some point in their menstrual lives, females forfeit awareness of their own bodies and are controlled and exercise control for the benefit of others. These realities could include avoiding premarital sex without the benefit of bodily menstrual awareness (which is not equivalent to biological reproductive understanding), when monitored by external perceptions of purity. In this case, females are distanced from their

²³ Ingrid Johnston-Robledo, Jessica Barnack, and Stephanie Wares, "Kiss Your Period Goodbye': Menstrual Suppression in the Popular Press," *Sex Roles* 54 (2006): 353–60, doi:10.1007/s11199-006-9007-1.

²⁴ Kate M. Ott, "From Politics to Theology: Responding to Roman Catholic Ecclesial Control of Reproductive Ethics," *Journal of Feminist Studies in Religion* 30, no. 1 (2014): 138–47.

²⁵ Although the issue is important, I refrain here from commenting on perceptions of family planning as either natural or unnatural/artificial.

²⁶ Such methods include the Standard Days Method, Two-Day Mucus Method, Billings Ovulation Method, Sympto-Thermal Method, and the Creighton Model. The phrase "natural family planning" is problematic insofar as it assumes that persons following these methods are planning a family. Other monikers include "fertility awareness" and "menstrual awareness," which imply more focus on female sexual health for the life span, than on planning a family.

²⁷ This number is in contrast to the 98 percent inaccurately extrapolated widely in the media from Rachel K. Jones and Joerg Dreweke, *Countering Conventional Wisdom: New Evidence on Religion and Contraceptive Use* (New York: Guttmacher Institute, 2011), a report based on the 2006–8 *National Survey of Family Growth* in the United States.

personal sexual bodies, desires, and pleasures. Another possibility includes engaging in nonmarital sex using some form of birth control (or not), typically barriers (condoms), hormones (birth control pills, contraceptive injections, or rings), or medical interventions (intrauterine devices) that control reproductive cycles chemically/hormonally and thereby potentially alienate females from their naturally occurring, individually experienced reproductive cycles. To address these alienations, I suggest inviting females into menstrual awareness, both socially and individually, via an embodied account of female sexuality and menstruation that takes seriously the goodness of sexual bodies in general, and the goodness of sexual self- and other awareness.

Menstruation occupies a particularly rich place in the sexual lives of females. From a theological perspective, it operates as a mechanism by which creation in the image of God identifies differences and similarities in the human body. While not all humans menstruate, typically all females do, at some point in their lives. And all females experience menstruation as individual persons, within a particular historical context;²⁸ each menstruant's physiological realities will color her perception of menstruation as uncomfortable, peaceful, annoying, and/or health affirming. There are no one-size-fits-all experiences or accounts of menstruation. It is the same for all, but not. Thus, in identifying menstruation as a particular aspect of female sexuality, theological anthropology and sexuality must account for God's whimsy in human experience, and brace for the ensuing ambiguity.

A Brief History of Menstruation: Judaism and Christianity

The book of Leviticus is important for both the Jewish and Christian traditions. The purity (Lev 11–16)²⁹ and holiness codes (Lev 17–26) determine the status of the body as pure or not in relation to the holy, particularly within the Temple.³⁰ Initially in Jewish history and practice, an observant Jew would refrain from approaching the holy, within the Temple, while impure. Typically, a variety of physical secretions, including menstrual blood, fluid from sores, seminal emissions, and pus-like penile discharge, rendered a person impure.³¹ Also typically, once the secretions ended and an appropriate

²⁸ Katherine D. Hoerster, Joan C. Chrisler, and Jennifer Gorman Rose, "Attitudes toward and Experience with Menstruation in the US and India," *Women & Health* 38, no. 3 (2003): 77–95, doi:10.1300/J013V38N03_06.

²⁹ All references to Judeo-Christian Scripture are from the New Revised Standard Version.

³⁰ Jacob Milgrom, "The Dynamics of Purity in the Priestly System," in *Purity and Holiness: The Heritage of Leviticus*, ed. Marcel J. H. M. Poorthuis and Joshua Schwartz (Leiden: Brill, 2000), 29–32; Baruch J. Schwartz, "Israel's Holiness," *ibid.*, 47–59.

³¹ Hannah Harrington, *The Purity Texts* (New York: T&T Clark International, 2004), 7–12.

time had passed, the person could wash or undergo *mikveh* (ritual immersion)³² to reinstate purity;³³ she or he could then return to the Temple. Although initially intended to protect the holiness of the Temple, the practice of *mikveh* following menstruation continued even after the destruction of the Second Temple ca. 70 CE,³⁴ as a communal norm maintaining family and ritual purity.

Contemporary Jewish *mikveh* practice varies among the movements, synagogues, and individual observances. Naomi Marmon's small ethnographic study of forty-six observant Orthodox Jewish women reveals a plethora of personal practices falling under the rubric of the laws of *niddah* (menstrual impurity).³⁵ Some Jewish women find the practice itself and its observance sacred and revitalizing, particularly regarding their married intimate lives: spouses can reconnect sexually following a period of no contact between them (at least no sexual contact) during menstruation and for the seven days following, which precede *mikveh*.³⁶ Other Jewish women find the practice's implication of menstrual impurity sexist and demeaning of women.³⁷ Still other Jewish women are indifferent to the ritual; observance has waned in their families and the *mikveh* has not been actively undertaken in generations.³⁸ And yet others are reclaiming the ritual for purification in times of personal or religious transition.³⁹ Ultimately, the practice currently

³² *Mikveh* is variously spelled *miqueh*, *mikvah*, and *miqvah*. When citing other sources, I will adhere to the author's spelling. When employing the term myself, I will use *mikveh*.

³³ Tirzah Meacham (leBeit Yoreh), "An Abbreviated History of the Development of the Jewish Menstrual Laws," in *Women and Water: Menstruation in Jewish Life and Law*, ed. Rahel R. Wasserfall (Hanover, NH: Brandeis University Press, 1999), 23.

