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Normalizing the Natural

A study of menstrual product destigmatization

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Normalizing the Natural

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A study of menstrual product destigmatization

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DOCTORAL DISSERTATION

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Abstract
In this thesis, I develop our understanding of the destigmatization process to include product destigmatization. Previous research on destigmatization has primarily focused on that of individuals, groups, organizations, and industries. However, there is an abundance of empirical evidence showing that a product stigma has a significant bearing on market logics, including legal classification of products, marketing challenges, as well as a lack of innovation and entrepreneurship.

Around 300 million people menstruate on any given day around the world, yet the market for menstrual products consists predominantly of homogeneous products that have been around since the late 1800s or early 1900s. Simultaneously, there is a surprising lack of regulations and standards, in particular on a global level, ensuring a widespread safety for so many users around the world. Other products used on or intimately with the body are generally heavily regulated and/or standardized. In a pilot study investigating these seemingly contradicting notions, I found that one of the most fundamental reasons for the status quo is grounded in the stigma on menstruation and menstrual products.

Through a multi-method approach, combining aspects of case research, action research, and document studies, I examined the menstrual product field from a synthesis of theory including stigma, destigmatization, and neo-institutional. I developed a framework through which product destigmatization can be understood. Therein, I emphasize three primary mechanisms driving product destigmatization, and how they act on all three levels of society. The mechanisms comprise reclassifying, framing, and claiming agency.

My main contributions are threefold. First, I deliver a comprehensive study on destigmatization that includes different dynamics and levels, which has not been done previously, in particular regarding menstrual products. Secondly, I find that in contrast to what previous research demonstrates, destigmatization processes do not only occur from the top-down, but also through bottom-up initiatives. Finally, I advance our understanding of the role of organizations, including entrepreneurs, and their innovative capacities to affect institutional change.

Keywords
Destigmatization; menstrual products; stigma; institutional change; institutional entrepreneurship; standardization; normalization

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Normalizing the Natural

A study of menstrual product destigmatization

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MADE IN SWEDEN

To my grandmother, who probably would have been as horrified as she would have been proud of this

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1. Introduction

Most women[1] menstruate between three to seven days each month for about 40 years (Friedmann, 2017a), amounting to approximately 2,400 days in a lifetime. In order to manage menstruation, certain products exist on the market to enable women to carry on with their normal lives, as much as possible. Menstrual products are used on or inside the body by those women who have access to and can afford them. Menstrual products are not seen as any other product, however. Purchasing them is often an embarrassing experience, their use should be unnoticeable, and their disposal invisible. This is because of the menstrual stigma that extends to anyone and anything associated with it, including menstrual products (e.g., Bobel, 2010; Chrisler, 2011; Delaney, Lupton & Toth, 1988; Newton, 2016; Thornton, 2013; Vostral, 2008).

Although half of the world's population menstruates, the stigma on menstruation dates back to at least biblical times, and has for thousands of years affected women and other menstruators' such as trans men's, mental and physical health negatively (Newton, 2016). Over time, cultures have and continue to modernize; consequently, norms, values, and behaviors tend to shift, which can result in a weakening of stigma, or destigmatization. Such processes have observable empirical effects, not only on individuals but also on products, markets, and their related institutional fields. An example of such an effect includes the ability to communicate in a more open way between manufacturers and consumers where the former are less required to obscure their messages through, for instance, the use of euphemisms (Ellen & Bone, 2008; Huff, Humphreys & Wilner, 2016b; Wilner & Huff, 2015, 2017; Wilson & West, 1981).

[1] By using the term 'women,' I do not intend to exclude others including trans men who menstruate. I use the terms women, menstruators, and menstruating people interchangeably, and they should be interpreted as including anyone who menstruates. Not all women menstruate and not all people who menstruate are women.

Our understanding of how destigmatization processes occur, however, is rather limited, and it has gained little attention from scholars to date. Specifically, our understanding of the destigmatization process of products is limited (Clair, Daniel & Lamont, 2016; Mirabito et al., 2016). One such destigmatization process that is ongoing is that of menstrual products, where it is becoming increasingly acceptable socially to discuss menstruation and related products more openly, which is especially salient in advertisements. In this thesis, I aim to address our limited theoretical understanding of destigmatization of products by increasing our understanding of the mechanisms that contribute to the destigmatization of menstrual products.

While the notion of product destigmatization has only been sparsely addressed in previous research, organizations have been shown to act in particular ways depending on the institutional environment or field in which they act (Scott, 2013). Factors that shape institutional fields include taken-for-granted values and beliefs, formal and informal regulations, religiosity, and political ideologies and the constant reproduction thereof (e.g., Mirabito et al., 2016). One kind of taken for granted notion is stigma, which has consequences for how actors behave in a given field. This has been addressed by marketing researchers, but instead of placing focus on the field as such, they have primarily studied the effects on consumer preferences and attitudes (e.g., Dahl et al., 2005; Kunreuther & Slovic, 1999; Wilner & Huff, 2015). However, stigma and destigmatization appear to have wider consequences than that.

Previous research that intersects the concepts of stigma and institutions is primarily geared toward stigmatized industries or organizations. What I have found, however, is that research on industrial or organizational stigma fall short in explaining what is happening in the menstrual product field (e.g., Devers et al., 2019; Dioun, 2018; Durand & Vergne, 2015). According to Dioun (2018), while there is a growing body of literature on how different factors affect the stigma on, for instance, organizations and industries, few studies have addressed the process through which factors contribute to their destigmatization, and in particular the destigmatization of products. Hence, in order to understand more about stigmatized products and their destigmatization, more research is needed. Meanwhile, there is an emerging interest in stigma, providing further support for the theoretical problematization (e.g., Barlow, Verhaal & Hoskins, 2018a).

Furthermore, there are several indications that the stigma and other characteristics, such as standardization, knowledge, product development, and innovation in the menstrual product field are in a state of change, which connects to the ongoing conversation on institutional change (Hargrave & Van De Ven, 2006). The following two notions thus represent my theoretical problematization: 1) an emerging interest in stigma where the understanding of product stigma and destigmatization in an institutional field is currently limited and 2) the call for research on institutional change. I have further chosen to employ neo-institutional theory, as opposed to other theories such as culture theory, as it incorporates regulative aspects, which are of significant importance in the case of menstrual product destigmatization, and likely in other destigmatization processes as well. The notion that regulative aspects are of importance is a pre-understanding grounded in my pilot study, where I discovered the lack of regulation and standards on menstrual products.

The destigmatization of menstrual products is noticeable more or less globally and is particularly salient in the context of Sweden. There, the stigma has been significantly weakened in the past years, with a sharp increase in the speed of that process beginning in 2013 and continuing to this day. I have, thus, chosen to delimitate my study in accordance with the time frame of 2013 to 2020 and focus my study on Sweden, but with input from around the globe to provide a wider perspective.

1.1. Empirical problem

The empirical problem is that there is a lack of understanding of the ongoing process of destigmatization on menstruation and menstrual products from a research perspective. Furthermore, the stigma has certain consequences for specific individuals; individuals who in this case comprise around half the world's population. These effects are both physical and mental and can be related to, amongst other things, factors in the menstrual product field. Early on in the research process, I identified two main aspects in the field that have negative consequences for the individual. These are the lack of third party testing on the safety of (Nicole, 2014; Rubin, 2015) and the lack of innovation and product development on, menstrual products (Bobel, 2010). These aspects have also

gained little attention in research; thus, they are included in the empirical problematization.

1.1.1. Testing and knowledge about the safety of menstrual products

The most commonly used menstrual products are disposable sanitary pads, panty liners, and tampons, although reusable alternatives exist such as reusable sanitary pads and panty liners, absorbent underwear, sponges, diaphragms, pessaries, cloth tampons, and menstrual cups. Although reusable alternatives are gaining traction, they remain much less widespread in their use (Euromonitor, 2016). Recent research shows that menstrual products contain potentially harmful substances such as glyphosates from pesticide use on cotton; phthalates, which can potentially cause developmental issues such as lowered IQ and asthma; and dioxins, a "highly toxic" substance and "known human carcinogen" (Heid, 2016). There has been limited testing, specifically on how the body reacts to exposure to external elements through the vaginal mucous membranes and especially long-term exposure such as repeated use over a person's menstruating years (Nicole, 2014; Rubin, 2015).

Several researchers express concern regarding chemicals in menstrual products, as well as in other products that are used on or in the vagina such as tampon applicators, vaginal douches, wipes, sprays, soaps, lubricants, powders, etc. This concern stems from the lack of knowledge surrounding the vaginal uptake of chemicals from repeated and long-term exposure, as many of those chemicals, although they are often argued to occur in negligent doses, are accumulated in the body and can potentially affect both the user and forthcoming children, even if a pregnancy is decades away (Nicole, 2014; Scranton, 2013).

Limited attention has been devoted toward examining the contents of menstrual products and their effects on the body, but two of the most prominent investigations have been published in the past few years. These are The Swedish Chemicals Agency's report on "hazardous chemical substances in feminine hygiene products" (The Swedish Chemicals Agency, 2018) and the French Agency for Food, Environmental and Occupational Health & Safety's (ANSES) report on the Safety of Feminine Hygiene Products (Genet, 2018). These are one-time investigations, and currently there are no plans to conduct such studies routinely.

Furthermore, in Sweden, as well as in most other countries, it is up to the suppliers of menstrual products whether they conduct testing on menstrual products and, if so, whichever testing they see fit. Consequently, they determine which results will be deemed acceptable (Genet, 2018). If companies do in fact perform rigorous and viable testing, the question that remains to be answered is why have they not engaged in setting a standard in order to ensure consumer safety, which would require all companies on the market to compete on equal terms. As mentioned, in comparison to other types of products that are used in contact with or inside the body, such as plasters, condoms, lotions, incontinence protection, and cosmetics, which are all heavily regulated and/or standardized and controlled in order to ensure their safety, the lack of rules and standards for menstrual products is rather unique (Medical Products Agency, 2017a, 2017b).

1.1.2. Innovation and development of menstrual products

When taking a closer look at menstrual product development, it is apparent that it is not only regulation and knowledge of the contents in menstrual products and their effects that are lacking, but also matters such as the pace of innovation and product development. Versions of the most commonly used disposable sanitary pads have been around since the late 1800s, with the first commercial disposable pad launched in 1896 by Johnson & Johnson (Farage, 2006), whereas tampons and menstrual cups were commercially launched in the 1930s (Carvalho, 1997; North & Oldham, 2011). Since then, there have been rather limited development of products, other than slight adaptations to their shapes and increased absorption capacity (to the degree that tampons have been known to become too absorbent and consequently harmful) and thus less material use and thinner pads.

Menstrual cups began to be produced only recently, since the beginning of the 21st century, using more user-friendly materials such as silicone or TPE (thermoplastic elastomer) rather than the previous, stiffer and more uncomfortable, latex ones (Mitchell et al., 2015). This has increased user friendliness and, in combination with growing environmental and health awareness among women, caused menstrual cups to gain traction. This, however, was only recently and sales are nowhere near that of conventional, disposable products (Chain Drug Review, 2016).

Absorbent underwear, on the other hand, are brand new on the market. Upon their launch, they were yet to be regarded as a substitute to pads, tampons, or menstrual cups, but rather a complement (or as a substitute to a panty liner), as they they lacked suffiecient absorption capacity to be used alone during days of medium to heavy flow (Shethinx.com, 2017). In 2017, however, another brand, WUKA, was launched, which can absorb more than the forerunner, Thinx (WUKA, 2019); since then, a multitude of companies have started producing menstrual underwear. Over the course of writing this thesis, it seems as though companies producing menstrual underwear have developed them to suit even the heaviest of flows, although reviews still express caution against wearing them as anything other than backup or on light flow days (Palus & Redd, 2020; Stassen, 2019). Nonetheless, the number of innovations is limited and very recent, in relation to conventional menstrual products that have existed since the 1930s (North & Oldham, 2011). As a matter of fact, demand for conventional menstrual products (mainly pads and tampons) is declining due to consumers' plea for truly innovative products that fulfill their needs sustainably with regard to convenience, cost, the environment, and health (Euromonitor, 2016).

Examining these characteristics in the field, namely the lack of 1) research, 2) knowledge, 3) regulation and/or standardization to ensure product safety, as well as the 4) slow product development, in the context of a product domain where there is a fundamental need to be fulfilled and demand is changing, something does not quite add up. I argue that the status quo of the menstrual product field, including aspects 1 through 4 listed above, is a result of the stigma. What we can see, however, is that the empirical landscape of the menstrual product field is changing. Specifically, menstruation is more and more frequently discussed in the public sphere. Moreover, more efforts from various directions are aimed at reducing the stigma surrounding menstruation and menstrual products, and a standardization process may be underway.

1.2. Theoretical perspective

1.2.1. Stigma

In the early work on stigma, Goffman described the concept according to the Greek definition of "bodily signs designed to expose something unusual and bad about the moral status of the signifier" (Goffman, 1963, p.1). This approach implies that a stigma is primarily geared toward a focus on the individual. Further research developed the notion to include products, organizations, industries' actions, characteristics or attributes that are laden with a negative connotation within a certain social context, which in turn are affected by beliefs, culture, religiosity, customs, values, and so on (e.g., Kusuma, 2014; Link & Phelan, 2001). As defined by Kasperson, Jhaveri, and Kasperson, stigma can be seen as a "mark placed on a person, place, technology, or product associated with a particular attribute that identifies it as different and deviant, flawed or undesirable" (cited in Ellen & Bone, 2008, p.70).

Stigmas occur in various degrees and differ across social contexts, including the stigma that surrounds menstruation, a menstruating woman and, hence menstrual products. The stigma is widespread and quite strong in most social settings (e.g., Kowalski & Chapple, 2000; Sabri, Manceau, & Pras, 2010; Wilson & West, 1981). I will dig deeper into the concept of stigma and stigmatized products in the literature review. However, for the time being, it is enough to understand the notion that people within a social setting where a certain thing, individual, or group is stigmatized will try to avoid association with that thing, person or group in order to prevent their own stigmatization or finding themselves in a socially uncomfortable situation (e.g., Wilson & West, 1981).

An example is condoms, which up until their help in preventing the spread of AIDS have been viewed as a symbol of surreptitious and socially improper sexual behavior. This was a result of their association with sexually transmitted disease and prostitution and the consequential social discomfort associated with their purchasing, carrying, and use (Dahl et al., 2005). Stigmatization thus implies the attachment of symbols (or marks) with meanings of a negative nature to people, things, and actions in certain social contexts. They are taken for granted but can change over time (Link & Phelan, 2001). The concept of stigma can thus be

related to cognitive interpretations of symbols, their meanings, and how they are attributed to things, people, and actions.

Just like stigmas, institutional fields depend on contextual forces consisting of beliefs, norms, values, and behaviors that are embedded in the social system in which they exist. This suggests that the concepts of institutions and stigma are potentially closely related. Stigma has previously been addressed from an institutional angle in research on stigmatized industries and organizations. While these arguably are very close to products, they fall short in addressing the workings of stigma on products in an institutional field setting (Link & Phelan, 2001; Mirabito et al., 2016). Most research on stigma including stigmatized products and the menstrual stigma has been conducted within the domains of anthropology, psychology, and sociology and focus on the individual and micro-level interactions (Chrisler, 2011; Kleinman & Hall-Clifford, 2009; Link & Phelan, 2001; Sabri, Manceau & Pras, 2010). As of recently, stigmas are increasingly linked to questions of power structures, communication, discrimination, stereotyping, policy-making, and advertising, primarily within the domain of marketing research (Mirabito et al., 2016; Sundstrom, 2014).

The concept of stigma is thus increasingly being regarded as one that has consequences on the social experiences of humans, as well as many other aspects of society, including several of the functions in the marketplace (Mirabito et al., 2016). As this is a fairly recent development, research in these new domains is still rather fragmented. According to Clair, Daniel, and Lamont (2016, p.224), while previous research outlines the various ways in which cultural constructions affect stigma, "scholars have paid relatively little attention to how new meanings shift over time in ways that reduce stigma." Specifically, research studying the mechanisms that drive destigmatization in terms of the different levels of society and in relation to the relationships between actors in that field is limited.

Further, research on stigma has also spread across other disciplines, including political science and social geography as well as business research including marketing and management (Link & Phelan, 2001; Mirabito et al., 2016). This research goes beyond studying the stigmatization of individuals to places, industries, markets, organizations, technologies, and products (Gregory, Flynn & Slovic, 1995). Gregory, Flynn, and Slovic (1995) explain that in such cases stigma can have effects where "negative imagery and negative emotional reactions become closely linked with the mere thought of the product, place or technology,

motivating avoidance behavior." This is a clear indication of the potential of stigma's negative effects on business transactions, a marketplace, or field setting.

Based on existing references to the concept of product stigma, it is evident that stigma can have significant effects on fields. Examples of how stigma plays a role in institutional fields that are indicated in previous literature include reduced demand for stigmatized products and services and difficulties to market, appropriately due to wide variability in the spread of social perceptions within the same context of the products or services (Katsanis, 1994; Vaes, 2014; Wilson & West, 1981). Other effects include a lack of discourse among consumers, which can have multiple implications such as reduced word of mouth marketing, difficulty in reaching target consumers, and difficulty for consumers to find products they would want or need as well as information about them. Product stigma can also inhibit consumer research on a product or product category, as consumers and researchers alike may find it difficult to talk about the specific item. This can further lead to a lack of product development and innovation, particularly that which is user-centered (Katsanis, 1994). These aspects together, as Ellen and Bone (2008) explain, indicate that stigma causes market inefficiencies.

1.2.2. Product stigma

Much like the original concept of stigma, which pertains to individuals or markings they might have, stigmatized products and organizations are those that are associated with some negatively apprehended attribute among a certain social audience. Illegal organizations, products, or services such as prostitution, drugs, and weapon sales (depending, of course, on where it occurs and the local legislation that applies) are most often stigmatized, but also products such as sex toys, condoms, pornography, birth control, mental illness treatment, and certain personal hygiene products, regardless of their legality (Wilson & West, 1981). Products that are stigmatized can also be referred to as taboo-laden products, unmentionables, sensitive, offensive or controversial products, or in some cases even illegitimate, signifying "a lack of social support" (Hudson, 2008, p.253; Jensen, 2006; Sabri, Manceau & Pras, 2010; Waller & Fam, 2000).

A number of studies have addressed this notion previously, including Hudson (2008), Huff, Humphreys, and Wilner (2016a), as well as Jensen (2006). Two of

the stigma-research pioneers, Wilson and West (1981, p.97), refer to one category of stigmatized products as "legitimate unmentionables" but fall short in explaining what they mean by this terminology. I would assume they are referring to:

> "the second group of unmentionables, which includes products or services that are by all standards acceptable to society but that the buyer is reluctant to acknowledge or discuss. The barriers in these instances have been raised by the buyers themselves, often despite manifest need. Purchases are made only when the need is sufficiently acute to overcome the threshold of embarrassment, disgust, or fear. Unmentionables in this category include a wide range of goods and services such as personal hygiene products, burial arrangements and other death-related services, and certain types of medical treatment or supplies" (Wilson & West, 1981, p.92).

1.2.3. The menstrual stigma

To refer back to the case of menstrual products, these are frequently regarded as stigmatized products in studies that discuss the concept, again mostly conducted in the marketing domain (e.g., Katsanis 1994; Waller & Fam 2000; Wilson & West 1981). So, where does this stigma come from? The menstrual stigma is widespread and dates back to before people were aware of the biological processes in the human body, including procreation. The go-to explanation for something as strange as continuous periodic bleeding every 28 or so days without being wounded or becoming ill was magic and invoked fear (Johnston-Robledo & Chrisler, 2013). Rooted therein, countless superstitions surrounding the concept of menstruation have existed historically and continue to persist, depending on the social context considered. Examples include that a menstruating woman's touch could turn wine into vinegar, poison crops and seedlings, cause fruit to fall from trees, "dim mirrors, blunt razors, rust iron and brass, kill bees and cause miscarriages," etc. (Carvalho, 1997, p.9).

The menstrual stigma dates back to before the Bible and in the words of Leviticus 15:19–33 (cited in Delaney, Lupton, & Toth, 1988, pp.37–38),

> "And if a woman have an issue, and her issue is her flesh be blood, she shall be put apart seven days: and whosoever toucheth her shall be unclean until the even.

> And every thing that she lieth upon in her separation shall be unclean: every thing also that she sitteth upon shall be unclean.
>
> And whosoever toucheth her bed shall wash his clothes, and bathe himself in water, and be unclean until the even.
>
> And whosoever toucheth any thing that she sat upon shall wash his clothes, and bathe himself in water, and be unclean until the even."