³⁴ See Shaye Cohen, "Menstruants and the Sacred in Judaism and Christianity," in *Women's History and Ancient History*, ed. Sarah B. Pomeroy (Chapel Hill: University of North Carolina Press, 1991), 273–99. For a consideration of the rabbinic texts regarding reasoning for the continued practice of *mikveh* after the destruction of the Second Temple, see Charlotte Elisheva Fonrobert, *Menstrual Purity: Rabbinic and Christian Reconstructions of Biblical Gender* (Stanford, CA: Stanford University Press, 2000).

³⁵ Naomi Marmon, "Reflections on Contemporary *Mikveh* Practice," in Wasserfall, *Women and Water*, 232–54. Regarding *niddah*, see Wasserfall, 265; Kathleen O'Grady, "The Semantics of Taboo: Menstrual Prohibitions in the Hebrew Bible," in De Troyer et al., *Wholly Woman, Holy Blood*, 15–17.

³⁶ Pamela Steinburg, "Renewal," in *Total Immersion: A Mikvah Anthology*, ed. Rikvah Slonim (New York: Urim, 2006), 221–23.

³⁷ Varda Polak-Sahm, *The House of Secrets: The Hidden World of Mikveh* (Boston: Beacon Press, 2009), 58–124.

³⁸ Sybelle Trigoboff, "Going to the Mikvah (at My Age!)," in Slonim, *Total Immersion*, 211–14.

³⁹ Polak-Sahm, *House of Secrets*, 211–22. Ritual immersion/*mikveh* is also a universal practice in conversion to Judaism.

seems to be ambivalently received, which perhaps reflects the reception of menstruation itself.

In Christian Scripture, menstruation appears a few times, all within variations of the story of Jesus' healing of Jairus' daughter and the hemorrhaging woman.⁴⁰ Thomas Kazen's overview of these passages,⁴¹ particularly the Markan and Lukan, situate menstruation in the context of exploring Jesus's observance of purity laws. In his discussion of contemporary exegesis of the passages regarding the hemorrhaging woman,⁴² Kazen concludes that in the Markan and Lukan texts, Jesus is considered to have had contact with people who were impure dischargers (Mark) and to have had inappropriate contact with a woman, according to Pharisaic expectations (Luke).⁴³ As Kazen points out, however, these conclusions are not universal, and the biblical scholarship has not been static over history.⁴⁴ Competing interpretations of these particular passages have yielded different perceptions of menstruation, purity, and ritual in the Christian church. For instance, Dionysius of Alexandria's third-century perception was that the woman, knowing it would be inappropriate to touch Jesus himself while menstruating, touched only his cloak; Dionysius stated that menstruants had no place in houses of worship.⁴⁵ In contrast to Dionysius, Pope Gregory the Great's perception was that because Jesus expressed no concern about the menstruating woman touching his cloak, menstruation did not render a woman impure; he stated that menstruants need not avoid worship and sacraments.⁴⁶ Some interpretations suggest that because Jesus did not heal the hemorrhaging woman with his own touch, he was observing the Jewish injunction against contact with a menstruating woman. Charlotte Elisheva Fonrobert actually refutes the notion that, according to Jewish law, touching a

⁴⁰ Matt 9:20-22; Mark 5:25-34; Luke 8:42-48.

⁴¹ Thomas Kazen, *Jesus and Purity* Halakhah: *Was Jesus Indifferent to Impurity?* (Winona Lake, IN: Eisenbrauns, 2010), 127-64.

⁴² *Ibid.*, 132-38.

⁴³ *Ibid.*, 136 and 138, respectively.

⁴⁴ For example, see Fonrobert's reading of centuries of Christian and contemporary feminist Christian biblical scholarship of this passage as anti-Semitic: Fonrobert, *Menstrual Purity*, 186-98.

⁴⁵ Dionysius of Alexandria, *Ep. ad Basilidem 2*; English translation: *The Epistle to Bishop Basilides*, in *Fathers of the Third Century*, ed. Alexander Roberts and James Donaldson, ANF 6, 96, quoted in Berger, *Gender Differences*, 102. Again, for contrast, see Fonrobert, *Menstrual Purity*, 166-98.

⁴⁶ Noted in Pope Gregory the Great's response to Bishop Augustine of Canterbury ca. 600 CE, in Bede's *A History of the English Church and People*, rev. ed., trans. Leo Sherley-Price, rev. R. E. Latham (Middlesex, UK: Penguin, 1968), bk. 1, c. 27, q. VIII. For a contrary reading of Gregory's response to Augustine, see Fonrobert, *Menstrual Purity*, 196.

menstruating woman rendered the person impure, unless the woman was intending to initiate sexual contact with her touch, which is clearly prohibited in the purity laws.⁴⁷

Over time, the varying interpretations also yielded different perceptions of ritual requirements for women following menstruation in the early Christian church,⁴⁸ and in both the early and the High Middle Ages of the church.⁴⁹ Typically, Christian interpretations of menstruation and purity occurred in response to other influences—for instance, the Christian desire to differentiate Christian practice from Jewish practice⁵⁰ or the diminished attention to purity in relation to menstruation in light of the growing Christian focus on virginity as purity.⁵¹ Ultimately, while *mikveh* following menstruation remained central to Jewish practice related to purity, even following the destruction of the Second Temple, the focus shifted from menstrual purity to virginal purity in the early Christian Middle Ages. Questions pertaining to menstruation and ritual (e.g., ritual immersion, participation in worship, reception of the Eucharist), although likely once prominent,⁵² faded in the light of growing communities of celibate, virginal men and/or women in the Christian church. Today, menstruation as a Christian measurement of female purity is outstripped by sexual measurements of female purity as virginal and chaste.

The evolution of notions of menstruation and purity within Christian history sheds some light on the growing restrictions around sexual expression and pleasure in theological discourse.⁵³ In marked contrast to the Jewish tradition, if purity was indicated by virginity and sexual continence, then

⁴⁷ Fonrobert, *Menstrual Purity*, 192–96.

⁴⁸ Peter Brown, *The Body and Society: Men, Women, and Sexual Renunciation in Early Christianity* (New York: Columbia University Press, 1988), 145–46.

⁴⁹ Charles T. Wood, “The Doctor’s Dilemma: Sin, Salvation, and the Menstrual Cycle in Medieval Thought,” *Speculum* 56, no. 4 (1981): 710–27; Rob Meens, “A Relic of Superstition’: Bodily Impurity and the Church from Gregory the Great to the Twelfth-Century Decretists,” in Poorthuis and Schwartz, *Purity and Holiness*, 281–93, at 283–84.

⁵⁰ Berger, *Gender Differences*, 104–7, 95–126.

⁵¹ Elizabeth Castelli, “Virginity and Its Meaning for Women’s Sexuality in Early Christianity,” *Journal of Feminist Study in Religion* 2, no. 1 (1989): 61–88; Brown, *The Body and Society*, 428–47.

⁵² Berger, *Gender Differences*, 103.

⁵³ By the early Middle Ages, the church penitentials had strictly circumscribed marital sexual activity to reflect the church’s emphasis on the procreative aspect of sex: James Brundage, *Law, Sex, and Christian Society in Medieval Europe* (Chicago: University of Chicago Press, 1987), 154–64, esp. 162.

emphasizing the redemptive aspect of procreation in marital sexual intercourse seems a natural progression of the teachings. Focus on menstruation had shifted to merely one of many occasions during which sex was forbidden.⁵⁴

Catholic Teaching and Theology: Sex and Reproduction

Contemporary Catholic sexual teaching officially articulated by the magisterium states that marital sexual intercourse has two inseparable aspects: unity and procreation. Any physical impediment to either aspect is considered morally unacceptable. This means that any form of birth control that physically impedes the possibility of conception (either hormonally, technologically, or medically) is unacceptable in Roman Catholic teaching.⁵⁵ The teaching rules out birth control pills and other hormonal contraceptive interventions, condoms and other physical barrier methods, and tubal ligation/vasectomy and other medical interventions. The teaching also presently rules out assisted reproductive technologies such as egg retrieval, in vitro fertilization, embryo transfer, or surrogacy in cases of infertility (technologies developed later in the twentieth century), lest physical unity in procreation be impeded. In effect, the teaching allows no sex without the possibility of conceiving, and no conception without the act of sexual intercourse, since either the procreative or the unitive aspect (both understood in their physical manifestations) of marital sexual intercourse is absent.⁵⁶

Although Pope John Paul II's personalist Theology of the Body expands the meaning of sexuality to include consideration of an anthropology of complementarity, the nuptial meaning of the body, and the total gift of self to one's spouse, still, sexual morality seems largely focused on individual

⁵⁴ Brundage, *Law, Sex, and Christian Society*, 155–56.

⁵⁵ First articulated in Pope Paul VI, Encyclical, *Humanae Vitae*, July 25, 1968, http://w2.vatican.va/content/paul-vi/en/encyclicals/documents/hf_p-vi_enc_25071968_humanae-vitae.html, wherein Pope Paul addresses the advent of hormonal birth control in the midst of global population concerns, shifting gender roles, sexual liberation, and the rise of technology in the Western world.

⁵⁶ Subsequently fleshed out by the Congregation for the Doctrine of the Faith (CDF) in *Donum Vitae*, February 22, 1987, http://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_19870222_respect-for-human-life_en.html; and updated again by the CDF in *Dignitas Personae*, June 20, 2008, http://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20081208_dignitas-personae_en.html. These two documents address rapidly developing technologies and treatments in reproductive sciences, maintaining the inseparability of unity and procreation in marital sexual intercourse, and both documents attend to the anthropological, doctrinal, moral, and pastoral issues at stake.

sexual acts rather than the character of the relationship itself.⁵⁷ He further contextualizes procreation in what he terms a *culture of death* (as opposed to a *culture of life*), wherein contemporary society demeans the value and dignity of human life while opting for hedonistic ideals, bolstered by attitudes of efficiency, a war of the powerful against the weak, and medical and pharmaceutical hegemony.⁵⁸ Pope John Paul II left no question about his contribution to the legacy of *Humanae Vitae*: contemporary cultural standards do not mitigate the inseparability of unity and procreation in sexual expression.

The long-standing position of the church that procreation is the primary justification for sexual activity, now tempered with acknowledgment of the interpersonal and unitive aspect of sexual intercourse, reflects, as Lisa Cahill points out, the church's understanding of relationships, marriage, and families as, first and foremost, communal endeavors.⁵⁹ When placing sexuality in the context of the common good, including childbearing and the raising of children, the communal nature of sexual relationships and their consequences must emphasize the good of sexual restraint for the overall well-being of the community. However, as Cahill also points out, the modern turn toward individual rights and responsibilities in Western culture and in the church has fostered a more robust account of pleasure, desire, and personal moral action among communities of faith. It is understandable, then, that contemporary culture has swayed further toward individual accountability and self-determination in sexual relations than toward communal responsibility.

In contrast to official church teaching, some other Catholic theologies focus on personalism and relationality in context and character rather than on marital status and physical openness to procreation and unity; sexual morality is more broadly evaluated in the lives and orientations of actual sexual persons than strictly in reference to hierarchically articulated communal norms and mores. Todd Salzman and Michael Lawler reconsider Catholic anthropology, which forms the basis for a renewed Catholic sexual theology.⁶⁰

⁵⁷ Pope John Paul II, *The Theology of the Body: Human Love in the Divine Plan* (Boston: Daughters of St. Paul, 1997): a collection of Wednesday sermons delivered by John Paul in his early papacy (1979–84).

⁵⁸ Pope John Paul II, Encyclical, *Evangelium Vitae*, March 25, 1995, §§12–14, http://w2.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_25031995_evangelium-vitae.html.