The passage continues on with ten more degrading rules about how menstruating women, their menstruation, and anyone else who may have come in contact with either should be treated (cited in Delaney, Lupton, & Toth, 1988, pp.37–38). Thus, in many parts of the world, menstruating women have historically been viewed, if not as a danger to society, then at least disgusting, dirty, and/or shameful, which makes the notion that people avoid being associated with menstruation rather self-explanatory and the menstrual stigma a fact (Chrisler, 2011). As previously mentioned, however, stigma is highly dependent on social context, the individuals in that context, and their cultures, beliefs, values, demographics, religiosity, political views, etc., which implies that stigmas persist to various degrees (Sabri, Manceau & Pras, 2010; Wilson & West, 1981).

In most societies today, it is deemed acceptable to advertise menstrual products, as although menstruation may remain something to be concealed both verbally and physically, it is still considered viable for women to be able to manage their menstruation with suitable products (Kissling, 1996). Advertisements thus represent one of the few forums in which public discourse on menstruation and menstrual products exists. Although it may have evolved somewhat over the last decade or so, that discourse continues to reaffirm aspects of the menstrual stigma such as emphasizing that products are discreet and help women stay fresh, implying that menstruation should be concealed since it is unclean (Carvalho, 1997; Johnston-Robledo & Chrisler, 2013).

Although a rather substantial body of research has addressed destigmatization, or stigma reduction in the psychology domain, there is still much to be learned about the factors that affect the process of destigmatization, in particular destigmatization of products (Barlow, Verhaal & Hoskins, 2018b; Dioun, 2018; Helms & Patterson, 2014; Slade Shantz et al., 2018). Studies that come close to explaining destigmatization processes include Clair, Daniel, and Lamont's (2016)

and Mirabito et al.'s (2016). The former is primarily geared toward individual stigma, however, and is, thus limited in its capacity to explain product stigma. The latter comes closer but addresses organizations' ability to affect destigmatization, mainly in terms of a retail situation. I argue that the role of organizations in destigmatization processes can be and are much greater than in a retail role, such as how they interact with consumers in other capacities, including in product development processes and addressing consumer demands.

1.2.4. Neo-institutional Theory

When looking to theory for an explanation of the factors that affect destigmatization processes that complements that of previous research on stigma with regard to fields consisting of actors from various sectors, the most viable option is that of neo-institutional theory (Scott, 2013). The theory holds that actors co-existing in a certain institutional setting will affect and be affected by each other's behavior through the establishment of certain common taken-for-granted conceptions (such as norms, values, rules, understandings, etc.) that shape the social setting. Patterns of action in accordance with such notions become institutionalized when actors in that system internalize them, allowing for them to become part of their own character, which results in morally, as opposed to instrumentally, guided behavior. Contrary to other arguably viable theories that address such matters, including for instance culture theory, institutional theory discusses regulative matters as a part of institutions (Scott, 2013). I argue that regulation, for example, in the form of product classification and standardization, plays a role in the destigmatization processes.

As the theory progressed, neo-institutionalists went on to develop a framework of three main analytical elements that constitute institutions, namely regulative, normative, and cultural elements (DiMaggio & Powell, 1983). Scott (2013, p.57) describes the framework using the metaphor of an institutional structure built from these elements, which represent durable building blocks that provide "elastic fibers that guide behavior and resist change." Institutions can thus be defined as consisting of "regulative, normative, and cultural-cognitive elements, that together with associated activities and resources, provide stability and meaning to social life" (Scott, 2013, p.56).

The pillar that is of particular interest with regard to menstrual product destigmatization is the cultural-cognitive pillar. This pillar emphasizes the significance of behavior shaped by how people interpret and reflect their social environment. Symbols are constructs of, for instance, words, signs, and gestures and signify the meanings that people attribute to things, people, and actions, which in turn occur in interaction and are sustained and altered in accordance with the constant course of action (Scott, 2013). Neo-institutional theory is comprehensive in nature and applicable in virtually any societal setting. It has previously been applied in an institutional setting where stigmas – as examples of taken-for-granted notions in a certain social environment – are embedded, but primarily with a focus on organizational or industrial stigmas, and limitedly product stigmas. The details regarding why research on stigmatized organizations and industries fall short in explaining the occurrences around stigmatized products will be further discussed in the forthcoming literature review. Furthermore, previous research on stigma in the context of marketing of stigmatized products show that stigmas have the ability to affect consumers' thoughts, feelings, and behaviors, as well as those of other actors in a field (Ellen & Bone, 2008).

The stigmatization of menstruation and menstrual products, including the behaviors and practices that are associated with it, is so prevalent that one might argue that it has become institutionalized. Specifically, they can be seen as institutionalized as a part of a larger institutional process where gender norms are constructed and reproduced, in accordance with a feminist institutional argument (Kenny, 2014). For instance, one could argue that it would be logical for the liquid that illustrates absorbency in menstrual product advertisements to be red rather than blue and that there are standards and regulations in place to ensure that products that we use on or inside our bodies are safe. One explanation for the disinclination to display red liquid could be the stigma that prohibits media from showing liquid that is too similar to actual menstrual blood (Chrisler, 2011; Johnston-Robledo & Chrisler, 2013). The stigma could also likely play a role in preventing discourse, which in turn limits public pressure toward stimulating research, knowledge generation, innovation, standardization and testing methods, and so on.

1.2.5. Studying a field setting

Fields are increasingly viewed from a structural point of view, where they are considered to "be comprised by multiple logics, or by indeterminacy, ambiguities or contradictions, opening theoretical spaces for action" (Schneiberg & Lounsbury, 1986, p.281). This notion relates to the ambiguities outlined in the empirical background, including the slow product development and lack of standardization of menstrual products. A field perspective provides increased clarity on the relevance and roles of different actors, not only in the menstrual product *industry* but also in the menstrual product *field*. The distinction between these two is that while the industry consists of the private actors in the supply chains of goods, the field incorporates all stakeholders in menstrual products, including governmental organizations, consumer organizations, consumers, standardization organizations, researchers, experts, and specialists, etc. (DiMaggio & Powell, 1983).

The field concept is not necessarily limited to actors and their networks, but can rather – or, according to Djelic and Sahlin-Andersson (2006), *should* rather – incorporate the study of "individual behaviors, studies of interactions and processes, together with studies of institutional and cultural forces – the latter both shaping and structuring both patterns of behaviors and patterns of interactions" (Djelic & Sahlin-Andersson, 2006, p.25).

Furthermore, as destigmatization research often argues that destigmatization processes tend to occur from a top-down perspective (Clair, Daniel & Lamont, 2016), it is imperative to include the institutional level, as well as the individual and organizational. Additionally, a market perspective would imply that we are dealing with a market problem. This would be to diminish the complexity of a more or less worldwide social problem, namely the stigmatization of menstruation and menstrual products, which affects half of the world's population.

1.3. Conclusion of background, purpose, and structure of the thesis

1.3.1. Conclusion of background

In summary, there are several market characteristics that are underdeveloped or lacking in the empirical area of menstrual products. One potential explanation is the fact that these products are stigmatized. An illustrative example is standardization, or rather the lack of standardization, which is an interesting characteristic to investigate further in the study, since it is concrete, conspicuous, and significant for stakeholders in the field, in terms of product safety and as a communication tool between manufacturers and consumers to govern in the absence of governmental regulations. Furthermore, despite the effects that a stigma might have on institutional fields, there is a paucity of research on the destigmatization of products and the effects of such a process on the field.

Furthermore, interest in stigma is growing among researchers, and while stigmatized industries as well as stigmatized organizations have been studied from a neo-institutional perspective to some extent, the matter of stigmatized products has been limitedly discussed from such a perspective. As several of the characteristics, as well as the stigma related to menstrual products, seem to be changing in the field, the connection between stigma and institutions builds on institutional change as an interesting concept to address within this scope, especially as there is emergent literature about it.

While previous research addresses the ways in which stigma can affect and be affected by characteristics and cultural constructs in field settings, limited attention has been paid to how norms and values shift over time to cause reductions in stigma. Nor has much attention been paid to the interrelationships between actors in a stigmatized product field and the meanings and pathways through which less stigmatizing ideas become available to the public (Clair, Daniel & Lamont, 2016). One such way is through policies, laws, and standards that are set to address the needs of those stigmatized. While it may be difficult to compare menstrual products to other types of products due to their categorical and biological uniqueness, they can regardless be compared to other types of stigmatized products, such as condoms, sex toys, tobacco, and alcohol and

especially those significantly similar in composition and usage such as incontinence products.

1.3.2. Purpose and structure

The purpose of this study is to increase the understanding of the factors that contribute to the destigmatization of menstrual products. The study contributes to theory on stigmatized products and institutional change. Additionally, a combination of these domains has yet to be explored systematically.

I formulated two main research questions to help me address this purpose:

- What factors are contributing to the destigmatization of menstrual products?
- How are these factors contributing to the destigmatization of menstrual products?

In order to answer these, I conducted a qualitative case study through a multi-method approach. Firstly, I interviewed representatives from different sectors of the menstrual product field to gain a deeper understanding of how destigmatization is occurring and what factors are driving that process. Respondents included representatives from governmental agencies, consumer organizations, standardization organizations, incumbent manufacturers and entrepreneurs, non-governmental organizations, and a gynecologist. By gaining diverse insights into how respondents make sense of the ongoing destigmatization process, I have gained clues on how the social world where destigmatization is occurring is constructed. Through interpretation of these clues, I was able to piece together a puzzle that ends up deepening our understanding of the factors that contribute to the destigmatization of menstrual products. Secondly, I incorporated aspects of action research and had the opportunity to instigate a change initiative geared at standardizing menstrual products and increase their health and safety aspects. In this process, I searched for answers to my research questions, using action research together with the Swedish Institute for Standards as a means to deepen our understanding of the empirical phenomenon of interest and theorize about it, as opposed to doing action research in order to create theory about social interventions (Greenwood & Levin, 2007). Finally, I complemented these approaches with document studies in instances where I was unable to speak

directly to influential people or movements such as Liv Strömquist and Clara Henry.

In short, this study contributes with a deeper understanding of three main aspects. First, the comprehensive nature of this study in and of itself is unique in addressing all three levels of society and the multitude of factors and mechanisms contributing to destigmatization in a field setting. In particular, it focuses on menstrual products, which have seldom been addressed in business research, other than in terms of advertisement. Second, previous research on destigmatization of products emphasize the role of government and top-down interventions toward destigmatization (Clair, Daniel & Lamont, 2016). This study demonstrates that destigmatization of products also occurs from the bottom-up, initiated and driven by social movements in combination with consumers and organizations. Third, and finally, this study contributes to a deeper understanding of organizations' role in destigmatization processes. Previous research has discussed corporations' role, primarily in terms of avoiding stigmatizing, in particular in their retail function (Mirabito et al., 2016). My study shows that corporations and their innovative capacities as well as the related market mechanism hold the ability to affect destigmatization and institutional change by challenging dominant notions and participating in reconstructing symbols and attitudes associated with stigmatized products.

The audience that this thesis is directed at includes many different actors, particularly, as the matter of menstruation and menstrual products and their destigmatization potentially affects such a large number of people. In another empirical sense, my thesis contributes to a deeper understanding of destigmatization of both menstrual products and, by extension, other stigmatized products, for any actor in such a product field. This includes findings that can aid in developing business strategies geared at driving destigmatization of products. Additionally, this thesis informs healthcare workers, including nurses, gynecologists, and obstetricians as well as youth center workers about mental and physical issues that menstruating people might be dealing with and how such matters might be destigmatized. In a narrower scope, however, this thesis speaks to scholars researching destigmatization, and in particular destigmatization of products. It also speaks to those researching institutional change, where I argue that destigmatization can be seen as an example of such change.

The thesis is structured as follows. In the chapter following this introduction, I present my literature review. In the following chapter, I discuss the methodological and epistemological considerations behind this study. Next, the findings are presented in four chapters. The first chapter commences with a discussion on the empirical indications of the existing stigma in the menstrual product field and evidence of the first steps toward destigmatization. Following this, three chapters discuss one mechanism each driving the destigmatization process. These three mechanisms consist of reclassifying, framing, and claiming agency. The final chapter provides a discussion, where I emphasize my key findings and contributions. This chapter includes a discussion about the limitations of this study and suggestions for future research as well as a conclusion of the thesis.

2. Literature Review

In the following chapter, I present my formal theory, namely stigma theory and my supporting theory, neo-institutional theory. The theoretical contribution of this study is primarily geared toward the stigmatized product literature within business management, to in extension inform managers and policy makers of aspects that might affect their strategic choices and potentially alleviate challenges associated with a product group that is stigmatized (Gregory, Flynn & Slovic, 1995). Due to the relatively limited, albeit rapidly growing, body of research on the destigmatization process, I will apply the theory on institutional change as a supplement in order to understand more about the process in a field context, where not only cultural-cognitive aspects play a part but also normative and regulative aspects. However, as neo-institutional theory is broad and comprehensive in its nature, only a few parts thereof are mentioned and utilized for the purpose of this thesis.

2.1. Stigma

2.1.1. Defining the concept of stigma

The theoretical concept of stigma dates back to the 1960s and Erving Goffman who perceived stigma as the process of an individual's social status going from 'normal' to 'discredited' due to some attribute possessed by the individual (Goffman, 1963). Since then, the concept has undergone major developments in multiple research domains. The majority of studies on stigma have been conducted within the field of psychology, placing focus on the individual and the effects that stigmatization has on his or her identity and behavior. According to LeBel (2008), there was a widespread surge in stigma research across social sciences at the end of the last century, which continues today. In the sociology field, for

instance, attention has increasingly been paid to the social processes that occur in the stigmatized individual's socio-cultural environment and how these are reflected in the individual (Kleinman & Hall-Clifford, 2009). In particular, Link and Phelan (2001) propose a model of stigma, which includes components of structural discrimination, i.e., the disadvantages that stigmatized individuals and groups are subject to in society. This study opened up for further research on the social structures in which stigma is embedded.

Research on stigma continued in the anthropology domain where discussions of the ways in which stigmas are engrained in moral, or normative, social contexts emerged. According to this perspective, individuals hold a certain moral status in relation to their social environment. Maintaining a moral status is dependent on social norms and expectations, which stigmatized individuals or groups, per definition, cannot meet due to their perceived differences. This can further inhibit them from attaining that which is commonly held by society as desirable, such as "wealth, relationships and life chances" (Kleinman & Hall-Clifford, 2009, p.418). In order for stigmas to change, there is also a need for fundamental shifts in culturally held morals, beliefs, and norms.

Due to this spread as well as the multifaceted nature of stigma, there is a corresponding range of definitions and conceptualizations thereof. Link and Phelan (2001, p.365) review a particularly influential definition, proposed by Jones, Farina, Hastorf, and Markus (1984 cited in Link & Phelan, 2001), which in turn is based on Goffman's (1963) notion that stigma can be viewed as a relationship between an "attribute and a stereotype." They go on to define stigma as a "mark," or attribute, which connects an individual to undesirable characteristics, i.e., a stereotype. Link and Phelan (2001) further develop this definition by adding the component of discrimination. Their definition is employed throughout this thesis, where stigma can be understood as "the co-occurrence of its components–labeling, stereotyping, separation, status loss, and discrimination–and further indicate that for stigmatization to occur, power must be exercised" (Link & Phelan, 2001, p.363).

2.1.2. The four components of stigmatization

To understand more about the concept of destigmatization, it is helpful to understand how a stigma is constructed in the first place, as well as its effects. To

do so, it is in turn important to understand the causes and the mechanisms that occur in people's cognitions when stigmatizing. The previously mentioned model by Link and Phelan (2001) well explains how the different components of stigma interrelate. They present four components that together produce a stigma. These components are 1) people discern and label differences between individuals, 2) dominantly held cultural beliefs connect labeled individuals with undesirable qualities, i.e., negative stereotypes, 3) labeled individuals are categorized to establish a degree of differentiation between 'us' and 'them,' and finally, 4) labeled individuals experience discrimination and a loss of social status that result in unequal outcomes. These components will be discussed in greater detail in the following section.

2.1.2.1. Component one – On distinguishing and labeling differences

As humans, we ignore most of the characteristics that differ between us, such as food preferences, eye color, height, etc., rendering them irrelevant from a social perspective. Other characteristics, however, have been given greater significance through socially constructed meanings attributed to them. These include gender, skin color, age, sexual preferences, mental illness, IQ, weight, etc. Through these and other categories, people label each other through cognitive processes that we pay no attention to. It is the fact that this classification occurs automatically and is taken-for-granted that gives it strength in society (Link & Phelan, 2001).

Link and Phelan (2001) refer to two ways in which we can observe the inherently social aspects of social labeling of human differences. First, considerable generalization is needed in order to create categories. An illustrative example is the differentiation between "black" and "white" people. This distinction is made, although the scale of skin color obviously is not a two point one, but rather implies infinite variability. The same goes for the characteristics that stereotypically are attributed to the categories. This is applicable to other groups as well, such as hetero- or homosexual people, disabled or abled-bodied people, etc. Second, the dependence on social construction with regard to human categorization is highly apparent when considering its inconsistency across space and time. For example, in the late 1800s, people in Western societies believed that an individual with a large face and small forehead was likely to have criminal tendencies.

2.1.2.2. Component two – On associating human differences with negative attributes

The association of certain categories with specific negative attributes through the process of stereotyping is the most salient aspect within studies on stigma. This body of research illuminates the cognitive processes that underlie labeling, categorization, and stereotyping in a very fruitful way. As previously mentioned, they generally occur automatically, which psychologists ascribe to cognitive efficiency (Macrae, Milne & Bodenhausen, 1994). In other words, stereotyping "preserves cognitive resources." This is because by jumping to conclusions, the brain does not have to consider every possible scenario, which would take up a lot of cognitive resources that can instead be used for something else (Link & Phelan, 2001, p.369). Psychologists thus imply that culturally assigned "categories are present even at a preconscious level," and cognitive outcomes can vary substantially depending on the cultural context.

2.1.2.3. Component three – On separating 'us' from 'them'

Having already labeled, categorized, and stereotyped someone, it is not a stretch to establish a separation between "them" versus the rest of "us." "They" are different kinds of people, or if taken to the extreme, "they" can even be de-humanized, which is the fundamental concept that underlies humans' ability to treat other humans inhumanely, for instance, by killing "them," raping "them," or having "them" as slaves (Morone, 1997). Less horrific manners in which people separate themselves from those stigmatized are apparent when individuals are not only attributed a certain characteristic, but are thought to embody, or "be," that quality. For example, calling someone a "schizophrenic" as opposed to someone who has schizophrenia. For illnesses that are not mental and hence, not as severely stigmatized, it is more common to say someone has cancer, a cold, or heart disease. In that scenario, the person is sick but is still regarded as one of "us."

2.1.2.4. Component four – Status loss and discrimination

As previously mentioned, this component is not as commonly incorporated into definitions of stigma as the three above. In accordance with Link and Phelan's (2001, p.371) arguments, however, an individual is stigmatized when the fact that he or she is labeled, differentiated, and associated with undesirable attributes, a rationale is built for "devaluing, rejecting and excluding them." When people are devalued, rejected and excluded, they are de facto subjects of status loss and

discrimination. The notion that status loss and discrimination should be included in the concept of stigmatization is further substantiated in empirical findings. These show that stigmatized individuals and groups are generally disadvantaged in the matter of life chances, including socially, economically, psychologically, and with regard to access to medical treatment, education, health, and so on.

2.1.3. The Stigma Turbine

While more comprehensive studies on stigmatized products, especially studies that address the effects of product stigmatization, in a field setting are scarce, Mirabito et al. (2016, p.171) attempt to compile previous stigma research by proposing a model they call the stigma turbine to offer a more integrated and processual conceptualization. The authors address the multifaceted nature of stigma including characteristics in the social, political, and marketplace landscapes that affect and are affected by stigma.

The authors argue that four unique characteristics of the stigma turbine enable it to bridge the previously fragmented nature of stigma research and more comprehensively address the complexity of the concept. First, it accommodates intersectionality. Previous studies have most commonly addressed stigma from an individual identity perspective, such as how a person relates to their stigma and the identity that they wished they had portrayed instead (Kowalski & Chapple, 2000). The stigma turbine attempts to incorporate aspects that affect and are affected by the individual as well as society and the marketplace, an interaction, which occurs at the hub of the blades where the three objects of stigma co-create, and codify those beliefs, values, and other factors that affect the force of stigmas.

Second, the stigma turbine is embedded in contextual forces that enable it to capture the dynamic nature of stigma, which has only been addressed a few times in marketing studies. Third, those contextual forces take into consideration that the turbine can be blown in both the directions of increased or decreased stigmatization, whereas previous research had not yet addressed that such forces can co-exist, and that one side might prevail as dominant over the other. Fourth, and finally, the turbine metaphor is applied to its full extent when Mirabito et al. (2016) argue that the stigma turbine transforms the energy from contextual winds into powerful forces, which can either strengthen or weaken a stigma.