⁵⁹ Lisa Sowle Cahill, *Between the Sexes: Foundations for a Christian Ethics of Sexuality* (Philadelphia: Fortress Press, 1985), 139–54.

⁶⁰ Todd A. Salzman and Michael G. Lawler, *The Sexual Person: Toward a Renewed Catholic Anthropology* (Washington, DC: Georgetown University Press, 2008); specifically regarding personalism, 66–68.

The key aspects of Pope John Paul's Theology of the Body, and the basis for contemporary magisterial teachings on sexuality, are gender and sex complementarity, in which are included the magisterium's understanding of the biological and personal facets of complementarity. Salzman and Lawler endeavor to account for a wider representation of human experience in their theological anthropology and thereby broaden the notion of complementarity to include sexual orientation along with biological and personal aspects of complementarity. In so doing, they construct what they term a holistic complementarity, whereby we can judge truly human sexual acts and articulate sexual norms.⁶¹ Their application of personalist criteria in constructing sexual ethics endeavors not only to satisfy the necessity of moral articulations for a healthy community, but also to engage individual human realities in the living of personal sexualities.

Feminist theologians have also long drawn attention to the lack of female experience reflected in church teaching and tradition.⁶² Margaret Farley's influential text, *Just Love*, integrates justice and love as the core of Christian sexual ethics, based on the complex concrete lives of individual and faithful moral agents in communities of faith. Her work is informed by a feminist concern to attend to the voices of the faithful that have previously been lacking in the formulation of church teaching and theology;⁶³ this lack is indicative of the methodological and procedural exclusion of females in traditional theological discourses. Cristina Traina addresses the root of such inattention to marginalized voices in her reconsideration of natural law in relation to feminist ethics.⁶⁴ She notes that the method and procedure for doing theology (how we do theology and who we include in the process) determine the moral conclusions we reach and thus the content of our moral theology. Her work demonstrates that contemporary inclusion of new data, lives, experiences, and bodies has problematized age-old questions about sexuality, morality, reproduction, and pleasure, and shepherded in a more robust theological representation of human sexual persons. Along with the work of Lisa Cahill, Todd Salzman and Michael Lawler, and

⁶¹ *Ibid.*, 124–61.

⁶² For example, Berger, *Gender Differences*; Rosemary Radford Ruether, *Sexism and God-Talk: Toward a Feminist Theology* (Boston: Beacon Press, 1983); Phyllis Trible, *Texts of Terror: Literary-Feminist Readings of Biblical Narratives* (Philadelphia: Fortress Press, 1984); Elisabeth Schüssler Fiorenza, *In Memory of Her: A Feminist Reconstruction of Christian Origins* (New York: Crossroad, 1990).

⁶³ Margaret Farley, *Just Love: A Framework for Christian Sexual Ethics* (New York: Continuum, 2006).

⁶⁴ Cristina L. H. Traina, *Feminist Ethics and Natural Law: The End of Anathemas* (Washington, DC: Georgetown University Press, 1999).

Margaret Farley, Traina's work points toward a personalist theology grounded in the embodied sexual and relational experiences of the faithful. This shift toward a personalist perspective attuned to the bodies, lives, and experiences of individuals bodes well for the inclusion of menstruation in a theological account of female sexuality.

Religion and Society Respond

Responses to church teachings, theologies, and policies that facilitate institutional control over female sexual bodies often revolve upon a discourse of reproductive choice and freedom. While choice can mean different things in different contexts, regarding reproduction it tends toward female bodily autonomy and self-determination in decisions pertaining to menstrual management and childbearing, in response to centuries-old patriarchal control of female bodies and diminishment of female autonomy.⁶⁵ Choice has further evolved to represent the right of access to a variety of reproductive options, including contraception, abortion, and assisted reproductive technologies. In the Catholic context, the historical conflation of church teaching with morally right individual conscience decisions has effectively omitted individual experience from reproductive freedom and choice.⁶⁶ And because these reproductive technologies disproportionately affect females, their bodies and moral freedoms are the most strictly circumscribed.

To trouble the notion, however, that human sexuality exists autonomously outside of responsibility to the community and ought to be strictly a matter of choice, it is worth noting that all modern reproductive interventions and choices potentially distance females from their bodies via technology: bodies are being worked on, manipulated, and, in some cases, negatively affected. While the evolution of medical and technological innovation clearly has benefited females the world over, many of the choices available for menstrual management assume some element of risk. If patriarchal religious institutions have limited female reproductive choice and individual conscience formation within traditional histories, patriarchal consumerist institutions have capitalized on notions of female emancipation to equate choice with bodily control by pharmaceuticals, technologies, and medical progress. It is a profoundly consumerist notion that by the use of any or all of these technologies, products, and services, women are de facto enacting

⁶⁵ Farley, *Just Love*, 218–20.

⁶⁶ Ott, "From Politics to Theology," 138–47.

self-determination in their sexual and reproductive lives.⁶⁷ While the choice of what products to use, or whether to use products at all, is typically controlled by individual females (although not always), the underlying social pressures in relation to those choices are more insidious. The prevalence of hormonal, medical, and technological methods of birth control stands in contrast to the relative obscurity of methods incorporating menstrual awareness among females, and seems to indicate that menstruation, as a natural process of the female body, is perceived as peripheral to sexuality. Typically, menstruation is simply framed as that messy monthly reminder of fertility that requires external control for effective socialization.⁶⁸ Moreover, females are introduced to various means of birth control at younger and younger ages (with little prior awareness of themselves as menstrual females),⁶⁹ and are encouraged to go longer and longer without menstruating. The recent trend in female reproductive medicine toward menstrual suppression, by which females are invited to menstruate as infrequently as possible, typically using hormonal contraceptives uninterrupted,⁷⁰ is a case in point. The social and medical framing of menstruating, or not, clearly informs contemporary females' choices regarding menstrual management.⁷¹

⁶⁷ Elizabeth Arveda Kissling, "Pills, Periods, and Postfeminism: The New Politics of Marketing Birth Control," *Feminist Media Studies* 13, no. 3 (2013): 490–504, <http://www.tandfonline.com/doi/full/10.1080/14680777.2012.712373>; Linda C. Andrist, "The Implications of Objectification Theory for Women's Health: Menstrual Suppression and 'Maternal Request' Cesarean Delivery," *Health Care for Women International* 29 (2008): 551–65, [doi:10.1080/07399330801949616](https://doi.org/10.1080/07399330801949616).