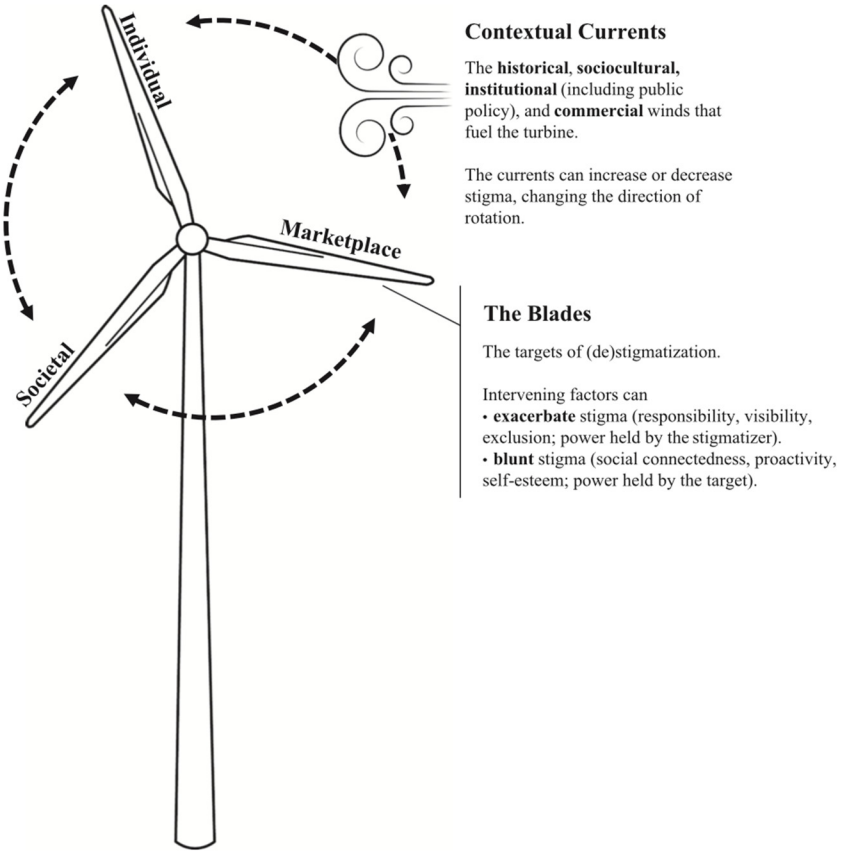

Figure 1. The Stigma Turbine (Mirabito et al., 2016, p.172)

They apply the metaphor of a wind turbine, incorporating the three aspects to changes in a stigma. 1) Contextual currents in the form of sociocultural, historical, institutional, and commercial "winds," which energize the stigma turbine and form the sources of stigma, 2) Counter currents caused by intentional actions such as policy making, marketing, the media, and other institutional forces that dampen the blow of those that increase stigmatization and can cause destigmatization, and 3) the three blades of the stigma turbine consist of what Mirabito et al. (2016) refer to as the main objects of stigma: individuals, society, and the marketplace. The first component of the stigma turbine, the currents, or

winds, comprise four types of pressures that can drive stigmatization or destigmatization.

2.1.3.1. Sociocultural winds

As previously discussed, cultural institutions uphold stigmas through "norms, behavioral cues, and social codes," which are supported and enforced by "governmental, religious, arts, educational, and medical institutions." This is done through the (re)production of symbols, attitudes, and customs to impart and reinforce "normal" socio-cultural behavior. Mirabito et al. (2016, p.173) argue that within cultures, the experience of stigma can be shaped by physical spaces, including "retail spaces, public spaces and neighborhoods" if they are able to bring relief to individuals' stigmatized characteristics. Simultaneously, communities can destigmatize through the reinforcement of "shared understandings, norms and prescriptions" (Mirabito et al., 2016, p.173).

2.1.3.2. Historical winds

The authors pay less attention to this pressure but argue that stigmas hold more or less fortitude in different historical periods, exemplifying with, for instance, the destigmatization of childless families, as family sizes in the global North have diminished (Mirabito et al., 2016).

2.1.3.3. Institutional winds

Third, institutional winds consist of, for instance, legislation and policy making to address stigma. The authors argue that policy makers and legislators must take care in their work so as to prevent the further destigmatization of the targeted group. An example is the school food programs to address food insecurity, where eligible students refrained from participating due to fear of stigmatization. On the other hand, institutional winds have the power to destigmatize efficiently, such as in the case of court rulings endorsing same-sex marriage, thus destigmatizing homosexuality.

2.1.3.4. Commercial winds

Finally, Mirabito et al. (2016, p.173) recognize the role of companies in reinforcing stigma or destigmatizing through, for instance, their "product offerings, pricing policies, distribution practices, brand communication activities, and customer segmentation strategies, manufacturers, marketers, and the media

can both perpetuate and attenuate stigma." The authors exemplify with Dove's commercial, which tackled stereotypes of the perfect body, what they called "Real Beauty." In this campaign, Dove made a point to show a diverse group of women, both in terms of skin color, hair texture, body shapes and sizes, age, birth marks, stretch marks, and so on.

2.2. Stigmatized products

2.2.1. Positioning stigmatized products

Previous research addresses a number of concepts related to stigma in a field setting, including stigmatized industries as well as stigmatized organizations. The main reason why these studies fall short of explaining what is going on in a product field is because this literature often focuses on the stigma as it applies to the organization or industry in question. However, in the case of stigmatized products, the stigma is not necessarily attached to the organization as such, nor the industry, if it were not for the products that they deal with (Devers et al., 2019). Hence, there is a distinction between what the stigma pertains to.

In organizational contexts, the stigma is often seen grounded in actions taken and decisions made by employees of the organization, such as bankruptcies, and it is usually context specific. When it comes to stigmatized products, however, the stigma does not pertain to actions taken by any person or people, but rather the concept that it is associated with, in the case of this study, menstruation. The stigma of the product is often transferred to the user, and thus can perhaps be seen as closer to an individual stigma than an organizational one. Some researchers argue that individual stigmas are generally pervasive across contexts, which is also the case of the menstrual product stigma (Devers et al., 2019). Furthermore, this implies that in the case of stigmatized products, organizations and industries might still be seen as non-stigmatized.

In line with Goffman's reasoning, Devers et al. (2019) argue that, "[w]hereas an organization can attempt to decouple itself from the stigma by removing offending members (e.g., terminations) and units (e.g., divestitures), absent complete identity change, avenues for decoupling are rarely available to individuals (Goffman 1963)." It could be argued that products can be decoupled

with stigma, if there are particular aspects or parts of the product that are stigmatized, such as an ingredient or a logo that is interpreted as offensive, which can be changed. On the other hand, if it is the type of product that is stigmatized, then such decoupling is not available in the same way. Furthermore, because products do not consist of people who can take actions, such as organizations or industries, I argue that the processes by which they can become destigmatized differ.

2.2.2. Defining the concept of stigmatized products

The concept of stigmatized products was first introduced by Wilson and West (1981, p.92), who referred to them as 'unmentionables.' They defined these as "products, services, or concepts that for reasons of delicacy, decency, morality, or even fear tend to elicit reactions of distaste, disgust, offense, or outrage when mentioned or when openly presented." When discussing the causes of unmentionability, the authors argue that there can be many and that they can vary across time and space. They continue by stating that, "customs, religious and social mores, and personal inhibitions create many unmentionable products, services, or ideas for which it is obvious that, if the emotive issues and taboos could be removed, promotion and increased use would contribute to the public good" (Link & Phelan, 2001, p.94). Proposed factors that can differentiate unmentionability from one setting to another include "education, position in the family life cycle, […] cultures and ways of thought." In other words, Wilson and West (1981, p.96) refer to cultural-cognitive factors and likely by extension, stigma.

Wilson and West (1981, p.96) state that they do not make moral judgments as to whether unmentionability is good or bad for society, all the while arguing that the removal of the unmentionability would be an "obvious" contribution to the public good. Instead, coming from a strict marketing perspective, they recognize that it has severe consequences for certain business functions, such as a difficulty in reaching out to potential buyers.

They further distinguish between two categories of unmentionables, based on their social acceptance. The first type includes those generally unacceptable, yet tolerated, such as prostitution or pornography. These are not marketed openly, but their mere demand creates supply. The second type is socially acceptable but

not openly acknowledged or discussed. Consumers purchase these products or services only when they build up a need so large that it overpowers the shame and embarrassment associated with the event. This category includes e.g., condoms, menstrual products, death related services, certain medical treatments, etc. Interestingly, when discussing the unmentionability of menstrual products and hemorrhoids in a different part of the paper, the authors state that these products are unmentionable in a public context, but are "probably mentioned all the time in private" (Wilson & West, 1981, p.94). It seems rather contradictory that something so sensitive would be mentioned "all the time" in private contexts. In fact, other research shows that even in private, such subjects are only discussed in highly specific social contexts (Johnston-Robledo & Chrisler, 2013).

Furthermore, Wilson and West's (1981) first category of unmentionables is that which institutional theorist Scott (2013), as well as stigma researcher Jensen (2006, p.5), refer to as normatively illegitimate products or services. They apply the definition, "a product is normatively illegitimate if broad groups of people believe that it violates important social norms and values and therefore view the product as socially inappropriate." Examples include "abortion, alcohol, birth control, gambling, guns, and pornography." Jensen (2006) argues that most people tend to avoid association with such products due to a fear of stigmatization. By extension, those products or services thus can also be regarded as stigmatized (Vaes, 2014).

Scholars who explicitly refer to product stigma include Pam Scholder Ellen and Paula Fitzgerald Bone (2008, p.69). They employ the definition coined by Kasperson, Jhaveri, and Kasperson (2001), stating that stigmatization of a product is when "a mark placed on a person, place, technology, or product associated with a particular attribute that identifies it as different and deviant, flawed or undesirable." This definition expands that of Goffman, with the inclusion of the subjects: place, technology, and product, as opposed to solely individuals.

Referring back to the review of stigma literature above, we know that a dominant aspect of stigma is the desire to avoid association with those stigmatized. Vaes (2014) discusses product stigma from the perspective that the product signifies the attribute or mark that stigmatizes the individual. This implies that regardless of whether it is a person or product that is stigmatized, an individual associated with either will be exposed to some degree of stigmatization (Jensen, 2006).

While some variations occur, most scholars categorize stigmatized products and services in similar ways. Table 1 shows a compilation of contributors, the terms and categories they used, and their examples.

Author(s)	Year	Terminology	Categories	Examples
Wilson & West	1981	Unmentionables	Products	Personal hygiene, defense related products, drugs for terminal illness, birth control
			Services	Abortion, vasectomy and sterilization, venereal disease, treatment for mental illness, material preparation for death, artificial insemination
			Concepts	Extreme political idea, emotional preparation for death, unconventional sexual activities, racial or religious prejudice, terrorism
Katsanis	1994	Unmentionables	Unhealthy products	Cigar, cigarettes, chewing tobacco, beer, wine, hard liquor
			Environmental products	Fur coats, disposable diapers, tuna fish (dolphins), cosmetics (rabbits), chemical fertilizers, aerosol sprays, perfume (whales), guns
			Personal hygiene/ sexually oriented products	Athletic supporters, condoms, sexual aids, pornography, sanitary napkins, tampons, douches, pregnancy tests, jock itch spray or powder, birth control, vaginitis treatment, enemas, suppositories, laxatives, adult diapers, feminine hygiene spray
			Personal hygiene/self-improvement products	Foot odor products, acne medication, dandruff shampoo, dating services, plastic surgery, psychological counseling, weight loss programs, lice removal shampoo, wart remover ointment, hair dye, electrolysis (hair removal), hair replacement treatment
Shao & Hill	1994	Sensitive products	Socially embarrassing products	Underwear, condoms, female hygiene products, sex diseases
			Legally restricted products	Cigarettes, alcohol, pharmaceuticals
Waller & Fam	2000	Controversial products	Products that cannot be legally advertised	Racially extremist groups, guns and armaments, gambling, religious denominations, political parties, funeral services
			Products that can be advertised with limitations	Alcohol, cigarettes, condoms, female contraceptives, female underwear, male underwear, menstrual products, pharmaceuticals

			Products that can be advertised as ordinary products	Sexual diseases (AIDS, STD prevention), charities, weight loss programs
Fam & Waller	2003	Controversial products	Social/political products	Racially extreme groups, religious denominations, guns and armaments, funeral services, political parties
			Addictive products	Cigarettes, alcohol, gambling
			Sex related products	Female and male underwear, condoms, female contraceptives, menstrual products
			Health and care products	Weight loss programs, charities, sexual disease drugs
Prendergast & Chia Hwa	2003	Unmentionables		Dating agencies, men's underwear, gambling, funeral services, weight loss products, alcoholic beverages
Dahl, Darke, Gorn & Weinberg	2005	Stigmatized products		Condoms
Waller, Fam & Erdogan	2005	Controversial products	Social/political products	Racially extreme groups, religious denominations, guns and armaments, funeral services, political parties
			Addictive products	Cigarettes, alcohol, gambling
			Sex related products	Female and male underwear, condoms, female contraceptives, menstrual products
			Health and care products	Weight loss programs, charities, medication for sexually transmitted diseases
Taute, Lukosius & Stratemeyer	2008	Unmentionables	Harmful products	Guns, alcohol, cigarettes
			Embarrassing products	Personal hygiene, sexual health
			Marketing directed toward vulnerable groups	Children, adolescents, elderly
Huff & Wilner	2015	Stigmatized products		Sex toys
Huff, Humphreys & Wilner	2016	Stigmatized products		Legalized recreational marijuana

Table 1. Contributions and examples of stigmatized products

2.2.3. Product stigma's effects on fields

Based on the relatively few references to the concept, it is, however, clear that product stigma can have significant effects on fields (Ellen & Bone, 2008). Previous research indicates a number of such effects, which are outlined below.

2.2.3.1. Lack of discourse

Further effects include a lack of discourse among consumers, which can have multiple implications such as reduced word of mouth marketing, difficulty in reaching target consumers, and difficulty for consumers to find products they would want or need as well as information about them. An aspect that further increases communication barriers between manufacturers and consumers is the use of euphemisms in, for instance, advertisements, which can create confusion as to what the products are really intended for and how they should be used (Katsanis, 1994; Wilson & West, 1981).

2.2.3.2. Marketing challenges and reduced demand

While stigma can result in reduced demand for certain products, other stigmatized products are more or less necessary; thus, demand is somewhat constant. These products are often associated with health conditions such as vaginal yeast infection treatments, jock itch creams, and menstrual products. Katsanis (1994) argues that because consumers are more likely to seek information about these products in advertisements than risking stigmatization by asking others, it is particularly important to provide accurate and high quality information when marketing such products. As Katsanis (1994, p.7) states, "conventional tools used in advertising are problematic. Humor, for example, is not used, for fear of ridiculing the consumers that manufacturers are trying to reach. Demonstrations of certain products would probably be helpful, but also are not used for fear of offending."

Furthermore, according to Katsanis (1994), marketers of stigmatized products undergo a delicate balancing act between the fear of pushing boundaries of social acceptance, which can result in increased stigmatization and adhering to existing conventions and taking the risk of being seen as too timid (Katsanis, 1994; Vaes, 2014; Wilson & West, 1981). This balance is inherently based on the broadness of the audience, since products are stigmatized to different extents based on the message receiver. Hence, market segmentation is considered as being an efficient way to overcome such challenges (Katsanis, 1994), where social media provides a very efficient outlet (Jain, Bansal & Misha, 2019).

2.2.3.3. Lack of consumer research and innovation

The lack of consumer research and innovation connects to the lack of discourse, as the stigma may inhibit consumers from speaking openly and candidly about

their experiences, wants, and needs (Katsanis, 1994). Product stigma can also inhibit consumer research on a product or product category, as consumers and researchers alike may find it difficult to talk about it. This can further lead to a lack of product development and innovation, particularly that which is user-centered (Katsanis, 1994). These aspects together indicate that stigma causes market inefficiencies (Ellen & Bone, 2008). Furthermore, Mirabito et al. (2016) address what they call 'The Dark Side of Market Segmentation,' which they explain as the tendency of marketers to identify the consumer segment most likely to generate the greatest profit and pursue only them. This results in a market where the needs of some segments are fulfilled, whereas others are ignored, potentially reaffirming or even exacerbating the stigma.

2.2.4. Stigmatization of menstrual products

As evident in Table 1 above, menstrual products are mentioned frequently in previous research as an example of a product category that is stigmatized. The product stigma originates in the stigma on menstruation and everything that has to do with a person's menstruating state. In order to understand the stigmatization of menstrual products, it helps to have a historical outlook on the menstrual stigma. Many feminist scholars can be credited with having done substantial research on this topic, with various approaches.

2.2.4.1. A brief account of the long history of menstrual stigma

The menstrual stigma dates back to at least the Old Testament's Book of Leviticus, and the classical times of Rome and Greece. The Book of Leviticus states that women are 'unclean' when menstruating and were, thus seen as both polluted and polluting (Newton, 2016). This stigmatization, along with the pain of childbirth and menstruation, was regarded as a punishment of the woman, for Eve's original sin in the biblical Book of Genesis. Victoria Louise Newton (2016) who has written a thorough review of the history of everyday discourses of menstruation wrote that the blood has been seen "as a sign of women's inherent sinfulness and subsequent subordination of men. Thus, it was an issue of personal, social and moral hygiene." The impurity of menstruating women was thought to be contagious, and anyone who came in contact with a menstruating woman, or a place, person or object she had been in contact with needed to be 'cleansed' of moral and physical impurity.

During this time, the blood is believed to be dangerous and needs to be expelled from the body to become pure once again; also, if it does not come out, the woman will be harmed by it. Greek medical thinkers such as Aristotle had similar beliefs, further arguing that women's souls hold less energy than men's because men are able to ejaculate with active force, whereas women's blood seeps out slowly with less energy. These ancient texts about women and menstruation became guiding documents for women's status in society as men's subordinates. The type of discourse about men's activeness and women's passiveness, where women's bodies are described as the negative counterpart to men's persisted throughout the 20th century and is seen by critical feminist scholars as a reflection of "the gaze." The gaze can be understood as the objectification of women by being seen as things to be looked at and thus, should be purely beautiful. John Berger described the notion as: "Men act and women appear. Men look at women. Women watch themselves being looked at. This determines not only most relations between men and women but also the relation of women to themselves ... Thus she turns herself into an object – and most particularly an object of vision: a sight" (cited in Malefyt & McCabe, 2016, p.559).

Goffman reaffirmed the notion of the gaze in his 1979 analysis of advertisements where he found that women were portrayed as passive through a male lens and with substantial power asymmetry between the genders. He added that the gaze does not necessarily have to be that from men; rather, it can be the perspective of institutions, including advertisement, which guides discourse and asserts what is normal in society (Goffman, 1979 cited in De Waal Malefyt & McCabe, 2016). Hence, the gaze can be seen as rooted in the male activeness and the female passiveness described by Aristotle. Emily Martin (cited in Malefyt & McCabe, 2016, p.568) articulated how menstruation is defined in medical textbooks as the "failure of an egg, lacking its essential purpose to be fertilized by a sperm."

In ancient Greece, menstruation, like women, was seen as something that needed to be controlled, as illness and impurity would come upon those who did not menstruate regularly and thus expelled substances that the body allegedly needed to get rid of. Simultaneously, in the menstruating state, women were 'untouchable.' Aristotle defined 'women,' in terms of what men are not and concluded that the female in virtually every species was physically weak and inferior to their male counterpart (Newton, 2016).

Further, early Roman records have been found to dwell upon not only the hurt that people can sustain if they come into contact with menstruation or a menstruating woman. Rather, if menstruating women were to come into contact with foods, drinks, crops or fruit trees, etc. these were thought to become sour and thus be inedible. Mirrors would become dull, ivory would fade, and iron and bronze would become rusty and blunt immediately. On top of this, menstruation was thought to fill the air with a foul smell. This destructive power of menstruating women was also thought to affect the weather. Moreover, it could cause death, for instance, to beehives, unborn foals if its mother is in contact with a menstruating woman, and not least men if they were to have sex with a woman during her menstruation.

Although medical research advanced, notions about menstruation's impurity and danger lived on (and continue even today, to some extent). During the 17th and 18th centuries, if menstruation did not leave the body regularly, its buildup inside the body was thought to cause harm and illness to the woman, and if this went on for long enough, it was thought to come out of other parts of her body such as the rectum, the nose, through vomit, in the urine, or the mouth (Newton, 2016).

In spite of how women were portrayed as being volatile creatures who cannot be depended upon as workers, women took on this role quite capably during the First World War between 1914 and 1918. Subsequently, however, when women were no longer needed in work life, studies researching the effects of menstruation on women and their physical and mental statuses were manipulated in order to present findings in an unfavorable light for women. This coincided with the first identification and naming of premenstrual syndrome (PMS). Women who were diagnosed with PMS were often ordered to stay home from any work they may have or even to bedrest for one or two days. Modern studies further show that at the start of the Second World War, studies showed in contrast that women were only affected by menstruation to a limited extent. Scholars conclude that when women are seen as necessary waged workers, there is an interest in portraying menstruation as insignificant in affecting women negatively. Simultaneously, when women are no longer regarded as needed, and men want their jobs back after the war, research has emphasized menstruation's negative effects on women as well as them being unfit for waged work (Newton, 2016).

Between the years 1943 and 1997, manufacturers developed and distributed information booklets about menstruation publicly across the United States.

Researchers that have studied these through content analysis have found that the booklets signaled negative attitudes toward menstruation, which they posed as a problem of hygiene, objectified the female body and encouraged women to distance themselves from their bodily functions (Malefyt & McCabe, 2016).

Although most historical documents have been observed in places where Christianity and other Abrahamic religions have taken hold, the menstrual stigma has prevailed in cultures that do not ascribe to these as well. In cultures in Polynesia and the north American tribe of Sioux, the word for 'menstruation' also means 'taboo' as well as 'sacred' (Delaney, Lupton & Toth, 1988). The mystery surrounding women's monthly bloodshed without their seeming sickliness has been considered strange and dangerous, and the very notion of a 'taboo' can be seen as not only a way to protect society from dangerous individuals but also dangerous individuals from themselves (Delaney, Lupton & Toth, 1988).

According to Newton (2016), menstrual taboos have become so prevalent historically that they are no longer seen as a theoretical matter of challenging through research, but rather as a taken-for-granted fact in place to suppress women to a subordinate position to men. In some cultures, such as in the Beng tribe of the Ivory Coast, menstrual taboos exist not to protect individuals from being polluted by menstruating women, but to protect menstruating women from being polluted by their regular daily activities. In contrast, in certain places, there are no menstrual taboos whatsoever. One of the earliest and most prominent researchers on menstrual stigma, Mary Douglas (2001), concluded that in one such culture, among the Walbiri people of Central Australia, men already held such strong power over women that a menstrual taboo was not needed.

Because of the diversity of cultures and the gender roles therein, scholars researching menstruation from a cultural standpoint argue that no general framework can be applied in understanding menstrual stigma, universally. Instead, researchers need to employ a case-by-case approach and recognize that the constructs of such stigmas evolve over time (Newton, 2016). Research further shows that there is a relationship between the amount of independence and "freedom of choice" that women have from men's influence and the cultural conceptions about menstruation. In places where women are more restricted, menstruation is laden with a stronger stigma (Newton, 2016). What is noteworthy is that there is an underlying assumption that men hold the power to *give* freedom and independence to women, or to restrict them. The stigmatized

status of menstruation has significant bearing on menstruating people's mental and sexual well-being (Johnston-Robledo & Chrisler, 2011).

2.2.4.2. Stigmatizing discourse in menstrual product advertisements

The degree to which menstruation is stigmatized varies widely among cultures, but one way in which the prevailing stigmatization of menstruation and menstrual products is ever apparent is in menstrual product advertisements. These are the main source of the limited public discourse that exists on menstrual products and menstruation. As a matter of fact, researchers such as Carvalho (1997) argue that by examining the meanings and messages that advertisements on menstrual products have conveyed through history, the socio-cultural development of the stigma surrounding them is made visible. Having done so, she indicates that what is not to be made visible however is menstruation. That is the message which advertisements send out to women. If their menstruation or menstruating status is revealed, they run the risk of becoming discredited and deeply embarrassed. Everything about how menstrual products are designed and marketed dictates women to be quiet about their menstruation, from rustle-free packaging, to tampons in packages small enough to be hidden in the palm of one's hand, and the use of euphemisms such as "Aunt Sylvia is visiting," not to mention the use of blue liquid as opposed to a more realistic red to demonstrate absorption capacity (Carvalho, 1997, p.11; Johnston-Robledo & Chrisler, 2013).

Further discourse used in advertisements includes terms like 'fresh,' 'confident,' 'clean,' 'comfortable,' 'discreet', which indirectly yet blatantly indicate that women should be feeling the opposite, namely smelly, dirty, and uncomfortable and that it is vital that they hide it (Barak-Brandes, 2011; Carvalho, 1997; Chrisler, 2011). Scholars have started to notice a shift in how menstrual products are being portrayed in advertisements, where the discourse is becoming less stigmatizing. De Waal Malefyt and McCabe (2016) have identified two main streams of discourse where the dominant trend of advertisements throughout the 20th century represents a "protection" discourse. According to the authors, discourse in menstrual product advertisements is going through a shift from being dominated by shame and embarrassment toward one of "embodiment, personal control and comfort" and where the products are meant to cater to women's individual everyday needs. This new discourse can be regarded as a "natural" discourse and is seen as a way to address the menstrual stigma by promoting women's agency and their power in their bodies (Malefyt & McCabe, 2016). I

argue that this agency can further be seen as an opposition to the passiveness attributed to women through the male gaze, as discussed by Goffman, Aristotle and others.

Further, the mere reference to menstrual products as 'feminine hygiene protection,' as the standard name reads, emphasizes that the products are something that women need in order to protect themselves from being dirty. This name further avoids the mentioning of menstruation, hence fortifying the culture of silence surrounding it. For these reasons, I have chosen to use the term 'menstrual products' instead.

2.2.4.3. Momentum of change through contemporary menstrual activism

At the time of writing this thesis (2016-2021), current research studying menstruation finds the stigma to still be pervasive in modern day society. Scholars find the same old stigmatizing meanings expressed in new outlets, such as social media, although such platforms also enable destigmatizing communication between menstruating people through validation and bonding (Thornton, 2011). Young girls are still relying on their mothers for information about menstruation before or at menarche, but mothers are not always comfortable about discussing the matter and educational material often tends to reinforce existing stigma (Erchull, 2013).

Simultaneously, however, prominent researchers such as Chris Bobel (2010) have mapped the ongoing activism toward destigmatization, reflecting a kind of momentum that represents something new and different from what has been seen before. Menstrual activism grew out of three separate, yet related movements: the women's health movement, environmentalism, and consumer activism. These three began to intermingle during the 1970s as reactions against the issues associated with current menstrual products grew across these movements as well as the "male-dominated medical establishment" and sought to increase women's power over their bodies and health (Bobel, 2006, p.332). As part of the menstrual activism, in 1971, Judy Chicago created and displayed one of the first widely known pieces of menstrual art, a photolithograph 'Red Flag,' depicting a close-up of the artist herself removing a bloody tampon from her vulva. Her takeaway from people's reactions to this piece was the widespread denial of what the object was, to which she attributed "as a testament to the damage done to our perceptual powers by the absence of female reality" (Chicago cited in Bobel, 2010, p.47).

Menstrual activism subsequently developed its own strands, where one represents menstrual product activism, which can be defined as "various attempts to expose the hazards of commercial "feminine protection" to both women's bodies and the environment and the promotion of healthier, less expensive, and less resource-intensive alternatives" (Bobel, 2006, p.331). One of the main triggers of this movement was the TSS epidemic of the late 1970s and early 1980s when P&G, having just entered the menstrual product market, introduced their superabsorbent tampon called Rely. Menstrual related TSS then skyrocketed from very small numbers to a total of over 2,200 cases in 1983. Thirty-eight of these cases resulted in death (Tierno & Hanna, 1989). This triggered a new wave of products in which health and environmental perspectives were taken into account to a much greater extent than previously (Bobel, 2006).

Five main reasons for modern menstrual activism can be identified and are first and foremost directed at conventional products such as disposable pads and tampons (Bobel, 2006). First, the bleaching process of menstrual products raises concern for health and environmental safety associated with the risks implied with dioxins. Second, the safety of commonly used materials in tampons such as rayon, pulp and cotton are questioned in terms of fiber loss and vaginal ulceration, which have been implicated as hazardous. Third, activists are concerned about the environmental effects of disposable materials, resource use, and non-recyclability of these products. The production of these items contaminates water and causes pollution in the form of washed-up applicators and products on beaches around the world, as well as contributing to microplastics in seas and clogged landfills, sewers, and water treatment plants. Fourth, the cost of menstrual products is regarded as unnecessarily and unfairly high, as well as being a cost that only women and other menstruators have and that cannot be compared to any similar cost borne by men. Fifth, and finally, activists charge the industry of contributing to the stigma around menstruation where products and advertisements are designed to keep menstruation and the experience of menstruating hidden and obscure. This is argued to have negative consequences for women's self-esteem and menstrual experience (Bobel, 2006).

Bobel (2010) further identified six themes of contemporary menstrual product activism. Three of these can be related more directly to their precursors in the women's health movement, whereas the other half are seen as more original and innovative in their means to go about the same goals. In the first category, the first

theme is concerned with familiarization, meaning that women and other menstruators become more self-aware by getting down and dirty with one's menstruation and body in a positive manner. This is a reaction to the stigma which has discouraged women from engaging with and knowing their bodies. The second theme is the use of personal narratives and experiences to learn and create collective knowledge of individual experiences shared among menstruators. These narratives are usually careful not to romanticize experiences and often contain a number of contradictions to stay as true to their experienced reality as possible. Theme three concerns the self-effacing of the narrator. This implies emphasizing the randomness of one person's narrative, so as to encourage others to feel empowered to find and value their own experience and by no means claim to hold knowledge or power over someone else's experience.

In the second category, the first theme signifies the modern menstrual product activist's discomfort with 'cultural feminism.' In this context, cultural feminism refers to the notion of woman as being different from man and is often associated with ideas of woman as 'goddess of life and fertility.' By creating a distance between this type of feminism, activists are able to further an agenda where genders are viewed less dichotomously and where menstruating people are not required to identify deeply with their child-bearing capabilities, to the same extent. The second theme is associated with "the use of humor, reappropriation and culture jamming as tactics of resistance" (Bobel, 2006, p.340). This theme represents the tactics used by contemporary menstrual activists in order to further their agenda. The use of humor, whether it be by manipulating famous images or by creating a parody of advertisements, contributes to redefining symbols associated with menstruation. Finally, the third theme of the second category consists of including transgender people and women who do not menstruate in menstrual product activism. The important lessons to remember here are 1. Not all people who menstruate are women and 2. Not all women menstruate (Bobel, 2006). This theme directly coincides with the defining difference between the second and third wave feminism, namely intersectionality, which implies including all people in feminism, and paying particular respect to their different struggles in gender issues, whether those be related to race, sexual orientation, or gender identification.

2.3. Destigmatization

2.3.1. Defining the concept of destigmatization

Previous research on stigmatized products has primarily focused on understanding consumer attitudes toward the products and services and their advertisements. Although there is a significant body of literature on destigmatization as a concept, or stigma reduction, in psychology, there is limited research on the destigmatization process (Clair, Daniel & Lamont, 2016). Clair, Daniel, and Lamont (2016, p.224) state that, "to our knowledge, no framework considers the interrelationships between groups of actors, sets of meanings, and the pathways through which less stigmatizing understandings become publicly available." This is especially true regarding stigmatized products (Barlow, Verhaal & Hoskins, 2018b; Dioun, 2018; Helms & Patterson, 2014; Slade Shantz et al., 2018).

What is frequently found in product stigma research, just as in the case of stigmatized individuals or groups, is that the strength of a stigma is dependent on factors pertaining to the social setting (Kusuma, 2014; Prendergast & Huang Chia, 2003; Taute, Lukosius & Stratemeyer, 2008). Kusuma (2014, p.5) outlines that the degree of stigmatization of certain products is dependent on "cultural backgrounds, religion, social norms, consumers' demographics and psychographics." Examples include "age, gender, values and lifestyle." Taute, Lukosius, and Stratemeyer (2008, p.16) add education, "disposable income, consumer innovativeness and openness," stating that these can influence the rate and scale of social change.

As these forces change among individuals in a certain social context over time due to factors such as political, normative, or social pressures, so too will social acceptance, and hence stigmatization. For example, the finding that greenhouse gases are affecting the earth's climate is currently causing a stigmatization of carbon emissions in certain social settings, where sustainable living is urged, and the opposite discouraged. On the other hand, stigmas can lose fortitude due to these trends as well, for example, the Supreme Court ruling in favor of same-sex marriage in 2015 could be supporting the destigmatization of homosexuality (Mirabito et al., 2016). These types of contextual factors can be considered cultural resources, in accordance with the somewhat vague terminology employed

by scholars such as Clair, Daniel, and Lamont (2016) and will be further discussed below.

Taute et al. (2008) further outline three trends in social cognition for stigmatized products: 1) stigmatized products have become destigmatized (they give examples including menstrual products, condoms, and vasectomy), 2) stigmatized products remain stigmatized (for example, hard drugs), and 3) destigmatized products have become stigmatized (for example, fur and cigarettes). While these trends are rather straightforward, I find it questionable to classify these specific examples as general cases, as stigmatization is so socio-culturally bound. Hence, I find it difficult to believe that both fur and cigarettes have become stigmatized globally, since there are many places around the world where it is still socially and legally acceptable to, for example, smoke indoors in cafés and restaurants (Benedictus, 2015).

Likewise, while menstrual products are becoming less stigmatized in many places as of late, they are not completely destigmatized. On the contrary, many studies show that there are often still significant barriers to discuss, purchase, and display menstrual products both publicly and in private, depending on the socio-cultural context (Barak-Brandes, 2011; Davidson, 2012; Erchull, 2013; Grose & Grabe, 2014). Moreover, these categories do not account for the process aspect of ongoing change. This missing aspect can be considered as being rather important to the field, as one could argue that destigmatization processes can endure for decades, which makes a static view less relevant. One could also argue that we have much to learn about current trends that might be speeding up or slowing down ongoing destigmatization processes.

Furthermore, Clair, Daniel, and Lamont (2016, p.223) as well as Hatzenbuehler, Phelan, and Link (2013) argue that, "stigma is a fundamental cause of health inequalities because it contributes to the unequal distribution of resources and power through multiple pathways. Consequently, understanding how groups become less stigmatized can improve the wellbeing of individuals and populations."

The aforementioned authors also discuss destigmatization, which they define as the social process by which "changing social constructions of groups may facilitate the reduction of societal-level stigma over time." While this definition clearly pertains to groups of people rather than products, it could still be applicable, if not for lack of current better alternatives. Moreover, scholars argue that it is

imperative to study how different types of actors alter dominant conceptions of that which is stigmatized in real-world settings. According to Clair, Daniel, and Lamont (2016, p.224), this implies, "considering both the constructions that are advanced and the actors who create, diffuse, legitimate, and employ them. Past studies have shown how changing constructions of stigmatized conditions have influenced public attitudes over time, revealing some of the promises and perils of potentially destigmatizing constructions."

2.3.2. A framework of destigmatization

Clair, Daniel, and Lamont's main contribution of their article on destigmatization and health consists of a framework for "identifying the social conditions that contribute to destigmatization over time and across stigmatized groups" (Clair, Daniel & Lamont, 2016, p.229). It focuses on the shifting cultural constructions that surround stigmatized people and groups and the ability of those constructions to create destigmatizing outcomes.

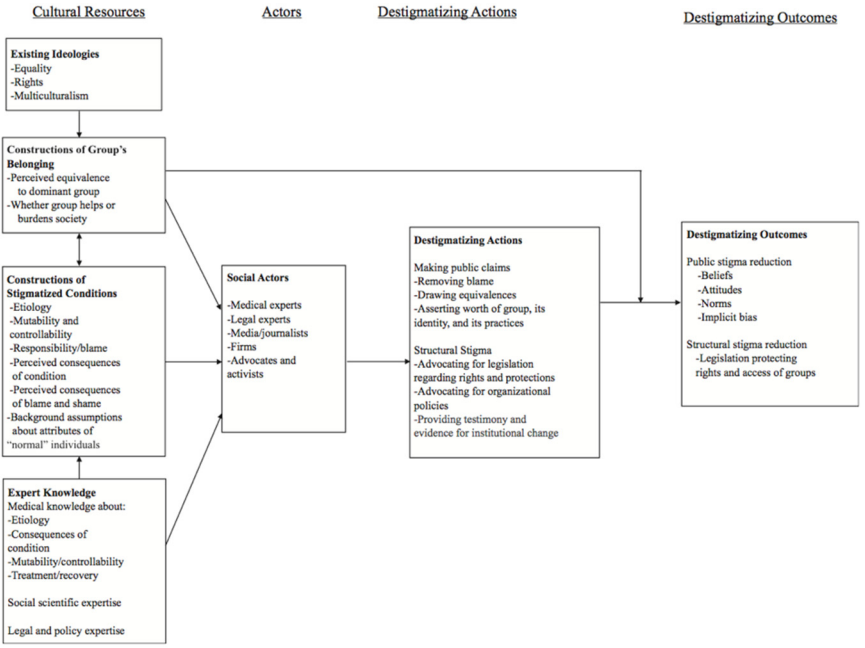

Figure 2. Cultural resources and actors contributing to destigmatization (Clair, Daniel & Lamont, 2016, p.230)

According to the authors, the main takeaway of the research and framework is firstly, the inherent need for governments to systematically reflect on "how policies might reinforce or weaken blamelessness, the creation of equivalence, and other cultural constructions that contribute to destigmatization." Secondly, organizations can to a greater extent consider how inclusive, non-stigmatizing policies might profit, not only devalued groups, but also principal group members. The scholars further illuminate and emphasize the types of actors who, in the cases they studied, prevailed as having the most potential to influence the dissemination and institutionalization of new non-stigmatized constructions. These include "legal experts, social scientists, and media professionals," who hold the ability to "foster the social conditions [they] identify as central to the destigmatization process: using their credentials and capitals to legitimate destigmatizing constructions and knowledge about stigmatized groups; challenging existing cultural ideologies that inhibit claims for inclusion and redistribution; and advocating for integration in public, social, and residential life in order to increase a sense of linked fate between dominant and stigmatized groups" (Clair, Daniel & Lamont, 2016, p.230).

This framework differs from previous attempts at describing destigmatization in the sense that it addresses stigma at the level of the collective, including institutions, norms, relationships, and interactions as opposed to the individual. The framework is displayed as linear where actors and the actions they might take to destigmatize result in destigmatizing outcomes in a cause-and-effect relationship. What seems like a limitation in this framework, however, is that destigmatizing outcomes such as progressive beliefs, attitudes, norms, and implicit biases as well as legislation protecting rights and access of groups likely affect cultural resources such as existing ideologies, actors such as the media, and destigmatizing actions including removing blame in an iterative fashion.

Finally, the framework for destigmatization developed by Clair, Daniel, and Lamont (2016) is focused on stigma and destigmatization on the societal level, or the institutional level, and discusses what they call cultural resources separately from actors and actions. This distinction makes it difficult as a reader to understand which actors have capacity to carry out what actions and in particular what those actions entail for destigmatization. Furthermore, since the framework is not geared toward products, in particular, it thus lacks precision when it comes to studying the more detailed aspects of destigmatization in an institutional field.

2.3.3. The process of destigmatization according to Clair, Daniel, and Lamont (2016)

Researchers have increasingly begun to address the effectiveness of various destigmatizing strategies. In a literature review from 2008, for instance, LeBel (2008) found that a number of previous literature reviews had arrived at a tentative consensus on destigmatizing success factors. Generally, a holistic, multifaceted and multilevel approach is required, especially through education programs and contact between those not stigmatized and those or that which is stigmatized. Such a conclusion, however, is rather general, and in order to gain a more tangible understanding of how destigmatization can be achieved and the effects it may entail, a breakdown of destigmatizing factors is needed. This was attempted by, for instance, psychology researchers Clair, Daniel, and Lamont (2016) who in their study outline a three-step model of how destigmatization occurs, which addresses Link and Phelan's (2001) four components of destigmatization.

2.3.3.1. Redefining

Firstly, reducing a stigma can be done by redefining that which is stigmatized among those who potentially stigmatize. According to the authors, such a change has the possibility of facilitating more positive communication between stigmatized and non-stigmatized, which in turn can cause a decrease in devaluing and discrimination. Clearly, it is impossible for an object, and thus a product, to communicate, so perhaps this step is more applicable to menstruating people and their interactions with non-menstruating people. An example of such a redefinition when it comes to menstrual products and menstruation could be to define menstruation as a healthy cycle that recurs monthly, as opposed to a socially constructed week of bleeding that implies dirtiness and the need for products to stay fresh and keep clean.

2.3.3.2. Changing group compositions

Secondly, changing the compositions of groups can illuminate norms guiding a group's beliefs, attitudes, and behaviors in ways that prohibit potential stigmatizers from acting in degrading ways. Although biases and prejudices can manifest on an individual level, they often are derived from injunctive norms that structure peoples' behavior. Individuals tend to avoid social sanctioning by acting in a way that does not conflict with what they think others in their surroundings

believe is appropriate, regardless of whether they endorse the beliefs themselves. This type of change does not necessarily have direct or immediate effects on implicit biases, "positive constructions are likely to strengthen positive implicit associations over time, thus reducing discrimination in the long run" (Clair, Daniel & Lamont, 2016, p.224). An example of this could be changing the constellations of company boards, where a more diverse group is likely to become less stigmatizing than a homogeneous group of yea-sayers.