⁶⁸ Johnston-Robledo et al., "Kiss Your Period Goodbye," 353–55.

⁶⁹ Use of Long-Acting Reversible Contraceptives (LARCs), such as intrauterine devices (IUDs) and subdermal hormonal implants, has increased among American females ages 15–24 from 1.5 percent in 2002 to 5.0 percent in 2011–13 (Amy M. Branum and Jo Jones, "Trends in Long-Acting Reversible Contraception Use among U.S. Women Aged 15–44," *NCHS Data Brief*, no. 188 [Hyattsville, MD: National Center for Health Statistics, 2015]). Still, the Centers for Disease Control and Prevention (CDC) state that the use of LARCs remains low, particularly among younger adolescent females (6.5 percent at 15–17 years; 7.6 percent at 18–19 years) (Lisa Romero et al., "Vital Signs: Trends in Use of Long-Acting Reversible Contraception among Teens Aged 15–19 Years Seeking Contraceptive Services—United States, 2005–2013," *Morbidity and Mortality Weekly Report (MMWR)* 64, no. 13 [April 10, 2015]: 363–69, <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6413a6.htm>).

⁷⁰ Elsimar M. Coutinho and Sheldon J. Segal, *Is Menstruation Obsolete?* (New York: Oxford University, 1999).

⁷¹ Laura Jones, "Anthropological Fantasies in the Debate over Cycle-Stopping Contraception," *Women's Studies* 40 (2011): 127–48, [doi:10.1080/00497878.2011.537983](https://doi.org/10.1080/00497878.2011.537983); Andrist, "The Implications of Objectification Theory," 551–65.

Socially, we have assumed intervention to be the enlightened reproductive choice of technological progress. As a response to patriarchal control over female reproductive bodies, such a perception of choice is understandable. However, in the evolution of female reproductive emancipation, perhaps it is time to reconsider the effects of obscuring menstruation for ideological reasons, such as shame toward reproductive bodies.⁷² While a culture war is waged over girls' and women's bodies in areas such as menstrual hygiene, objectification, purity, sexualization, and commodification, actively to invite young females into an embodied sense of their sexual, menstruating, and creative selves seems an act of rebellion.

The intention here is not to dismiss the boon that these various technologies and choices have offered and continue to offer to females the world over. Ready access to reliable birth control and reproductive care is a focal point of both the World Health Organization's and the United Nations' initiatives to advance female health globally by recognizing the needs of otherwise disenfranchised females for reproductive awareness and autonomy as a branch of sexual health.⁷³ Rather, the intention is to reframe choice to include choosing to attend to one's sexual, reproductive, menstruating body as a means of facilitating long-term sexual health via knowledge of and attentiveness to one's body.⁷⁴ It is also to invite control over female bodies, by females, rather than control of female bodies by patriarchal institutions, science, technology, or pharmaceuticals, particularly in the early days of menstruation and fertility.

Work regarding menstrual awareness, reproductive health, and gender is already under way on an international scale, for instance at the Society for Menstrual Cycle Research or the Institute for Reproductive Health at Georgetown University.⁷⁵ Founded in 1985, the Institute initially sought to

⁷² Ingrid Johnston-Robledo, Kristin Sheffield, Jacqueline Voigt, and Jennifer Wilcox-Constantine, "Reproductive Shame: Self-Objectification and Young Women's Attitudes toward Their Reproductive Functioning," *Women & Health* 46, no. 1 (2007): 25–39, doi:10.1300/J013V46N01_03; Deborah Schooler, L. Monique Ward, Ann Merriwether, and Allison S. Caruthers, "Cycles of Shame: Menstrual Shame, Body Shame, and Sexual Decision-Making," *Journal of Sex Research* 42, no. 4 (2005): 324–34.

⁷³ "Reproductive Health Initiative," World Health Organization, www.who.int/reproductivehealth/en; "Sexual and Reproductive Health," United Nations Population Fund, www.unfpa.org/sexual-reproductive-health.

⁷⁴ Schooler et al., "Cycles of Shame," 324–34.

⁷⁵ The Society for Menstrual Cycle Research (SMCR), "The Menstrual Cycle: A Feminist Lifespan Perspective," Society for Menstrual Cycle Research, http://www.socwomen.org/wp-content/uploads/2010/05/fact_4-2011-menstruation.pdf. SMCR is an interdisciplinary group of global researchers of menstrual and reproductive health. Its mission is to be a multifaceted resource for policy-makers, students, researchers, and practitioners

attend to unmet family planning needs worldwide. While its research themes and initiatives have expanded globally over the past thirty years, menstrual awareness remains a rather peripheral alternative in a North American discourse of choice and reproductive autonomy. This gap in menstrual awareness in North America is unfortunate, given that such a focus among adolescent and adult Catholic females in North America might serve both to enhance the notion of choice regarding reproductive autonomy, and to facilitate the church's hope for couples to employ natural family planning methods.⁷⁶

The final intention in attending to broad social awareness of menstruation is to refute its social construction as problematic over the female life span and challenge its invisibility in both the church and society. For menstruation to be understood as embodied rather than as object, broad cultural perspectives and church teachings and theology cannot continue to frame it simply as an invisible hygienic crisis, a shameful social taboo, a medical problem, or an unnatural occurrence.