2.3.3.3. Developing laws and policies

Thirdly, "stigmatizing constructions legitimate laws and policies that intentionally or unintentionally exclude stigmatized groups" (Clair, Daniel & Lamont, 2016, p.224). In order to develop laws and policies that protect the interests of those stigmatized, it is necessary to have a conviction in that group's guiltlessness. "When the dominant public lacks empathy and a sense of connectedness with a stigmatized group, they are less likely to see its plight as problematic – and when people fail to see another group's circumstances as problematic, they are unlikely to seek out or support social change" (ibid.). Although regulations cannot rule out stigmatization in ordinary everyday interactions, they nonetheless state what is normally appropriate, simultaneously as they provide citizens the ability "to defend their rights and dignity" (ibid.).

While Clair, Daniel, and Lamont's (2016) study provides a more detailed insight into the destigmatization process than its predecessors, it is more geared toward a psychological approach and does not place much focus on the role of the marketplace in stigma and destigmatization. The same year, however, coming from a marketing perspective, Mirabito et al. (2016) published their paper in which they developed the model of a stigma turbine. In the same study, they too address Link and Phelan's stigmatization process through a four-step model.

2.3.4. The process of destigmatization, according to Mirabito et al. (2016)

Furthermore, much like Clair, Daniel, and Lamont (2016), Mirabito et al. (2016) suggest a set of actions for marketers and public policy makers to take in order to reduce stigma in the marketplace. These actions address Link and Phelan's (2001) four components of stigmatization and consist of evaluating practices of labeling human differences, defusing stereotypes by breaking the connections between

labels and negative attributes, uniting rather than segregating 'us' and 'them' and reversing status loss and discrimination.

2.3.4.1. Evaluate practices of labelling human differences

The authors argue that marketers should evaluate the way they refer to different consumer segments so as not to exacerbate existing stigma. One example they provide is by using value neutral labels such as replacing "plus size" with "her size." However, because terms, which once were seen as neutral, may over time acquire negative connotations, Mirabito et al. (2016, p.176) argue that marketers need to be aware of the potential need to periodically modernize their use of terminology regarding, for instance, "product names, packaging, names of promotional activities, and so on."

2.3.4.2. Defuse stereotypes: break the connections between labels and negative attributes

According to Mirabito et al. (2016, p.176), "[s]tereotypes emerge when people's cultural beliefs and personal experiences lead them to forge a mental connection between labeled groups and undesirable characteristics." These are difficult to counteract because opposing evidence is often ambiguous, uncertain, and easy to disregard. The authors argue that for this reason, stereotypes should be addressed head on by communicating vivid contradicting information. An example of a destigmatizing event within consumer culture is the song "Born this Way," by the popular singer Lady Gaga, which effectively defused the link between "deviant choices" and LGBTQ people (Mirabito et al., 2016, p.179). This can be addressed in a marketplace setting by portraying stigmatized matters contrary to stereotypes and eliminating visible stigmatizing attributes.

2.3.4.3. Unite, rather than segregate, 'us' and 'them'

Mirabito et al. (2016) address Link and Phelan's (2001) third point, separating 'us' and 'them,' with three main factors. First, they argue that marketers can destigmatize groups by emphasizing the similarities between those stigmatized and non-stigmatized to reduce the mental distance between groups. Second, "[r]etailers and service providers can build bridges between their customers and stigmatized groups" by, for instance, hiring employees from stigmatized groups. This can facilitate customers to recognize themselves in the workforce of that company. What is important to recognize, however, is that hiring is not enough,

as there is a risk implied that non-stigmatized employees might marginalize the new recruit. To address this risk, Mirabito et al. (2016) highlight that companies must educate their employees. They explain this as needing to "create a culture of acceptance through ongoing anti-oppression training, mentoring, ally programs, advertising communications, and vigilance against ostracism" (Mirabito et al., 2016, p.179).

2.3.4.4. Reverse status loss and discrimination

The final way Mirabito et al. (2016) argue furthers destigmatization is through reversing status loss and discrimination, which can primarily be done by establishing laws and policies. Such regulations are most effective when they specifically address intentional marginalizing treatment of stigmatized groups. The authors exemplify with the Equal Pay Act, which prohibits gender-based discrimination of wages. On the other hand, laws and policies that seem neutral can arguably exacerbate stigmatization if they in practice have negative impacts on stigmatized groups. An illustrative example provided by Mirabito et al. (2016) is the reluctance of supermarkets to establish stores in neighborhoods where profits are unlikely to improve revenues resulting in so-called 'food deserts,' rendering already marginalized people with poor access to affordable healthy food. Such regulations should be sustainable, not only in terms of social aspects, however, and may require cross-sectoral collaboration between business, government, and community groups (Mirabito et al., 2016).

Another way legislation can act in a favorable position toward destigmatization is through court rulings in favor of stigmatized groups, such as legalization of same-sex marriage. Marketplace actors can in turn facilitate destigmatization by supporting customers, in terms of ensuring everyone has the same access to products and stores (Mirabito et al., 2016).

Moreover, Mirabito et al. (2016) make a number of suggestions for future research, stating that "[r]esearchers might explore the processes by which stigmas and their associated symbols evolve across historical periods, how stigmatized cultural practices and consumption rituals involving constellations of products and brands undergo perceptual shifts, and how the actions of marketplace stakeholders influence such changes." Studying the factors that contribute to the destigmatization of menstrual products, hence, can be seen as an example of these scholars' call for further research. In conclusion, the two perspectives differ,

essentially, in that Clair, Daniel, and Lamont (2016) are more descriptive, whereas Mirabito et al. (2016) are somewhat more normative, prescribing what one should do in order to drive destigmatization.

2.4. Institutionalization, deinstitutionalization, and institutional change

2.4.1. Institutionalization

Institutions consist of elements which, in combination with related activities and resources, give meaning to social aspects of our lives. These three symbolic elements are regulative, normative, and cultural-cognitive (Scott, 2013). According to Scott (2013, p.57), an institution entails a complex social structure, which has been established but can change over time. This definition is a synthesis of those discussed in previous research and is thus comprehensive and multifaceted, just as the concept itself.

Institutions exist on every level of society and are engrained in the social structures in which we live and act every day. Individuals both affect and are affected by institutions. Hence, the implication is that our behavior determines which norms, values, beliefs, rules, etc., expressed through symbols, spread and become adopted by more and more people, creating patterns of actions, which with time become conventionally accepted and subsequently taken-for-granted and hence, institutionalized. This results in the notion that acting outside the realms of an institution is less socially (or un-)accepted, and thus simultaneously signifies a frame of reference, constricting people in our actions (Scott, 2013). It is relevant when studying how institutionalized notions, such as stigmas, affect and are affected by different pressures in an institutional field setting.

How an institution persists is demonstrated in a model of the three pillars of institutions, where, as stated by Hoffman, the three components continuously move "from the conscious to the unconscious, from the legally enforced to the taken for granted" (Scott, 2013, p.59). The pillars consist of the cultural-cognitive pillar, the normative pillar, and the regulative pillar. The pillar that most closely relates to stigma is the cultural-cognitive pillar. Just as stigma enforces and is

reinforced by contextual aspects, the pillars exist in a complex system where they affect and are affected by one another.

The cultural-cognitive pillar is primarily emphasized by anthropologists and sociologists such as DiMaggio and Powell (1983), Goffman (Balfe et al., 2010; Mirabito et al., 2016), and Meyer and Scott (1983). They opine that it is the "shared conceptions that constitute the nature of social reality and create the frames through which meaning is made" (Scott, 2013, p.67). This approach is the main distinguishing characteristic of neo-institutionalism in sociology and organizational research. According to the principles of the cultural-cognitive pillar, human actions consist of reactions to that which occurs in our social environments, which are based on interpretations of meanings comprising symbols such as gestures, signs, and words. These meanings evoke, for instance, emotions, ideas, and intentions in individuals.

Some sociologists, such as David Heise (1979 cited in Scott, 2013, p.46) go so far as to state that the meanings attributed to social settings, actors, and action patterns are principally affective, that nearly any kind of stimulus induces some sort of affective reaction, and that many kinds of symbolic expressions (such as greetings, thanks, apologies, curses) explicitly refer to emotions. A great deal of the incentive that drives action in any situation is derived from the emotions aroused by the changing patterns of meanings. Obedience with cultural prescriptions occurs primarily because they are taken-for-granted, and the opposite would be unthinkable. Cultural-cognitive theorists hold that the dominant logic to justify such obedience is orthodoxy, i.e., "the perceived correctness and soundness of the ideas underlying action" (Scott, 2013, p.68). Those who nevertheless contest cultural beliefs are assumed to be anything between oblivious and crazy, depending on the social setting.

The premises of the cultural-cognitive pillar are not only applicable to individuals but also to other types of actors that exist in all kinds of cultural systems at large, including governments, organizations, and the media. Cultural systems, in fact, operate on multiple levels of society, from the shared beliefs and principles that govern individuals in an organizational culture, to the rationales that configure organizational fields, to common conventions and philosophies about economic and political systems at national and international levels. This is in contrast to what is commonly conceived about cultures, namely that they are "unitary systems, internally consistent across groups and situations" (Scott, 2013, p.68).

Cultural conceptions diverge, however, both within and among social settings and are regularly challenged, especially when there is social change and disorder.

2.4.2. Deinstitutionalization and institutional change

Deinstitutionalization is a coined term for institutional change, weakening beliefs in institutions and also incorporating the complete breakdown of institutions (Oliver, 1992; Scott, 2013). As previously stressed, the forces may act in combined effect toward deinstitutionalization or have the same consequence due to their misalignment. Scott (2013, pp.166–167) contends that irrespective of the elements highlighted, "analysts should attend to both beliefs and behaviors: to schemas and resources. Beliefs and behaviors are loosely coupled, as generations of sociologists have emphasized, but changes in our ideas and expectations put pressure on related activities and vice versa."

2.4.2.1. Functional Pressures

Christine Oliver (1992) proposes three categories of pressures that drive deinstitutionalization. The first category can be connected to the normative pillar and consists of functional pressures, which are rooted in perceived issues in performance levels that are associated with institutionalized routines. For example, functional pressures can derive from changing consumer preferences, technical developments that render institutionalized practices or resources obsolete, increased competition for resources, or sudden surfacing of information that causes the institutionalized practices to be directly inadvisable (Oliver, 1992). Organizations often strive to uphold institutionalized practices whose maintenance they believe grants the organization benefits such as legitimacy and prestige or greater access to critical resources (DiMaggio & Powell, 1983). If the formula for success changes, and competitors start earning greater profits off a revolutionized business model, organizations are bound to deinstitutionalize previously held beliefs regarding the functions that lead to success (Oliver, 1992).

2.4.2.2. Political Pressures

The second category is related to the regulative pillar and consists of political pressures caused by "shifts in interests or underlying power distributions that provide support for existing institutional arrangements" and can manifest when a certain behavior is no longer perceived as efficient or legitimate (Scott, 2013,

p.168). An obvious explanation for political pressures is a change in the political party or parties in power, new legislation, changed enforcement practices, etc. Additional mechanisms include environmental factors such as pressure to be more innovative, businesses that lobby legislative bodies toward changing corporate governance frameworks in some specific direction, the growth of certain political groups, which can reduce support for existing institutionalized settlements and invite new actors and deviating interests into play (Oliver, 1992).

2.4.2.3. Social Pressures

The final category consists of those pressures that arise primarily within an organization or an organizational field, depending on the level of analysis, and can be connected to the social-cognitive pillar. An example of such pressure can arise from fragmentation of beliefs and the meanings attributed to practices that were previously aligned within and among groups. This concept can be referred to as normative fragmentation and is often the side effect of other organizational changes such as increased workforce heterogeneity, high turnover, and leader succession. Further examples include disruptions in the historical continuity, such as mergers and acquisitions or joint ventures, and changed laws and/or environmental expectations that discourage the maintenance of certain institutional practices, including governmental calls for new ways to organize (Oliver, 1992).

2.4.3. Institutional entrepreneurship

A more purposeful way in which institutional change can occur is through the active engagement of an actor or multiple actors – institutional entrepreneurs – who are able to mobilize resources through certain actions in order to construct new institutions or change existing ones (Eriksson-Zetterquist, 2009). Scott (2013) differentiates between two categories of institutional entrepreneurs in order to clarify the concept further:

- The first is *technical and organization population-level institutional entrepreneurs*, which signify those who "combine human and technical resources in novel ways to create new types of products, processes, or forms of organizing, giving rise to 'innovative organizations.' To be successful, such entrepreneurs must devote much attention to gaining acceptance from wider audiences for their creations."

- The second is *field-level institutional entrepreneurs*, who "create or significantly transform institutional frameworks of rules, norms, and/or belief systems either working within an existing organizational field or creating frameworks for the construction of a new field" (Scott, 2013, p.117).

Eriksson-Zetterquist (2009) problematizes the ability of an institutional entrepreneur to effectively influence other actors in a field, which consists of "dominant actors who occupy central positions whilst peripheral actors continuously seek greater influence and a more central position" to abandon institutional practices and participate in their transformation, alternatively the creation of new ones (Djelic & Sahlin-Andersson, 2006, p.27). Actors who are likely to become institutional entrepreneurs are also likely to exist in the periphery of the field and hence, are likely to be rather small but also less embedded in and less privileged by existing institutions. This is due to the generality that it is the large and central actors who have dictated the norms and procedures that have become institutionalized, and thus are less likely to want to change the status quo, unless they are exposed to some pressure such as those discussed above. Hence, it is more likely that those actors who have or have had less power to affect existing structures strive toward institutional entrepreneurship and change.

It can be difficult even for central actors within an organizational field to impose change on other actors (Hardy & Maguire, 2008). So, how is an actor in the periphery with limited resources and power over the field able to transform it? Perhaps they cannot. Limited research has been conducted in this area, so this question will remain open. What has been shown by Holm (1995) is that the institutional entrepreneur must engage employers who are both external and internal, respectively, in relation to the institution in order to gain traction for their project (Eriksson-Zetterquist, 2009). This perspective assumes that actors can lead institutional change. Studies in which researchers assume that actors can change institutions have shown how institutional entrepreneurship has resulted in transformations in national and global regulating institutions. It is, hence, imperative to consider that such change can imply those on a macro or more personal or local, micro, level (Eriksson-Zetterquist, 2009; Powell & Colyvas, 2008).

2.4.4. Social movements as change agents

Recent research suggests that another way institutional change can occur is through the initiative and activism of social movements. Scholars such as Briscoe and Safford (2018, p.117) as well as Schneiberg and Lounsbury (1986, p.295) argue that social movements have the ability to "drive 'new path creation' in established institutional fields." This is a more collectively focused response to the sometimes argued overly deterministic institutionalism, such as that of institutional entrepreneurship.

It is noteworthy that there is an underlying assumption here that social movements and corporations are on opposing sides. This most likely has an aspect of timing to it, where it seems implied that the social movement has yet to gain enough traction and diffuse throughout mainstream society. On the one hand, when this has occurred, it could be argued that the institutional change has already taken place. On the other hand, institutional theory holds that institutionalization takes time; hence, there is a distinction between short-term trends and long-term culture, values, practices and thus, institutions.

Previous research within feminist institutionalism suggests that in periods where institutions are going through changes, there is likely a temporary increase of "innovation and contestation. Timing, then, is crucial, as once institutions are created, they tend toward 'path dependency', limiting what can be achieved and when it can be achieved" (Kenny, 2013, p.45). Furthermore, regardless of whether short- or long-term, according to legitimacy theory, it is less likely that social movements and corporations would be in opposition if the social movement is viewed as legitimate in the social context in which they act. At least, it is unlikely that corporations would admit to being on opposing sides, as it can be difficult to know a corporation's actual standpoint on an issue, since their marketing does not necessarily always coincide with actual business practices.

One aspect of institutional change that scholars can conclude always plays a significant role is power relations. According to Waylen (2014), actors in the field alter their shared perceptions and expectations to the adjusted framework of regulations so that they either support changes or impede or distort the intended results of the reform in accordance with the power relations and structures in place. Dudová (2010) argues, congruent with Rothstein (2005, pp.168–198), that "institutions should not be treated as neutral structures of incentives 'but, rather,

as the carriers of ideas, which make them objects of trust or mistrust and changeable over time as actors' ideas and discourse about them change'." Building on this, Schmidt (2010, p.15) states that "how ideas are generated among policy actors and communicated to the public by political actors through discourse is the key to explaining institutional change (and continuity)." Hence, discourse plays a large role in the power relations of institutions and thus institutional change.

Dudová (2010, pp.947–948) defines discourse as "language use relative to social, political, and cultural formations – it is language reflecting social order, but also language shaping social order, and shaping individuals' interaction with society." She continues by arguing that "all people define situations as real, but when powerful people define situations as real, then they are real for everybody involved in their consequences." Thus, "[t]he reproduction of power relations and dominance depends then also on the structures of discourse: who is allowed (or obliged) to speak or listen to whom, how, about what, when and where and with what consequences."

Power relations, furthermore, are of especially significant importance when they are gendered, as so-called gender actors commonly have less power and "gender change is likely to face opposition." Hence, informal institutions' ability to undermine, distort, or impede formal regulatory change is an imperative aspect of gender change strategy as well (Waylen, 2014, p.221). Regulatory debates are rooted in certain discourses and are thus framed in a specific way. Such frames can be identified and explained. Social movements also have frames, which can either coincide or compete with policy makers' frames. To overcome or circumvent issues related to contending interests, actors' frames must be aligned through a process of 'frame alignment.' Only then can resonance be reached between the parties and the social movement become successful (Dudová, 2010).

2.5. Summary of literature review

In this literature review, I have discussed three main theoretical areas according to which I frame this study. The main and formal theory I employ is stigma theory, which incorporates theory on destigmatization, more specifically destigmatization of products. Stigma theory is complemented with parts of neo-institutional theory, including literature on institutional change, deinstitutionalization, and

institutional entrepreneurship. I frame this study consistent with this literature, as I see destigmatization as a representation of institutional change, which has received limited attention in previous research, in particular regarding product destigmatization.

Further, each theoretical domain that I refer to has limitations in its ability to explain the factors that contribute to the destigmatization of menstrual products, which is the theoretical problematization that I aim to address. First, theory on stigma and destigmatization primarily addresses stigmatized individuals, groups, organizations, and industries and only limitedly products (e.g., Clair, Daniel & Lamont, 2016). As products consist of things that cannot act or speak for themselves, such as entities that consist of humans, I argue that this literature is limited in its applicability to product destigmatization.

Second, previous literature on destigmatization of products considers the role of companies in the destigmatization process mainly in terms of retail, where emphasis is placed on avoiding stigmatization, rather than explicitly working toward destigmatization (Mirabito et al., 2016). Early empirical evidence in this study indicated that corporations seem to play a large role in driving destigmatization, particularly in terms of how they communicate with consumers. Lastly, neo-institutional theory provides the study with perspective regarding destigmatization in a field setting, and not only in a marketplace setting (Scott, 2013). This is because it incorporates social aspects of destigmatization, such as how such processes affect individuals in their social lives, and not only as consumers. Neo-institutional theory has not sufficiently addressed destigmatization processes as a form of institutional change; however, I argue that disarming stigmas as institutionalized matters should viably be considered an institutional change, in terms of how they affect the social lives of individuals, organizations, and on the societal level.

3. Methodological and Epistemological Considerations

In this chapter, I discuss various aspects of the methodological and epistemological choices I have made. This includes my research design, the methods of data collection I have utilized, the process I follow when analyzing my data, justifications for why I have chosen to conduct my research in this way, and what aspects thereof might be problematic and require consideration. The chapter concludes with a discussion on the trustworthiness and validity of my study, as well as some thoughts on rationality and epistemology in relation to the stigma concept.

3.1. Case study research

With this study, I aim to increase the understanding of the factors that contribute to the destigmatization of menstrual products. As such, the unit of analysis consists of the factors driving a process which can be seen as a "contemporary phenomenon within [a] real-life context" and thus motivates a case study strategy (Yin, 1994, p.1). In accordance with Larsson (1993), there is a richness of aspects studied, contained in, for instance, indicators of stigma in different types of organizations and between actors in the menstrual product field, which is another argument for conducting a qualitative case study. Further, I am searching for an explanation to that purpose in the form of 'real' factors and the attitudes in the socio-cultural context thereof that have or could have contributed to the current status of the menstrual product field. The apparent contextual complexity regarding, for example, the richness of aspects such as the stigma surrounding menstruation and menstrual products having fallen between the cracks of regulation, and the lack of product innovation, provides further reason for the

benefits of conducting a qualitative case study, as surveys or experimental strategies could not provide sufficient insight into explaining it (Yin, 1994).

Further criteria that motivate the use of a case study approach are 1) when a study aims to generate theory or a greater understanding of processes and phenomena that change over time, 2) to increase the understanding of regular, mundane activities and actions, 3) when investigating or distinguishing previously uninvestigated domains, 4) in order to generate acumen and a deeper understanding of existing theory, 5) when testing the existing theory, and 6) when replicating previous studies (Bryman, 1989). As my study is concerned with 1) developing theory on a process that is changing over time, 2) increasing the understanding of changing regular and mundane activities and actions, and 3) investigating previously unaddressed domains, it fulfills the first three of the criteria. Hence, performing a case study is an appropriate method for investigating my purpose. Additionally, the case study approach enables me to combine methods and triangulate a variety of forms of empirics such as the documents found in my desk research (e.g., journalistic and scientific articles, motions put forth in the government, independent tests performed on menstrual products, etc.), interviews and observations, which is useful due to the lack of previous research at hand (Yin, 1994).

Regarding the choice of case, it is considered relevant and interesting, as the case represents a phenomenon of wider interest to research and society at large, namely the factors that contribute to destigmatization of menstrual products in a field setting (Van De Ven, 2007). Due to the rather limited number of product groups that can be compared to that of menstrual products (e.g., incontinence products, diapers, condoms, sex toys, etc.) with regard to their intimate use and the stigma surrounding them, the case provides for intrinsic value (Stake, 2000). This is particularly so, as the current lack of standardization is not limited to the scope of Sweden; rather, it is also apparent in the European Union and globally with a few exceptions (EDANA, 2012). This implies that developing a theory on such a case could potentially prove instrumental in further researching the phenomenon in different geographical settings.

As with most methodological decisions, certain tradeoffs are implied when conducting a case study. One argument against case studies is the compromise between observer-richness and aspect richness, which is connected to the distinction between a single- versus multiple case study design. A multiple case

study design could provide insight into the standardization (or lack thereof) of similar product categories to menstrual products in a comparative sense. Due to the inherent complexity, not only of the case setting but also of the unit of analysis itself, an emphasis on aspect richness is of great interest in this study (Yin, 1994). My study, however, will include certain comparative aspects (Bryman & Bell, 2011), as I aim to interview representatives from multiple organizations within the menstrual product field to gain insights into the different actors' perspectives on the factors that contribute to destigmatization of menstrual products. Furthermore, my study involves a number of delimitations. Firstly, I study the process of destigmatization of menstrual products in a time frame of 2013-2020. The destigmatization process has been particularly noticeable in Sweden during this time period, making it an interesting case to study. Secondly, the geographical scope is focused on Sweden, with perspectives from around the world.

To mitigate the risk that the chosen case may not turn out to represent that which I thought it would initially (Yin, 1994), I have carried out a pilot study in which I investigate the relevant research questions to take further; find, contact and secure access to relevant respondents; and map out the field and different stakeholder attitudes. Moreover, menstrual products consist of a classic example of a stigma, globally (with variable fortitude depending on the cultural context), which is embodied in a set of complex societal factors such as social shame and exclusion, misconceptions, a culture of silence, and lack of education, to name a few (e.g., (Davidson, 2012; Kissling, 1996; Lawrence, 1982). Hence, there is in fact a theoretical stigma in the field and so long as there is in fact an empirical process of destigmatization underway, there will be factors contributing to it, which implies that the case is an appropriate representation of a process where factors are contributing to destigmatization that can be studied.

3.2. Methods of data collection – a multi-method approach

3.2.1. In-depth interviews

The first and main part of the data collection, from which I have gathered the bulk of my data, consists of in-depth interviews with different actors and actor

groups in the field. These actors include organizations representing different sectors of the field, including consumers, the government, manufacturers, and standardization organizations. Examples of actors interviewed include the Swedish Chemicals Agency, SIS, the Swedish Consumers' Association, Essity, Johnson & Johnson, and MonthlyCup. I conducted 40 in-depth interviews with 25 different respondents selected through purposive sampling (Saunders, 2012). The responses from interviewees were treated as clues on how the social world of destigmatization processes that require interpretation to be understood. By collecting clues from as many different perspectives as possible, I am able to construct a multifaceted picture of interpretations simultaneously as a deep understanding of each interviewee's angle (Charmaz, 2006).

I have secured access to respondents in multiple ways but mainly through my own and my supervisor's contact networks, where people have referred me further to the most knowledgeable and relevant person on the matter within each organization (Yin, 1994). Interviews have lasted between 10 minutes to three hours, and several respondents have been interviewed multiple times, as increased information has enabled me to ask more specific questions with time. A detailed list of respondents and interviews with duration and dates is provided in Appendix 1.

There are certain points that have been important to consider when discussing matters that are stigmatized with respondents. When confronted by a researcher asking questions about menstrual products, decision-making, and stigma, respondents might find themselves in a situation where they are uncomfortable. It is not often obvious what to say, how to react, or what action to take; once what is done is done, it can be difficult to take it back, which can give rise to a healthy or unhealthy amount of anxiety. This is how we learn what choices make us feel good and what choices make us feel bad. Discussing a stigma will theoretically trigger some sort of social discomfort (or social anxiety), whereas adhering to a stigma could also trigger anxiety because of the unethicality of judging someone negatively according to society's stereotypes, which are not necessarily true at all. In a locker room full of jocks or in a boardroom full of decision-makers in 2018, what is it that determines whether a stigma is broken or reinforced? Is it rational to adhere to that which is socially acceptable or to break institutionalized values and stand up for one's own ideas about what is the right course of action? Clearly, some level of enlightenment and intentional open mindedness and perhaps even

activism is required by the individual to see through the haze of rash judgments that people make on a daily basis to see potential connections between those decisions and a stigma.

In order to get to what is actually my research topic, I am be confronted with narratives with both rational and moral premises. Consistent with Føllesdal (1982), I believe research becomes more interesting when it is a mix of values and technical reasons such as in my case, first and foremost because you get a particular kind of reasoning that is different from other types of reasoning. Whatever role stigma plays is found in the ways that respondents pronounce technical arguments in relationship to the stigma and how they are given importance in different ways.

3.2.2. Action research

Secondly, I have incorporated aspects of action research through my initiation and involvement in the process of standardizing menstrual products at the Swedish Institute for Standardization (SIS). I initiated the standardization in 2016, with the ambition to change the status quo of menstrual product safety regulation, and it continued throughout the writing of this thesis. For various reasons, which will be discussed in the forthcoming chapter on findings, the ongoing process was terminated and replaced by one that aimed at leveraging consumer safety rather than manufacturer interests in starting up a standardization process. I conducted action research mainly in preparatory meetings, organizational meetings, and phone calls. Specifically, I participated in three meetings: a roundtable discussion at a large Swedish networking event called Almedalsveckan hosted by SIS; a stakeholder meeting at SIS, a webinar about standardizing disposable menstrual products, co-hosted by Menstrual Hygiene Day and WASH United; and a number of meetings in which a group of stakeholders developed a proposal for a new standardization area, where I was responsible for the writing.

At the point where the standardization of menstrual products was initiated, my project became oriented, not only toward research and theory production but also toward participating in an initiative toward change. Hence, in some respects, my research project comprises aspects of action research, where a team of multidisciplinary participants join together for a short period of time to work together toward solving specific real-world problems or tasks, namely the

standardization of menstrual products (Coghlan & Brannick, 2005). It can be considered context driven research and thus characterizes mode two knowledge, according to Gibbons et al. (1994). The action research approach is employed as a means, rather than an end, to gain a deeper understanding of the empirical phenomenon of interest and theorize about it, as opposed to doing action research in order to create theory about social interventions (Greenwood & Levin, 2007) where I see my positionality as a researcher as an outsider with regard to the setting I am studying (Herr & Anderson, 2004).

3.2.3. Document analysis

Thirdly, and finally, I have analyzed documents, such as reports in which agencies present their findings regarding investigations conducted on the safety of menstrual products. The two main sources of information consist of the Swedish Chemicals Agency's report published in 2018 and the French Agency for Food, Environmental and Occupational Health & Safety (ANSES) on the Safety of Feminine Hygiene Products. These serve as both empirical data in and of themselves subjected to analysis as well as a complement to in-depth interviews for triangulation purposes.

To summarize, through a multi-method approach, I aim to build a more multifaceted and robust narrative than would be possible with a single-method approach, enabling for a balance between depth and breadth of knowledge of the empirical field. This narrative tells the story of the factors that contribute to the destigmatization of menstrual products in a field setting.

3.3. Research design

In this section, I present my research design based on the five components outlined by Yin (1994) as especially important. These consist of my study questions, propositions, unit of analysis, how I link data to propositions, and criteria for interpreting my findings. I also followed Tracy's (2013, p.15) advice on how to arrive at research questions that can aid in "navigating an unfamiliar research context" and guide subsequent "interpretation and explanation."

3.3.1. Study questions and propositions

Before identifying my purpose, namely, to increase the understanding of the factors that contribute to destigmatization in a field context with my case being the destigmatization of menstrual products, a number of questions were considered. These questions guided my choice of research strategy, a case study of a process, which will be further discussed below. The first question I considered, as suggested by Tracy (2013, p.15), was "what is going on here?" This question came to me as I read an Argentinian report that found a potentially carcinogenic substance in tampons. Assuming that there were already rigorous standards in place, I followed up with the question, "how are standards updated in accordance with new research."

When taking a closer look into the empirical field of menstrual products, it became clear that there were very few regulations and standards in place governing the safety of menstrual products in most countries around the world, with a few exceptions. This led me to ask another question "why is there a lack of regulations and standards on menstrual products," which included looking at who wins and who loses from this status quo (Tracy, 2013, p.15). Coming from a business and management background, I found it of greater interest and accessibility to focus on the standardization aspect, rather than the regulatory aspect, as this option is often a more beneficial way to govern for both consumers and manufacturers alike. This is primarily because standards are developed through a participatory process, which premiers representativeness from a heterogeneous group of stakeholders, but also because standards provide greater flexibility in terms of updating rules to accommodate new needs, including new research on innovations and product safety.

Thereafter, I conducted a pilot study in order to gain a sense of what was going on in the field and what further questions might be of interest in guiding my subsequent work. This involved asking a number of questions that Tracy (2013, p.15) argues are fruitful at an early stage, including "What are people saying? What are they doing? Are participants' opinions and actions complementary or contradictory? What does this say about the scene? How is the scene changing over time? What rules or norms are research participants following? Resisting? Shaping? How does this population create and interpret messages? Consume media and construct news?"

Discussing the issue of menstrual product destigmatization with respondents from consumer organizations, standardization organizations, gynecologists, and entrepreneurs, I formulated a proposition that a salient aspect in the field was the stigma on menstruation and menstrual products. This interested me greatly, as I had not considered the stigma's potential effects in field contexts before. Moreover, because I am a user of menstrual products myself, and not least a feminist, the women's rights aspect was another motivator to want to increase the understanding of the matter at hand. My own role as a researcher also has bearings on this study and will be further discussed below.

Looking to previous research and theory on the matter, I realized there was not much to find that addressed product stigma in a field context, the effects of or factors affecting destigmatization, strategic implications in markets with product stigma, or the like. Hence, both the empirical mystery, that is, the lack of standards on menstrual products, as well as the notion that theory is inconclusive on destigmatization in a field context prompted me to pose the question "what factors are contributing to the destigmatization of menstrual products in a field context and how is it occurring?" This became my main research question and is closely linked to my purpose.

3.3.2. Unit of analysis and theory selection

First and foremost, the unit of analysis in this study comprises the factors affecting the process of destigmatization in the menstrual product field. As argued by Langley (1999), studying processes can be a fruitful way to gain a deeper understanding of the dynamics in organizations, and, I argue, in their related fields. These dynamics essentially include the experiences of those in the field. In order to understand these, it is equally important to acknowledge that experiences and that which they collectively prevail in, such as organization and organizational fields, are socially constructed (Gioia, Corley & Hamilton, 2013). Accordingly, I placed focus on understanding how my respondents understand and construct their experiences in the field, rather than solely on the frequency of certain occurrences or descriptions in my data.

In order to study this process, I found it most logical to speak to those previously or currently active in the menstrual product field, with insight about how it works, the pivotal events that have shaped its development, and with established

relationships with others in the field. Additionally, I wanted to speak to those who could have been or could in the future take part in a standardization process in order to learn more about why it had not occurred to date, what the response to a standardization initiation would be, how a potential startup of such a process would go, who would be interested, why and why not, and so on. An important aspect to address in the interviews became matters associated with respondents' perceptions about how the field had developed over time. These could be addressed through questions concerning how their work had changed since they began, whether they noticed any changes in social aspects around their work, especially in different social settings, such as talking about their work outside of work, or how they communicate about their work in marketing purposes.

Much of the identification of my respondents took place through desk research as well as through snowball sampling, which started during my pilot study and continued throughout the research process until my last interview to date, which was held in March 2020. The snowball sampling started off as 1) an investigation of my supervisor's and my professional and private social networks; 2) contacting and securing interviews with relevant representatives of those actors; 3) interviewing representatives to gain an understanding of their experiences, understandings of, and attitudes toward standardization of menstrual products and their contents; 4) confirming respondents' participation in future interviews for the data collection of my main study; 5) identifying useful theory that can aid in understanding the concepts relevant to the unit of analysis, and subsequent creation of a framework to test in the main part of the study (Bryman & Bell, 2011; Yin, 1994).

When identifying the unit of analysis during the pilot study, it quickly became clear that there are many actors across sectors that are relevant to the potential standardization of the contents of menstrual products, within the scope of Sweden. 1) On the supply side, there are the manufacturers and distributors of menstrual products, specific actors including four of the largest companies, globally: Essity, Johnson & Johnson, Kimberly-Clark, and Procter & Gamble (Euromonitor, 2016). 2) Smaller brands including e.g., Coop, Renée Voltaire, Ellen AB, Natracare, Your Happy Period, Ica, Swedish Pharmacies, Next Period, etc. (Hanssoon, 2010; Råd&Rön, 2016). 3) Politicians, governmental authorities, and departments including the Swedish Chemicals Agency, the Department of Foreign Affairs, and the National Board of Trade, etc. 4) Standardizing bodies

such as SIS (Swedish Standards Institute), CEN (European Committee for Standardization), ISO (International Organization for Standardization), etc. 5) Consumers and consumer collectives e.g., the Swedish Consumer's Association and Sveriges Konsumenter (Swedish Consumer Agency, another consumer interest organization), 6) the healthcare industry including obstetricians and gynecologists. 7) the judiciary including lawyers, courts, and judges; and 8) the media. During the pilot study, I was able to conclude which sectors and actors were most beneficial to focus on, considering accessibility, relevance to the case and primary Swedish context, and knowledgeability, which is often connected to prior involvement in the issue.

With regard to delimitating the phenomenon of interest, I decided it would be more fruitful to understand the more recent developments in the process of destigmatization, as it has advanced so rapidly and thus may display factors representing intensified efforts toward destigmatization. This prioritization was made over studying a lengthier process, where fewer relative efforts would be emphasized, and perhaps with less direct linkage toward destigmatization, such as various feminist movement breakthroughs. As my respondents frequently discussed Liv Strömquist's radio program on menstruation as one of the most pivotal events setting off the significant intensification of discourse on menstruation in Sweden, I decided to start my timeline in that same year, 2013, with the endpoint being the publication of this thesis.

As the final part of the pilot study, I used my findings to determine which theory could provide an instrumental perspective in understanding and explaining my unit of analysis (Yin, 1994). Because my unit of analysis relates to an ongoing process in an organizational field and the nature of stigma as a social construction engrained in culture, such as institutions, I found that the most useful perspective theory is stigma theory, which is the main focus of the study. With support from neo-institutional theory to understand the dynamics of a field, I hope to complement stigma theory where it has yet to be applied to a greater extent. The concept of an organizational field, as opposed to related terms such as industry or market, does not limit the scope to interactions between organizations; rather it includes potentially relevant peripheral stakeholders as well as the contextual environment within which they act (e.g., DiMaggio & Powell, 1983; Djelic & Sahlin-Andersson, 2006; Eriksson-Zetterquist, 2009).

This view will provide a template for the creation of a framework that can aid in the theoretical understanding of the factors that contribute to the destigmatization of menstrual products, which then in turn can be tested empirically and subsequently analyzed and revised (Yin, 1994). Consequently, the study pertains to a number of research domains, as previous research is sparse in the area of effects of stigma and destigmatization on fields; thus, a synthesis of relevant topics is applied. These include research on stigma, stigmatized products, the menstrual stigma, institutional fields, deinstitutionalization, social movements, institutional entrepreneurship, etc. First and foremost, I aim to contribute to the theoretical domains of product stigma and to a more limited extent, also institutional change.

3.3.3. Method for data analysis and theorization

3.3.3.1. Step 1 - context

I analyze and theorize my empirics in a process that can be compared to an hourglass shape, starting broadly by looking at the whole of e.g., an interview, considering the context, atmosphere, where I find myself in the research process, the relationship I have to the respondent(s), and where they were coming from in that point in time. Neo-positivists might argue that this would interfere with finding the "context-free truth about what is really 'out there'" and that one should avoid the researcher and other sources of 'bias' (Alvesson, 2012, p.4). By disregarding these contextual aspects, I believe there could be a risk that one strays too far away and delves into meanings that are completely disconnected from the scenario in which the data were gathered. I believe this could be a way to increase the validity of the following analysis by staying closer to what my respondents mean. In this way, my research might be considered more localist, but definitely more constructivist. This corresponds to my empirical findings, which indicate that the current socio-cultural winds are blowing hard around the concept of menstruation, continuously affecting the values and thus the stigma attached to it.

Feminism and related social movements such as #MeToo contribute to the increased discourse and subsequent weakening of the stigma, which further indicates that what I found in the early stages of my research may be much less relevant at the time of publishing my dissertation. This might be one of the fastest institutional changes that have occurred, and it is happening now. Hence, it

becomes vital that my theorization and possible subsequent theory is dynamic and makes an effort to reflect how stigma changes over time, as well as how it affects a field and is affected by driving forces (Gioia, Corley & Hamilton, 2013).

Furthermore, considering other contextual aspects, such as my own bias as a feminist and a feminist researcher, because I believe they have different implications, the former is a part of me and something I cannot separate myself from, and that is most likely signaled solely by my having chosen to study the phenomenon in question. The latter has to do with how I view the researched world, and not just my personal world. This, I believe, I can separate more, especially as my education consists purely of business administration, wherein lies my basic theoretical standpoints. I manage these two roles, in the sense that I am open about my own feminism since I think it is quite obvious and attempting to hide it could signal insincerity and affect my relationships with my respondents and thus, my findings negatively.

Pertaining feminism, I made a point of conducting the interviews in a way that did not reveal my focus on stigma or feminist stance on the researched phenomenon until either a subsequent interview, or late in the interview. This hopefully allowed respondents to answer more freely, without the input of my bias or my "loose frame" initially, and later gave them the opportunity to respond to my more 'suggestive' questions. These include asking whether there are any experiences that stick out as uncomfortable or noteworthy concerning the social aspects of working with menstrual products, which proved to be very fruitful. On the other hand, I also believe that my feminism can be positive in the sense that it can allow respondents to highlight potential feminist issues, which are of course closely linked to the menstrual stigma, without feeling as though they may not be taken seriously, a common consequence both for feminists and feminine issues. Without my feminism being noticeable, these aspects might not be articulated in interviews at all.

Furthermore, it may be noteworthy that my personal biases also bring with them underlying assumptions that are not directly connected to feminism. One such underlying assumption is that products used in intimate contact with the body, and specifically genitals and mucous membranes, are generally heavily regulated. In absence of governmental or regional regulations, however, standards are often used to govern the safety of products. It is this underlying assumption that guides my very first study question, as well as subsequent ones.

Finally, paying attention to the context is especially important when researching complex phenomena such as processes. This is because they 1) deal with events, or "conceptual entities that researchers are less familiar with," 2) "often involve multiple levels and units of analysis whose boundaries are ambiguous," 3) are embedded temporally, often varying "in terms of precision, duration and relevance," and 4) deal with data that tends "to be eclectic, drawing in phenomena such as changing relationships, thoughts, feelings and interpretations" (Langley, 1999, p.692). Addressing these difficulties is not a simple task; nonetheless, selecting an appropriate strategy for making sense of process data is imperative. Langley (1999, p.700) suggests seven possible strategies, one of which signifies the grounded theory strategy. This strategy is especially beneficial when dealing with particular kinds of processes such as when exploring "the interpretations and emotions of different individuals or groups living through the same processes." She further argues that the grounded theory strategy provides the ability to analyze the data closely, while simultaneously developing dense theories.

3.3.3.2. Step 2 – incident selection

In practice, the research process was slightly more iterative than presented here. The incident selection was done prior to the consideration of the context; however, the analytical process is performed in this order, so I feel it makes sense to present it in this way as well. The next stage in the process was to narrow my gaze to pivotal incidents, events, or utterings highlighted in the empirics that are interesting from an empirical or theoretical perspective. Empirically interesting could mean that the information or event might be counterintuitive, which implies that there could be contradictory logics in place, or simply that respondents themselves point out certain things that bear significance to the grand narrative (Charmaz, 2006). Theoretically interesting could mean that it has been mentioned in theory I have read, it has not been mentioned and is repeated many times, sticks out as something unexpected, contradictory, etc. (Ryan & Bernard, 2003).