Menstrual Awareness

To encourage menstrual awareness, particularly in the Roman Catholic theological context, is first of all to recognize its virtual invisibility in contemporary discourse. Insofar as the church focuses quite heavily on a woman's role as mother/procreator,⁷⁷ it seems paradoxical that empowering messages about the female sexual body, manifested most primitively in menstruation, are virtually nonexistent. Aside from encouraging natural family planning methods at marriage, female menstrual health is merely a ghost in the theological construction of the female sexual body. A remedy for the

(www.menstruationresearch.org). The Institute for Reproductive Health's early work focused on fertility awareness and natural family planning methods to expand family planning choices. Currently, their work includes mobilizing technology for reproductive health, gender equality, adolescent body literacy, and fertility awareness, and scaling up pilot projects to meet unmet family planning needs. The work of the institute serves thirty countries in the Americas, Africa, Asia, and the Philippines, primarily with traditionally underserved populations. Institute for Reproductive Health, Georgetown University, www.irh.org.

⁷⁶ I do not suppose menstrual and fertility awareness to be superior methods of birth regulation, knowing their vast limitations for many females/couples. Rather, I promote the broad health and well-being facilitated by menstrual awareness. That it might serve as a bridge between female agency and church teaching regarding birth control is a fortuitous side effect of my proposal.

⁷⁷ For example, Pope John Paul II's Apostolic Letter *Mulieris Dignitatem*, August 15, 1988 (Ottawa, ON: Canadian Conference of Catholic Bishops, 1988).

invisibility of menstruation in contemporary theology is complex: inviting a male hierarchical structure to address a particularly female sexual phenomenon is unlikely to yield the preferred solution. This situation might then be an appropriate impetus for the church as an institution more actively to invite diverse females into the dialogue and development of Catholic sexual teaching and theology, and to decision-making roles within the structure of the church. That having been said, some possible reasons for menstrual invisibility include the following.

First is the broad social perception noted above, that menarche (the onset of menstruation) and menstruation are hygienic crises that invoke shame.⁷⁸ The contemporary Western obsession with appearance, cleanliness, and purity feeds the social need to ensure that no person ever knows when any particular female is menstruating. Do not wear white pants. Or, do wear white pants, but only while using a particular brand of menstrual hygiene products. Any indication to others that a female is menstruating is socially received as messy, insulting, and disgusting, or perceived as a moral, intellectual, and social failing of the female.⁷⁹

A second possible reason for menstrual invisibility is the historical purity associations with menstruation in Judeo-Christian history. The early links to religious impurity implied by menstruation found in the purity laws of Leviticus, and the ensuing transition in Christian history toward a focus on sexual virginity as purity,⁸⁰ over time evolved to paint menstruation itself as somehow unholy and, certainly, impure before God and community. The interesting ties to other “leaky bodies” as impure in Leviticus, such as seminal emissions (during sex or nocturnally) and postpartum females,⁸¹ facilitated a denigration of menstruation over Christian history; females, by their very menstrual, sexual, and procreative nature, were diminished as lesser before God. Pure Christian females would not present their menstrual, sexual, or even reproductive bodies, lest they sully themselves or those around them.⁸² In the same way that menstruation posed restrictions on

⁷⁸ Chrisler, “Leaks, Lumps, and Lines,” 202–14; Johnston-Robledo et al., “Reproductive Shame,” 25–39; Schooler et al., “Cycles of Shame,” 324–34.

⁷⁹ For example, Roberts et al., “Feminine Protection,” 131–39.

⁸⁰ Brown, *The Body and Society*, 145–46; Peter Brown, “The Notion of Virginity in the Early Church,” in *Christian Spirituality: Origins to the Twelfth Century*, ed. Bernard McGinn, John Meyendorff, and Jean Leclercq (New York: Crossroad, 1985), 427–43.

⁸¹ Berger, *Gender Differences*, 109–26.

⁸² A delightful exception is Hildegard of Bingen’s straightforward (if not completely accurate) account of monthly menses and reproduction: *Holistic Healing (Causae et Curae)*, trans. of German text Patrick Madigan (1994), trans. of Latin text Manfred Pawlik (1989) (Collegeville, MN: Liturgical Press, 1994), 91–95.

female access to the Temple, it invited restrictions on female participation in Christian worship and sacraments: reception of the Eucharist, baptism, and attendance at liturgies.⁸³

A final possibility for the invisibility of menstruation is fear of actual female bodies. While the Virgin Mary as a bodily symbol of the ideal feminine has been privileged in Roman Catholic history,⁸⁴ that particular image disembodies the virginal reproductive female from her menstruating body. Mary was Jewish and likely followed the purity laws and practices of ritual purification after menstruation,⁸⁵ yet her womanhood is so removed from actual physiological realities that all women, meant to find in her a model, seem to be similarly constructed as nonmenstruating. Of course, the complex history of Mary's place in the life of the church makes univocal statements impossible, but her modern history certainly leans toward the nonsexual virginal mother. The scriptural theological imperative that the mother of the Messiah be a virgin⁸⁶ further distances the ideal mother from her sexuality, which has had profound implications over time for females as sexual and reproductive. Thus menstruation, rather than being a visible sign of the creative potential of sexual females, is framed as a shameful reminder of the leakiness of female bodies. Although over time the prohibitions regarding female liturgical participation during menstruation waned,⁸⁷ menstruation itself remained veiled from communal recognition.

Female Menstruating Bodies

A Christian feminist response to the mysterious invisibility of menstruation in contemporary theology begins with female bodies. Insofar as females are sexual and potentially reproductive, and moral theologies speak to those

⁸³ Berger, *Gender Differences*, 98–109; Hildegard of Bingen, *Scivias*, trans. Mother Columba Hart and Jane Bishop (New York: Paulist Press, 1990), bk. 1, vision 2 (Creation and the Fall), §§20–22. Some Orthodox churches continue practices excluding females based upon menstrual and reproductive timing. Depending upon the church, diocese, and cultural context, women refrain from receiving communion while menstruating, among other ritual prohibitions. These practices are not universal in Orthodox churches. See Vassa Larin, "What Is 'Ritual Im/Purity' and Why?," *St. Vladimir's Theological Quarterly* 52, nos. 3–4 (2008): 275–92.

⁸⁴ Elizabeth A. Johnson, *Truly Our Sister: A Theology of Mary in the Communion of Saints* (New York: Continuum, 2003), 47–70.

⁸⁵ Berger, *Gender Differences*, 100.

⁸⁶ Isaiah's prophecy, 7:14, "Therefore the Lord himself will give you this sign: the virgin shall be with child, and bear a son, and shall name him Immanuel," and its inclusion in Matthew's Gospel, 1:22–23.

⁸⁷ Berger, *Gender Differences*, 105–9.

realities, there is a tension between attempts to control and attempts to wrest away control over those bodies and place it squarely within female agency. At the center of this tension over female sexual bodies lies the experience of menstruation, which is typically not explicitly engaged in the discourse.

Church teaching states that the only licit forms of birth control are the various natural family planning (or menstrual awareness or fertility awareness) methods, and thus assumes that menstrual awareness is imperative for practicing Catholics. To facilitate that awareness, perhaps menarche could achieve some ritual status and recognition among females, in conjunction with learning how to attend to, chart, understand, and possibly even befriend menstruation.⁸⁸ Or perhaps confirmation, a maturing Christian's affirmation of faith, might incorporate menstrual awareness for females and males in its sacramental preparation. Moving one's faith toward an adult sense of self as embodied and sexual, along with a sense of self in a community of believers, might call for an accompanying message of the goodness of the sexual person as a sacramental witness to faith. Positive affirmation of maturing female bodies might bear witness to an emerging adult faith.⁸⁹

One might also consider that, by recognizing menstruating female bodies as sexual even when not reproductive, females might attain a comfortable familiarity with their bodies that could facilitate sexual health for the long term, including after the cessation of menstruation. In that light, reframing natural family planning as menstrual or fertility awareness might recognize that females (and males) need not be planning a family to benefit from knowing their sexual bodies. Menstrual awareness offers more than a means of family planning: it offers personal familiarity with bodies as sexual and views sexuality, female bodies, and menstruation as good.

Further, to address menstruation honestly as an integral aspect of sexuality and reproduction, the church might strengthen its claim that it respects the dignity of females over their life spans. Catholic sexual education could teach menstrual awareness and its individual practicalities as a matter of course,

⁸⁸ There currently exist multiple means of charting one's menstrual cycle, including paper charts, counting beads, and phone applications. See <http://irh.org/resource-library/my-changing-body-body-literacy-fertility-awareness-for-young-people-2nd-edition/> and <http://irh.org/resource-library/how-to-use-the-cyclesmart-kit-with-young-people-programmatic-guidelines/>. In today's technological climate, the phone apps are proving successful among adolescents, where cell phones are ever present. See <http://irh.org/focus-areas/mobilizing-technology/>. (All links are from the Institute for Reproductive Health at Georgetown University.)

⁸⁹ Again, such attention to ritual or sacramental recognition of menarche would require that diverse females be prominent in discussions, development, and formulation of theology and church teaching to that effect.

and, empowered by knowledge of menstruation and fertility, young females might feel further empowered in their sexual and reproductive decision-making. Regardless of what form of birth control females ultimately choose, the more pressing issue here is to advocate for their menstrual awareness. In an era marked by increasing accessibility to information (at times of dubious worth), a proactive approach to empowering females in their sexuality and long-term sexual health might bolster a church weighed down with a credibility crisis over sexual theology.

Without any such perception currently accepted within Catholic teaching, theology, or culture, females are overwhelmingly, whether single or married, choosing the forms of birth control (or menstrual control) that are most accessible to them: condoms, pills, injections, implants, and rings.⁹⁰ These accessible forms of birth control also happen to be easy to procure and employ, and are relatively effective. The pharmaceutical, technological, and medical marketing power behind contraceptives that manipulate menstruation and reproduction⁹¹ far outweighs the church's late-to-the-game promotion of natural family planning. Long before young people are considering having families, they are actively deliberating sexual activity and choosing methods of birth control, without first attending to menstrual cycles and fertility awareness; natural family planning terminology is thus unhelpful to menstrual awareness. Without proactive introduction to menstrual awareness as a real option and means to sexual health and well-being among girls and women, it is hardly surprising that females choose other ways to manage their sexual activity and menstruation. And regardless of how a female chooses to practice birth control once sexually active, it is still positive and healthy for her to begin her potential reproductive life aware of her own cycle and its meanings to her, without the shame that often ensues from social messaging about reproductive female bodies.⁹²

⁹⁰ Of sexually active female teens aged 15–19 identified in the 2006–10 *United States National Survey of Family Growth*, 85.6 percent (male = 92.5 percent) typically use some method of birth control. Only 11 percent of females (males = 3.4 percent) used one of a collection of “other methods,” including withdrawal, sterilization, IUD, female condom, diaphragm, cervical cap, spermicidal foam, jelly, cream, or suppository, sponge, calendar rhythm method, and “other” methods. Condoms were most frequently used (52 percent; male = 74.7 percent), followed by the pill (30.5 percent; male = 39 percent). Gladys Martinez, Casey E. Copen, and Joyce C. Abma, “Teenagers in the United States: Sexual Activity, Contraceptive Use, and Childbearing, 2006–2010 National Survey of Family Growth,” *National Center for Health Statistics, Vital Health Stat.* 23, no. 31 (2011): 7–11, 32–34.

⁹¹ Kissling, “Pills, Periods, and Postfeminism.”

⁹² Johnston-Robledo et al., “Reproductive Shame,” 25–39; Schooler et al., “Cycles of Shame,” 324–34.