What is considered (un)expected, however, is very much dependent on one's worldview as a researcher. In correspondence with the stance that I am taking on my research question and the empirical phenomenon, it is natural that I take a feminist stance. Thus, one category of what comes to my attention as interesting is that which is not in line with the feminist agenda; in this case, to further the destigmatization of menstrual products. I did, however, also try to set this agenda

aside in an attempt to be reflexive when looking for other possible interesting explanations, findings, and categories in my data, as suggested by Charmaz (2006) when employing sensitizing concepts. I practiced theoretical sampling while interviewing, hoping to go "beyond common sense tales and subsequent obvious, low-level categories that add nothing new," as described by Charmaz (2006, p.33), which in my case could be taking what respondents say at face value and accepting that there was no budget.

3.3.3.3. Step 3 – initial coding

Next, I used a version of Charmaz's grounded theory coding, both initial (step 3) and focused (step 4), in order to "sort data to begin an analytic accounting of them" (Charmaz, 2006, p.45). In the previous step, I selected interesting quotes and events. In this step, however, I asked material questions to determine what theoretical categories they may indicate, or "expressions of a theme [that], of course, aid us in discovering it," as Morris Opler puts it (cited in Ryan & Bernard, 2003, p.86). Such questions included: what views and values are represented? Are there any underlying meanings? If so, what are they? How is the respondent making sense of the phenomena at hand, such as the menstrual stigma, the destigmatization of menstruation, the standardization of menstrual products, the menstrual product field? Whose point of view is this? Since I am researching a topic that is rarely discussed in the open, it is very likely that respondents do not speak candidly about them; thus, I also look for signs of shyness/shame/embarrassment/discomfort, etc., the use of euphemisms, hesitant speech or simply an absence of certain words, such as a respondents' avoidance to say the word menstruation.

Since I have a sort of master code that is stigma, there is a risk that I will see stigma as the answer to every question I pose. I manage this potential issue by continuously questioning whether there can be other explanations and meanings that underlie the data. That way I could find some sort of extreme scenario where lots of things are about stigma, and one that is more nuanced, or perhaps completely denies the stigma. I then followed some sort of idea about what seems reasonable. That brings us to the inevitable question of reason. Is the most reasonable explanation that which coincides most with what the respondent means or my analysis of what they mean and why they say it? While there is always a risk(?) of over analysis, I chose to take my queue from Becker (1998, p.118) who states that "social scientists will be led astray if they accept the lies organizations

tell about themselves. If, instead, they look for places where the stories told do not hold up, for the events and activities those speaking for the organization ignore, cover up, or explain away, they will find a wealth of things to include in the body of material from which they construct their definitions."

3.3.3.4. Step 4 – focused coding

Regarding this point, I came up with multiple codes without attempting to refine them; thus, I sorted them into more abstract categories, bunching together those that are significantly similar in some way (Gioia, Corley & Hamilton, 2013). This can also be described as the part where facts of an investigation are turned into theory through a process of theorization. More specifically, according to Van Maanen (1979), the first order codes do not speak for themselves. They need to be organized into patterns through concepts, which are generated by the researcher in that process. Here, it is not only interesting to group codes together, but it is also vital to pay attention to contradicting concepts; it is then that we can really say something new about the field (Maanen, 1979). Finally, I tried to identify which codes seemed most fruitful to follow up and compare to greater parts of my data. "While engaging in focused coding, we select what seem to be the most useful initial codes and test them against extensive data. Throughout the process, we compare data with data and then data with codes" (Charmaz, 2006).

In order to facilitate this process, I used the qualitative data coding software, NVivo, in which I created a data structure to more clearly visualize and sort my codes (Gioia, Corley & Hamilton, 2013). The smallest boxes represent the initial codes I deciphered from my interviews. I then grouped them together into higher level category codes, which are the focused codes in the larger boxes. Each row of larger boxes was finally categorized into mechanisms. The first row represents the factors under the reclassifying mechanism, the second represents framing, and the third represents claiming agency.

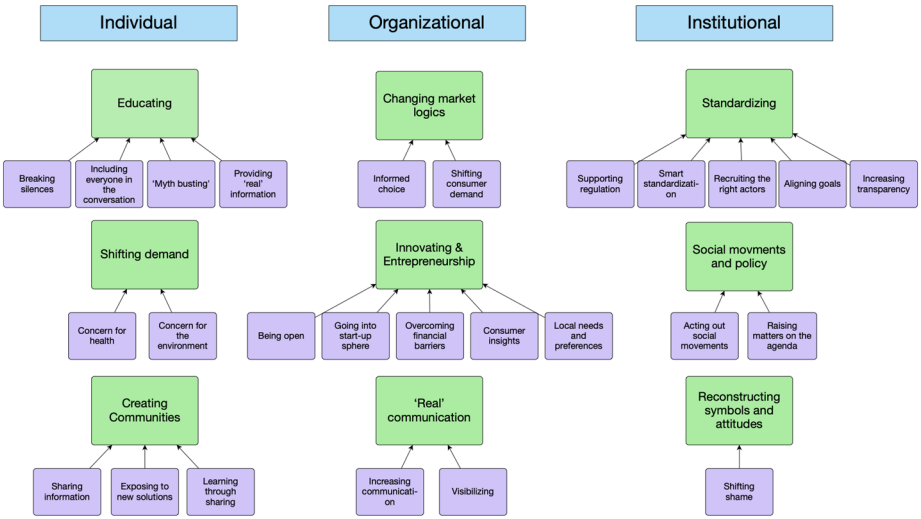

Figure 3: Data structure of focused coding

3.4. Trustworthiness

3.4.1. Reliability

In my prior discussion on objectivity, I mentioned that one way to enhance reliability is by checking and controlling that the data is factual and undistorted (Kvale, 1994). This is done by, for instance, comparing evidence from multiple sources i.e., data triangulation (Yin, 1994) as well as confirming with respondents that how I interpret their answers is in fact what they mean. This can be achieved by interviewing respondents multiple times and by following up responses with leading questions, an effective technique, which Kvale (1994) argues is often misinterpreted as reliability reducing, whereas it can increase it. I employ this tactic, as the subject I discuss with respondents represents a historically silenced topic, not to mention due to the culture of silence surrounding menstruation; hence, respondents may previously have conversed about it only limitedly, which in turn can imply that they could have difficulties communicating their thoughts on it efficiently.

Furthermore, reliability in case study research is most significantly related to the likelihood that, if repeated (hence, repeated and not replicated), the study would generate the same findings. Based on this notion, one way of increasing reliability is by avoiding researcher bias. As previously stated, my bias as a researcher plays a large role in determining the outcome of my study, but reliability can still be ensured if I maintain full disclosure about my research procedures and my efforts to affect the outcome (Yin, 1994). In other words, if a different researcher with the same intentions, namely increasing the understanding of the factors that contribute to the destigmatization of menstrual products, were to follow my exact proceedings, they would, theoretically, extract the same findings. Realistically, however, my research is bound to unique contextual factors regarding, for instance, time. This gives me some kind of early mover advantage, in the sense that I experience a sort of candidness (and hence truthfulness) in my respondents, which is unlikely to occur in those same respondents the second time around. Furthermore, I argue that the stigma surrounding menstrual products is constantly changing and is in the process of destigmatization, which implies that my findings are highly dependent on the timing of my study. This does not imply that current findings will not be true in the future, only that they might change in time (Hammersley, 2007; Kvale, 1994).

It is also noteworthy that much of the data gathered in this study is generated because of my own actions and involvement in the process. Because I employ influences of action research, my role as a researcher might cause a lack of repeatability, since a different person is likely to act, behave, and speak differently, which would likely lead to different relationships developing between respondents and researcher. This might imply different outcomes of the action aspect of the research, as well as other aspects, as mentioned.

Finally, a multi-method approach provides the ability to cross-check empirics that may not be directly observable through participant observation, whereas the latter may illuminate contextual aspects that may not be as easily describable or recognizable in words – or even in an interaction with a sole respondent, as opposed to in their interactions with others (Bryman, 1989). Document studies are another way to validate data collected in interviews and through observations, but that alone might not prove as valuable, as the context provided through complementing methods increases the nuance and minimizes the risk of interpreting the written word as fact (Charmaz, 2006).

3.4.2. Validity

Validity, or trustworthiness, of a study can take its expression in the causality link between the variables studied (Eisenhardt, 1989). Such causality is generally determined in the process of data analysis, in my case, when comparing and contrasting themes in the empirical findings to those in the preliminary framework. As Ryan and Bernard (2003) note, there is however no unique result to be produced through theme identification. In other words, there is no one truth to be found. Instead, that which is comprehended in data is again dependent on the individual researcher and the theoretical perspective that he or she has chosen to describe certain phenomena. Hence, there is no definitive manifestation of validity either, but as Agar (cited in Ryan & Bernard, 2003, p.103) contends, "we can maximize clarity and agreement and make validity more, rather than less, likely." Techniques to do so include making the procedures for identifying and analyzing themes explicit and clear. This gives readers, including the scientific community, an opportunity to judge the validity of the methods used accurately, and valid methods generate valid findings and hence, validity.

A final challenge in my pursuit to creating "good research" is to avoid being narrow minded and regardless of what my empirics reveal seeing only that which I want to see, which could be a risk when researching something that one is personally invested in (Symon & Cassell, 2012), as well as when there are so many possible ways to draw conclusions that relate to structural gender inequalities. Thus, I have made a genuine effort throughout the process to remain as open-minded as possible, always questioning, re-thinking, and re-questioning my points of departure and interpretations, and interpreting my interpretations and why I make them (Alvesson & Sveningsson, 2003).

4. The Mechanisms of Destigmatization

This chapter provides an introduction, presenting the structure of the findings section of this book. Subsequently, I discuss the ways in which the stigma in the menstrual product field is noticeable and the first steps toward destigmatization that have taken and are, currently, taking place. This aims to set the empirical scene, on which the mechanisms of destigmatization are taking place.

4.1. Overview and structure of the findings

When analyzing the menstrual product field, it is clear that there is an ongoing systemic shift that affects many aspects of the field. Some aspects are changing more than others, which could imply that the shift is occurring faster in some instances than others. Based on the coding of my interview material, three mechanisms have been identified as salient in driving the destigmatization process itself. These mechanisms are: reclassifying, framing, and claiming agency. These mechanisms drive the destigmatization on the three different levels in society: the individual, organizational, and institutional. Each mechanism can be seen as a category built up by forces that affect the mechanism's traction on these three levels. Hence, in order to provide clarity as to how the mechanisms work and interact between all levels of society, I have categorized the forces per destigmatizing mechanism and societal level.

Firstly, the reclassifying mechanism can be seen as built up by the forces: educating on the individual level, changing market logics on the organizational level, and standardizing on the institutional level. Secondly, the mechanism of framing consists of associating that which is stigmatized with positively connotated concepts such as social movements, including sustainability. On the

individual level, this is represented by growing demand for solutions that reflect individuals' values and what is seen as good and positive; innovation and entrepreneurship on the organizational level, and feminism and policy making on the institutional level. Finally, the claiming agency mechanism is made up of creating communities on the individual level, 'real' communication between manufacturers and users on the organizational level, and reconstructing symbols on the institutional level. In the following framework, I illustrate the three mechanisms, categorized according to the different levels of society on which they are at work. Each mechanism has been further broken down into the forces that are specific to the respective level.

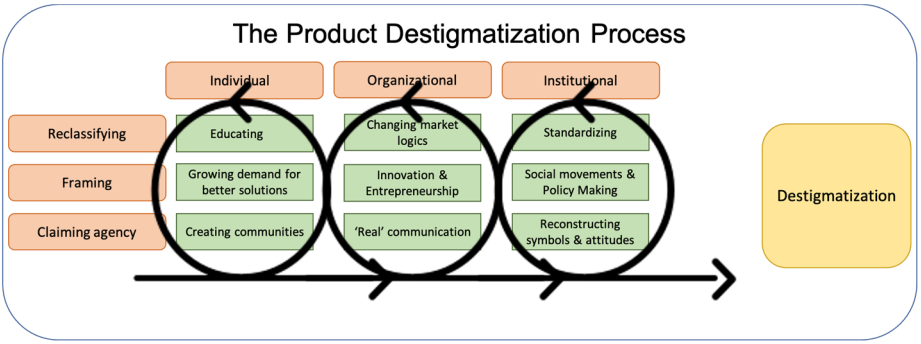

Table 4: Final framework of the product destigmatization process

These three mechanisms and their respective forces all affect and are affected by one another and can be seen as co-existing in an iterative, cyclical, process of destigmatization, where one is reinforced by the other. Over time, the strength of each mechanism increases with each cycle that the process goes through, creating a spiraling effect. Previous studies have not included these mechanisms and forces in combination, nor have they addressed the interactions between drivers to any greater extent.

The material discussed in the next section is primarily generated from interviews and meetings with actors in the field. However, in recent years, a number of so-called pivotal events have affected the menstrual stigma, both in Sweden, and internationally. These have been identified throughout the thesis-writing process and will be presented and discussed within the relevant driver category in the destigmatization process to complement the interview material in the creation of

a story of the mechanisms that affect the destigmatization process of menstrual products.

In section 4.2., I discuss the ways in which the stigma on menstruation and menstrual products are noticeable as well as indications of the first steps toward the destigmatization of menstrual products. In the subsequent chapters, I then proceed to discuss the mechanisms driving destigmatization, one chapter for each of the three identified mechanisms. For the purpose of clarity, I present a framework where these mechanisms and forces can be visualized at the start of this section. I conclude the chapter by summarizing the key findings and reconnecting these with the framework.

In order for the reader to gain a clearer perspective of the pivotal events of menstrual product destigmatization that are discussed in the findings, I have illustrated a timeline from 2013 to 2020.

Figure 4: Time line of pivotal destigmatizing events from 2013-2020

4.2. The menstrual product stigma and first steps toward destigmatization

4.2.1. Cultural variations of the menstrual product stigma

As with all types of product stigma, the stigma is attached to some concept or practice, other than the product itself. In this case, the menstrual product stigma is attached to menstruation. That stigma is in turn dependent on the cultural setting and the traditions, behaviors, values, norms, and symbols attached to it. As Michael Moscherosch, who works with research and development at Johnson & Johnson, stated,

> "Because the stigma of the product is only a reflection of the stigma on the situation, you know, menstruation in general, the products are only stigmatized because they are connected to it. The issue is not that the products are taboo, but menstruation is fine; it's more that the whole menstruation area is taboo, and the products because they are associated with the menstruation area, they automatically become stigmatized also."

Throughout this study, substantial evidence of the menstrual stigma has arisen. What is clear is that although the stigma persists in almost all cultures to this day, it varies greatly in fortitude where the stigma in the developing countries is much stronger than in developed countries. Moscherosch stated that,

> "Here, in the developed world; yes, there is a stigma, but it's peanuts compared to some other parts of the world."

This variation in stigma fortitude has implications on how the destigmatization process on menstruation and menstrual products might look, where drivers of destigmatization become important in different phases of the process. In some cultures, certain drivers discussed in this study may be irrelevant, due to the fortitude of the stigma, and in some cases a destigmatization process may not be noticeable at all. I will discuss the matter of the relevance of different drivers in the forthcoming sections.

A clear indication of the menstrual product stigma's strength in different cultures is the discourse that surrounds it. In countries where the matter is more

destigmatized, companies are pushing boundaries by trying to show menstrual blood in underwear on TV. In other places, where the stigma is stronger and there is a lack of education about menstruation, women and girls sometimes get their only knowledge about menstrual products from advertisements. However, in such cultures, advertisements are not explicit about the functions of menstrual products. Moreover, if the girls' knowledge about menstruation is limited already, Michael Moscherosch at Johnson & Johnson argued that they will not be any wiser from these commercials. This is because the way they talk in the advertisements is so disconnected from the actual experience of menstruating, and the information is anything but 'real,' which only reinforces the stigma. He stated that,

> "In regions there, what we find is that, you know, it's not only about affordability or availability, but it's also about understanding the relevance, that they really understand, what is this product for? What is the benefit that you get from the product? It's amazing if you do research in some of the, especially in the rural Northern India. There are a lot of girls who have no clue about the product; they don't know what they are, how they are used, what they are used for, because if you look at, for example, the TV advertisement where they get a lot of their information from, it's sometimes so cryptic. You have Bollywood stars or something like that, and they talk about free lifestyle bla bla bla, which doesn't really click, so you have to do a little bit of education in that respect."

The lack of access to information about menstruation and menstrual products among women and girls in rural parts of India was further confirmed by Tanya Dargan Maharajan, co-founder of the Menstrual Health Alliance, India (MHAI). She has 10 years of experience in market development of health products and services in low-income settings and works toward increasing informed choice in menstrual health.

The variation in stigma also has effects on factors such as innovation and product development, since consumers in different cultures are likely to have preferences depending on what is considered socially acceptable. This invites companies to innovate and develop their product and service offerings accordingly. For instance, Moscherosch discussed that in a European setting, he finds willingness to adopt tampons as opposed to pads, and even more so digital tampons versus applicator tampons, is lower in countries where Catholicism is widespread. He stated that,

> "My rule of thumb, it's not always true, but as a ballpark rule it works pretty well. The more Catholic the country is, or the more puritan the country is, the less likely it is that they are willing to insert a tampon digitally, meaning with their finger. There seems to be an aversion to inserting or even touching herself with the consumers. The most extreme example is that as soon as you go to a hardcore Catholic country, the sales of tampons is relatively small. The more Catholic the countries are, I'm speaking mainly for Europe now, the more Catholic a country is, the higher the market share of napkins versus tampons."

On the other hand, entrepreneur Louise Berg argued that it matters less what religion it concerns; the more puritan the country is, the more a culture is likely to stigmatize menstruation. She stated that,

> "If there's anything all religions agree on, it's that everyone who bleeds once a month is disgusting or unclean. And then, it's about industrialization and gender equality and how far you've come there. In places where women are not allowed to partake in decision-making processes, the stigma is stronger than in places where women are allowed to take up space."

Growing up in a European country outside of Sweden, entrepreneur Ingrid Odlén has first-hand experience of the menstrual stigma in Belgium, which she argues is much stronger than in Sweden and in particular Lund.

> "Asking for a tampon would mean going into a different room and saying it in Pig Latin. It's not at all as how I experience it here in Lund, where you can discuss menstrual cups over lunch with your guy friends. So, there are very different worlds, but I want to think that what it was like in Belgium is probably more representative of the rest of the world than what it's like here in Lund. But the way it is here is how I think it should be and how I think it is becoming more and more."

Sweden has a culture where menstruation and menstrual product destigmatization has come a long way. Odlén discussed the menstrual stigma as weaker in Sweden than in other cultures, but nonetheless it is still prevalent. She stated that,

> "It is not the grocery item you are happiest about placing on the conveyor belt, even here in Lund, where I am much more comfortable than in other places, so I think [the stigma] is noticeable all the time."

Furthermore, Lisa Perby discussed that they experience the stigma on menstrual products and in particular menstrual cups on a daily basis, but something that has alleviated those challenges is effective marketing, which Perby argues has spread knowledge about and destigmatized menstrual cup use. She discussed that therefore the stigma is much weaker in Sweden than in developing countries, where a lack of access to menstrual products can have detrimental effects for girls and women and in extension gender equality and society. She argued that,

> "From a social perspective, we run into challenges on a daily basis. In Sweden, we have come very far, but we still run into the notion that it [using a menstrual cup] sounds disgusting. Less now than before; we have educated people so much now, but women in developing countries need to be able to manage their menstruation. If they can't do that, they will drop out of school and get married and become pregnant. The most common cause of death in women aged between 15 and 19 is maternal death, according to RFSU [the non-profit organization, the Swedish Association for Sexuality Education] where I worked before."

On the other hand, another respondent, gynecologist Christina Lloyd, pointed out that in certain cultures, often in the developing world, the onset of menstruation, menarche, is celebrated. However, this often implies that girls are ready for marriage and might end up dropping out of school, regardless. It also does not necessarily imply that menstruation is destigmatized in the continuation of that individual's life. Lloyd stated that,

> "In some cultures, there is a similar pride of menarche; you're proud and you show that you are a grown woman which leads to the next ritual. People know 'oh she's menstruating.' But in the society that we live in, it is even more taboo. Still in 2016, it is not obvious that it is something to talk about, and therein menstrual products are seen as something we should hide, it's a bit scary. Guys who see tampons, especially if they are used and wrapped in a bit of paper, the reaction is 'Ah! That's so gross!' – it's gross, it's worse than pee and poo."

Hence, although the onset of menstruation might be celebrated in a few cultures, the general case around the world is that menstruation and menstrual products are stigmatized to some degree, regardless of whether menarche is commemorated or not. In Sweden, as in other similar countries such as the Nordic countries and other Northern European countries, the destigmatization process has come farther than in many other places, with rural areas in developing countries such as parts

of Northern India or Nepal. The following section will discuss the menstrual product stigma in Sweden.