Another positive factor in menstrual awareness among females is its capacity for dealing with irregular menstrual cycles, atypical symptoms, and questions when reproductive difficulties arise. Currently, females access a variety of biologically manipulative methods of birth control early in their sexual lives.⁹³ They are also invited into menstrual suppression to control, limit, or eliminate their menstrual cycles altogether.⁹⁴ Regardless of the causes of reproductive health issues or infertility, females' ability to respond effectively to their bodies is hampered by lack of menstrual and reproductive awareness of their own bodies. Again, given that the church teaches that most technologies for assisting in procreation are illicit, menstrual and reproductive awareness should be a first step in sexual education for young people prior to their sexual debuts and childbearing lives, incorporating personal bodily understanding with biological knowledge. The church also teaches that hormonal intervention to stimulate ovulation is morally acceptable (DV §13), although hormonal intervention to prevent conception is not (§6). These teachings reflect the methodological difficulties outlined earlier in this article with the formulation of church teaching and theology: the teachings focus more heavily on the physical act of sexual intercourse and procreation than on actual females' health and well-being. They further reflect the procedural absence of female experiences in the development of the teaching. The issue here, of course, is that menstruation in its myriad manifestations, as one indicator of female sexual and reproductive health, so central to personal realities in the creation of community, is mysteriously absent from theological discourse, because females are absent.

On the other side of the tension over control of female reproductive bodies is the discourse of choice. The promotion of self-determination and autonomy in female sexual decision-making sits within the broader context of evolving rights and responsibilities for all females in Western societies. That females are able to choose reproductive courses of action for themselves is a hallmark of second- and third-wave feminisms, and postfeminism.⁹⁵ What is sidelined from this discourse of choice, however, is the choice not to use various pharmaceutical, medical, or surgical interventions to control reproduction, that is, the choice for menstrual awareness, charting, understanding, and practice. Menstruation is virtually absent. The irony here is

⁹³ Jones and Dreweke, *Countering Conventional Wisdom*.

⁹⁴ Johnston-Robledo et al., "Kiss Your Period Goodbye," 353–60.

⁹⁵ Bianca Jarvis, "No to the Flow: Rejecting Feminine Norms and the Reproductive Imperative through Menstrual Suppression," in *The Moral Panics of Sexuality*, ed. Breanne Fahs, Mary L. Dudy, and Sarah Stage (Basingstoke, UK: Palgrave Macmillan, 2013), 205–25.

that contemporary advocacy of reproductive choice and physical autonomy continues to defer to the patriarchal social institutions that once forbade females barrier-free access to reproductive options. The choice of empowerment for contemporary females is primarily a choice to opt into pharmaceutical, medical, and consumerist institutions that regularly target females for questionably useful or safe product use. Another choice is to appropriate cultural and social goals and roles, such as sexiness, motherhood, career orientation, or heteronormativity, that both fuel and prey on socially constructed female insecurities. So females are invited never to menstruate again—and never to risk being shamed by bleeding; abortion is offered as a primary option in unwanted and unplanned pregnancy, and females are subject to birth control methods that rely on pharmaceutical companies' goodwill and that contribute to alienation from embodied sexuality. While it is untenable to condemn all technologies or pharmaceuticals in all circumstances, to increase women's capacities to participate fully in their social contexts, it is imperative to advocate for a *hermeneutic of suspicion* with regard to the institutions that have happily, for many years, disparaged and ravished women's sexual and reproductive bodies, and continue to profit from them.⁹⁶

Conclusion

As a corrective for the nonmenstruating virgin mother as a model for female reproductivity and patriarchal control of female bodies, contemporary advocacy for female bodily and reproductive choice is clearly needed.

⁹⁶ Consider the so-called female Viagra, Flibanserin. Touted as a means of leveling the gender playing field of sexual satisfaction, Flibanserin offers little to no evidence of efficacy in improving female sexual desire. Neither does the pathologizing of female sexual libido meet with universal acceptance. Loes Jaspers et al., "Efficacy and Safety of Flibanserin for the Treatment of Hypoactive Sexual Desire Disorder in Women: A Systematic Review and Meta-analysis," *JAMA Internal Medicine* 174, no. 4 (2016): 453-62, doi:10.1001/jamainternmed.2015.8565. Also, advertising Flibanserin as the female equivalent of Viagra is disingenuous. Viagra functions physiologically to counter erectile dysfunction in males and is taken as needed. Flibanserin is effectually a failed antidepressant medication (i.e., not approved by the US Food and Drug Administration) that is marketed as targeting female lack of sexual desire. However, it actually targets some causes of low libido in women (e.g., exhaustion, anxiety, and depression) and is taken daily. Studies suggest that its risks outweigh its potential benefits. See Steven Woloshin and Lisa M. Schwartz, "US Food and Drug Administration Approval of Flibanserin: Even the Score Does Not Add Up," *JAMA Internal Medicine* 176, no. 4 (2016): 439-42, doi:10.1001/jamainternmed.2016.0073; Roy Moynihan, "Evening the Score on Sex Drugs: Feminist Movement or Marketing Masquerade?," *British Medical Journal* 349 (2014): g6246, doi:10.1136/bmj.g6246.

However, the limitation of choice to the use of medical, pharmacological, or technological interventions as the means of controlling female sexual health, pleasure, and reproductivity hinders females' access to opportunities for bodily menstrual awareness that might facilitate long-term sexual health and flourishing. Menstruation and menstrual awareness continue to be framed as the uneducated cousins of contemporary reproductive interventions, particularly in medical and health-care realms. Whereas menstrual awareness offers females the choice to opt out of interventionist perceptions of themselves as autonomous, sexual, and reproductive, it also offers females the choice to opt into empowered sexuality and reproductivity in their own menstrual patterns. Menstrual awareness challenges the mysterious invisibility of menstruation in theological discourses of control and reproduction, which leaves a gap in attention to female sexual bodies as more than vessels for conception or consumers of social constructions. Menstrual awareness has the potential to enhance a Roman Catholic dialogue about birth control with an empowerment of females in bodily knowledge. It could also enhance a discourse of choice regarding females and their bodies with awareness and recognition of female sexuality, reproduction, and pleasure, without necessarily opting for external techniques of control.