4.2.2. The menstrual product stigma in Sweden

In contrast to traditional attitudes toward menstruation and menstrual products, which is also typically what is documented in previous research, there is evidence in my empirical data that positive attitudes toward menstruation and menstrual products are generally growing. A respondent who has been in the business of menstrual products for a very long time, Solgun Drevik, stated that when she was still working at SCA, it was always easier to talk to women about her work than men at social gatherings. She would tell women there that she was the person to ask if they had any issues with their menstrual cycle and they would smile, and the conversation would continue normally. Drevik continued,

> "but men were a bit more difficult, then I would normally just say that I am a product developer or that I work with research. Especially if I did not know the men in question, I had to take it a bit easy, […] if they became uncomfortable, I would joke and change the topic."

Because of the stigma in place, Drevik had to develop social management techniques to avoid offending anyone, or creating awkwardness. She did this mostly in consideration of others, although she also enjoyed pushing the boundaries of social comfort with a tongue-in-cheek approach. Another respondent who developed such techniques was the menstrual cup entrepreneur, Lisa Perby, who did her best to discuss the topic with people outside her company and comfort zone in an as normal way as possible. Another way she avoided stigmatization was by distancing the matter to the point where, instead of talking about menstruation pertaining to herself or other women close by, she talked about what menstrual cups could do for less fortunate girls and women in developing countries. Perby stated that,

> "I tried to be factual, but I have had to grow some thick skin after x number of lectures and learning how to talk about menstruation with 60-year-old men. If you bring it down to a level of talking about how menstruation is for girls in developing countries and then explain why it is important that they have access to good products, it is easier."

On the other hand, the following quote may signify that Drevik's management techniques may also be to protect herself by preventing others from expressing potentially devaluing and stigmatizing statements. Namely, if they were to enter the conversation topic of developing menstrual products, Drevik recalled she would frequently get comments from men that disregard the complexity of the product development work, the products themselves, and trivializing women's needs, and the experience of having a menstrual cycle. Drevik stated that,

> "a typical question from a man, actually it was more of a statement than a question, would be 'but oh, my God, how hard can it be to stick some cotton in one's underwear?' They didn't see it as something to develop, they didn't get it."

Such comments reflect not only a trivialization but also a lack of understanding of the products, as 'sticking cotton in one's underwear' would be a rather inefficient and uncomfortable means to handle menstruation. One of the main causes of such attitudes, especially among men, is that they have been excluded from the conversation their whole lives. A lack of knowledge and understanding of what menstruation entails has conditioned them not to think about it, in which case trivialization may come as a natural response when being asked to do so. Louise Berg stated,

> "that classes are still divided in a way that girls are to talk about menstruation and boys are not allowed to participate causes the notion where boys think they are not allowed to talk about menstruation, which implies that there is an initial taboo that boys are not allowed to touch, which then causes boys not to think about it because they were never let in, and girls learn from the beginning not to talk about it because this is her own secret."

Drevik, however, has experienced the destigmatization process of menstruation and menstrual products over her years being engaged in the business. She recognizes that although the process is underway, we are far from reaching complete normalization, as the matters are still infrequently discussed openly. She stated that,

> "this was many years ago and I know that guys today have become more loosened up, but it still isn't that easy. It's still quite hush hush."

For those respondents who have not worked with menstrual products for as long as Drevik, such as entrepreneurs Louise Berg and Ingrid Odlén, their stories of their work diverge markedly. Odlén, who has actively worked in this area for a couple of years, has only had mostly positive experiences and reactions about her work. Berg, on the other hand, who has been working with menstruation for around seven years, has experienced many more barriers and difficulties gaining traction for her project, especially in the beginning. Hearing about Odlén's experiences, Berg stated that,

> "that's why I was thinking that Ingrid can't have been working for as long as me if she has such positive experiences of menstrual entrepreneurship."

Another entrepreneur, Daniella Peri at Yoppie, discussed that there is currently great interest in 'femcare' and in a positive sense, adding that a lot of new technologies, data, content, and demand are increasing around it. She argued that there are great opportunities involved with the ongoing destigmatization of menstrual products, but people still seem afraid or hesitant to venture around it. Peri stated that,

> "There is so much to do for women, but no one dares or wants to."

Further, Berg expressed a clear conviction that she has experienced the destigmatization of menstruation and menstrual products, however, stating that there has been a shift in attitudes on the matter. She stated that, generally, people have previously received her business endeavor with skepticism and disinterest. Years later, in 2018, the same individuals showed her respect and interest, although her ideas remained the same. Berg stated that,

> "That feeling of respect was probably not there three years ago. Now, I get a lot of praise by the same people who said there was no market three years ago, and I have not changed my business plan at all."

Furthermore, societies go through changes such as in the case of large influxes of immigrants from widely differing cultures. According to Drevik, such matters can affect the process of destigmatization, and there might even be a risk that it slows down or even regresses. She stated that,

> "but we are so influenced by another culture in Sweden, now, who have a different view of menstruation. I really hope it doesn't go backward, that would be a damn shame."

Moreover, respondents recognized that it is not necessarily only culture and religiosity that play roles in determining the fortitude of the menstrual stigma in a given social setting, but also population trends including demographics such as a growing segment of elderly. Anders who works in regulatory affairs at Essity stated that,

> "It might be a question of age as well. Older people have a harder time and young people have an easier time taking in and discussing and are more open. I think this is true, at least when I look at my own children that's the case. And that's great. I'm sure it's complicated and that many different factors are involved."

Solgun Drevik agreed that age plays a large role in the destigmatization process, especially in combination with gender. As someone who has been in the business for a long time, she also identified trends such as pivotal leaps where the destigmatization increased periodically. She stated that,

> "Men don't know how to tackle the matter if they are a bit older – no, no, no. But it's that slow process of change and it's really funny, I think it's really funny to see what happened between the 60s and 70s and the 80s – you see really clear jumps there. So, you can look at someone and think 'wait, what was that damn man like? Oh, right! He was born in the 60s!' So, you have to think about where we're coming from. I can only look at my own kids, they are very desensitized in this area."

Furthermore, those working at Essity discuss the stigma, in terms of a V-Zone taboo. What they refer to as the v-zone is anything related to the female reproductive organs, including culturally engrained notions about how the menstrual cycle should work, how female genitals should look, what menstruation might smell like, et cetera. Jenny Smith, Regional Marketing Manager in the Nordic division for Essity and TENA stated that,

> "The v-zone is what we talk about and when we talk about the v-zone from a Libresse perspective, we mean what is in this area [gesturing around her pelvic area]: both the vagina, vulva, and the bikini area. We work a lot with that term,

> so, we talk about the v-zone taboo and everything connected to this part of the body."

Essity have categorized the menstrual taboo into four labels as a tool for understanding how to handle it. First, invisibility implies that menstruation and everything related to it should be hidden, ignored, censored, discrete, and disappearing. Smith explained that,

> "There are really four large parts that there are taboos within, which we all recognize and relate to. It should be hush, hush, invisible; it shouldn't be noticeable that we are menstruating, you sneak around and so on. That's something you recognize from your own experience, how it's been growing up and that's even worse in other parts of the world."

Second, purity gathers all the 'positive' connotations associated with menstruation and the female genitals and implies that the v-zone should be clean, white, virgin, and sanitized in unrealistic, unattainable ways. Smith described this as,

> "Then, it's about cleanliness; it should almost be virgin-like and nothing is allowed to smell, and it should be white and clean and such – this applies to everything regarding the genitals. Lots of taboo around this."

Third, objectification represents the pressures to look and be sexy and includes the culture of pornography and domination. This category includes practices such as having surgery in order to get 'the perfect vulva,' which is often an idea established and reaffirmed in pornography and does not reflect the norm. Smith explained that,

> "There is a lot of taboo on how to look. There are even people who go and have surgery to look 'right' down there, according to someone's idea about how one should look. Awful things, really, that we are exposed to because we are fed with these notions through media and expectations on us."

Fourth, and finally, repulsion is the category containing all the negative associations with menstruation and female genitals including impurity, dirt, staining, disgust, stigma, undesirability, smell, ugly, and so on. Smith stated that,

> "And then, there's a loathing toward menstruation and that it smells. That it's something dirty and disgusting about menstruation, and it's not something I want

> to see. It's almost like I don't want to throw it in the public trash can because someone might discover that I am menstruating. So, there are lots of taboo aspects out there when you start digging into it."

With these notions about menstruation at the core of the stigma, there are a number of consequences on the menstrual product market. For example, there is a social risk implied by potentially failing products, which has effects on how consumers purchase and use them and simultaneously what and how products are developed from the producing end. It also has effects on how legislation treats menstrual products, where the regulations and standards are often associated with the neglect of menstrual products as a stigmatized matter by respondents. The lack of pressure from consumers to rectify these issues can also be connected to the stigma. These matters will be discussed in the forthcoming sections, where I discuss my findings on the ways in which the menstrual product stigma affects the menstrual product market in Sweden, currently.

4.2.3. Lack of knowledge, regulations, and standards regarding product safety

As identified in the empirical background, there is a lack of knowledge and regulations about the safety of menstrual products. This was confirmed in my findings. A matter frequently mentioned by respondents regarding product safety is that because of the limited knowledge generated and communicated between experts and other stakeholders, including consumers, people often lack information about menstrual products and their safety. Such lack of information is likely to exist, primarily due to the stigma that prohibits open discussion about menstruation and menstrual products, which would provide an opportunity for those with deeper insight to rectify. Instead, lack of information is likely to further stigmatize the product group.

As previously mentioned, limited research and investigations are conducted on this matter, and most of them are done in-house by manufacturing companies. Recently, however, an increasing number of reports have been published by various governmental agencies including the Swedish Chemicals Agency and the French ANSES (Genet, 2018; The Swedish Chemicals Agency, 2018). The point of departure for these investigations is that there is a fundamental lack of regulations, standards, and knowledge about the contents of menstrual products

and how they affect users and the environment. The project leader for the Swedish Chemicals Agency's investigation, Amanda Rosen, expressed that,

> "There are lots of chemicals but very few regulations, and we know very little about the chemicals in the products we use, so it is very good to try to increase such knowledge […]

When asked why there is a lack of regulations on the matter, Rosen argued that legislation is often fragmented and unless specifically prioritized, certain product groups might fall between the cracks. This explanation is focused on the practical implications of how legislation is constructed and does not go into any depth about why certain products are not prioritized. Nonetheless, Rosen points to a disconnect between how legislation is developed and the reality of how laws and regulations might be needed and followed in practice. She stated that,

> "Legislation is created in a fragmented way by different groups who think differently and different authorities who work in different places and who do not speak to each other, and to try to force reality into the legislative template is not always a simple task."

Those products that are not prioritized explicitly, for instance, by being classified as medical devices in the case of menstrual products, are then covered by broader legislation such as the EU's General Product Safety Directive. According to Rosen, this can cause problems when products might be in need of closer control due to the nature of their use, such as on sensitive skin or mucous membranes. She added that,

> "Legislation is built in a way that from the beginning it's decided that products have to be safe to be on the market, and you say 'okay, here you go' to the companies to take responsibility for that, then rules are created for certain substances in specific products, but in between those there are gaps."

The agency's day-to-day work normally consists of monitoring and testing products in reference to existing legal frameworks; however, because of the lack of such frameworks that apply specifically to menstrual products, this project was different. Instead, they had to figure out new methods to investigate these products, including what chemicals to test and what levels might be considered acceptable. Because it was one of the first studies that was so comprehensive,

globally, the Chemicals Agency consider it to be a strong foundation for subsequent investigations to build upon. In other words, the study should not be seen as a one-time complete and flawless study; rather, it is an initial investigation with room for many improvements because there are still so many aspects that we know too little about when it comes to the safety of menstrual products. Hence, there is much more knowledge to be gathered. Rosen stated that,

> "This is a good point of departure to discuss the contents of intimate hygiene products. The conclusion was that you people don't need to worry, but it wasn't like we didn't find anything; rather, there were 21 different potentially dangerous substances. So, there are things to discuss. What we had to think most about were the three menstrual cups that contained siloxanes, where we were unable to make a risk judgement. Instead, we had to go on what we know about these types of substances, but we don't think they are dangerous because of their size. We don't think they can be absorbed by the body."

Rosen further indicated that they have done their utmost to perform a high-quality investigation, but there is still a lot of unknowns about how the real-life use of menstrual products affects the body. The testing conducted at the Chemicals Agency took extreme scenarios into consideration, where the maximum amount of chemicals would be extracted from each menstrual product, exposing the body to plausibly much higher levels than during regular usage. In a sense, this again implies that expert knowledge remains disconnected from the actual use and experience of menstruating and using menstrual products. This leaves a gap between a report that states that there is a lack of knowledge and there might be a risk implied by using menstrual products, in relation to feeling reassured as a consumer that regular use is entirely risk free, because there is still no way of knowing for sure. Hence, more knowledge is needed in order to avoid stigmatization of menstrual products with regard to their safety. Rosen asserted that,

> "How it actually works inside the body, we do not know. It is possible that substances stay completely within the menstrual products or that only a little is emitted. We do not know if all of them are emitted the first few days or whether it is emitted a little at a time. Those things have never been investigated, so we can't say."

Furthermore, the Chemicals Agency pointed out that it is manufacturers who hold the responsibility for the safety of menstrual products, as per current EU legislation where they are classified as consumer products. They also stated that the manufacturers should work toward increasing their knowledge of the substances in menstrual products, especially those whose effects are largely unknown through current research. Rosen stated that,

> "The manufacturers themselves should find out more about these substances that we don't know much about…."

On the same note, Anna-Lisa Persson at the Swedish Consumers' Association argued that with multinational supply chains it might be difficult for manufacturers to control the raw materials they source, but they are likely to have rigorous testing and requirements set on their suppliers. Without standards or regulations prescribing regular third-party testing, however, Persson argues that they as a consumers' organization and, indeed, consumers, have limited capacity to determine the safety of the products they use. Persson stated that,

> "One could suppose that [manufacturers] have the same types of criteria for the cotton they purchase regardless of the origin, but Persson states that often the composition of products is the same across production facilities and countries, but the amount of pesticides in the cotton can vary a lot depending on, for example, the country and time of year. So, it boils down to what controls each manufacturer has in place, but that we do not know. They might have great controls. It would be interesting to know how companies purchase their cotton and rayon and what their criteria are."

In summary, respondents indicate the lack of knowledge, regulations, and standards pertaining to the safety of menstrual products – a matter likely connected with the stigma on menstruation and menstrual products and consequential neglect thereof in political decision-making.

4.2.4. Lack of pressure from consumers to regulate

According to Rosen and several other respondents, one of the main reasons that there are so few studies on the safety of menstrual products is the lack of knowledge, or communication, of issues experienced by consumers. Rosen expressed that,

> "We have never had any indications that there might be problems with menstrual products, which is why they have just been left alone."

The matter of communicating one's menstrual experience and actually being conscious of one's menstrual experience to the point where it could be communicated are both complex in the context of stigma. This is because stigma causes disassociation, which implies that people do not think or talk so much about that which is stigmatized as they would have, were it not stigmatized. Consequentially, people hardly know about their own experiences, let alone other people's, since they tend to ignore matters related to menstruation. Therefore, it is theoretically likely that the more stigmatized one experiences menstruation to be, the less consumers are likely to reflect on and know about their own and others' menstrual experiences and products. This implies that consumer organizations, manufacturers, governmental agencies, and others that might be considered responsible for overlooking the safety of menstrual products may not be alerted of issues to the same extent as they might have, if products were destigmatized. Nonetheless, there is some communication of issues about menstrual products that has reached such actors, including the Chemicals Agency. Rosen gave an example of a Finnish agency that performed investigations after having received multiple complaints of strongly smelling panty liners as well as physical symptoms caused by them. She claimed that,

> "Scented panty liners, which is a product that seems to cause a certain amount of problems, should be controlled very carefully, if they should be sold at all […] We received tips during 2015 and 2016, I counted eight emails or letters in the past two years, and there are two from consumers who have experienced issues and the remaining six are things like 'I bought these liners, they stink of perfume, shouldn't you be looking at this?'"

Admittedly, out of the thousands of users of any given menstrual product on the Swedish market, the number of complaints sounds rather low. Nevertheless, the Agency followed up on them and found that there was not much else to do than discuss the matter with the manufacturers in question, because there were no legal frameworks or standards to compare the products to. Rosen explained,

> "We have reported all the cases, especially those where there are concrete concerns to report. We have been in contact with those who sell these liners in Sweden and communicated a little with them. What we have been told is that they have not

> added any perfume; rather, odor neutralizing substances have been added in production. They argue that there can be other perfume-like substances that aren't actual perfume but that can cause the scent and I don't really understand that because according to the emails we've received, they really stink and I'm thinking I need to go buy myself a carton, so I know. And then, they say they've done all kinds of tests and that they are safe to use. And then we haven't gotten much further."

Furthermore, another reason why there seems to be a lack of pressure from consumers about regulating or standardizing menstrual product safety is because they do not seem to have reflected on whether there are already regulations or standards. This could be for a number of reasons. Firstly, products that are used on or inside the body are commonly highly regulated, so people are likely to assume that menstrual products are as well. Finding out about the lack of regulations and standards for menstrual products often triggers responses such as surprise and anger among the respondents. Lisa Perby at MontlyCup has taken it upon herself to start lobbying to rectify the matter, because she is concerned that unsafe products might be placed on the market, lacking regulations and if their competition gets a bad reputation, then there is a risk that it might rub off on them as well. She stated that,

> "It's completely crazy that there aren't any requirements at all. It is really frightening. Things we have inside our bodies that don't have any requirements […] It worries me that there are new menstrual cup companies popping up the whole time without there being any legislation in place. We are very sensitive because we are very small; so, if one menstrual cup is harmful, then so are all the others."

Gynecologist Christina Lloyd agreed, stating,

> "Because of what I work with, it surprises me a lot when you tell me about the lack of standards and regulations on menstrual products because I haven't even reflected on it, like 'what? How can this be?'"

Generally, people in Sweden, in particular, place a lot of trust in the government and companies to protect them as consumers, but that trust still mandates some type of control function. Anna-Lisa Persson at the Consumers' Association expressed that,

> "In Sweden, we have a very high level of trust in our society, and that includes a trust in that products on the market do not contain hazardous chemicals. It is nice to have this image, but it can also go wrong when that trust exceeds reality and we do not have the controls in place to ensure that products are safe."

Rosen at the Chemicals Agency agreed that rules and their enforcement through controls are necessary to ensure product safety. She claimed that,

> "Companies have a responsibility, but there is no one controlling how or that they take that responsibility. And there is a lack of detailed rules, which would enable for an authority to control that they do. So, in theory, they can develop products and add, really, anything, and then say that 'we think this is safe.'"

Persson implies that there should be third party controls, and not only controls within manufacturing companies – a point that some manufacturers, such as Michael Moscherosch at Johnson & Johnson, agreed upon. However, he further argued that, philosophically, it is impossible to prove the safety of a product, since a hypothesis can only ever be disproven. Hence, there is no way that companies could ever know for certain that their products are 100 percent safe. Nonetheless, he argued that they should do everything in their power to ascertain that anything they place on the market is as safe as they can be using any methods at hand. At the same time, he stated that this is not something they do for menstrual products because it is not part of their core business. He stated that,

> "You can't prove safety, you can do everything in your power that with the knowledge you have, the product is safe. External reviews, and all kinds of stuff, and I think that's a great thing to do. We don't do that so much in femcare, because it's not really one of our key businesses."

Arguably, this sounds like a contradiction of sorts. When discussing further, it seems as though Moscherosch bases this position on the notion that consumers see menstrual products as commodities – namely something you need, like toilet paper, a necessary evil, which you want to get out in the market in as simple and hassle-free way as possible. He stated that,

> "I mean, femcare is probably not the biggest concern for consumers. They are much more concerned about what's in their sunscreen or face cream or whatever; there are other areas where they are much more interested. Because femcare or toilet paper are commodities; it's just something you have to buy anyway, unlike

> sun care. If you have concerns about coral reefs or skin cancer, then that's a different decision. You can choose not to use sun care product and stay in the shade or carry an umbrella, but very few women can choose not to use sanitary protection. It's a commodity. It's just like very few people decide 'I'm not going to use toilet paper because I don't want the trees to be cut down.' They say, 'screw the trees, I need toilet paper.'"

Viewing menstrual products as commodities might further imply that they are seen as interchangeable without giving much weight to their potentially differing functions or other selling points. This could be an explanation for the low amount of variation among products on the market today. On the other hand, manufacturers frequently discuss the numerous ways in which they adapt products through innovation to consumer needs.

Furthermore, viewing menstrual products as commodities as opposed to products whose safety need to be regulated and monitored due to the way in which they are used, is in line with views that might be considered grounded in the stigma. This brings us to the second reason why consumers do not exert any pressure for regulation or standardization. Because people do not talk about menstrual products due to the stigma in place, people rarely think about them more than what is necessary, let alone question their safety. Gynecologist Christina Lloyd was initially very surprised upon finding out that menstrual products were so unregulated. However, she then argued that the view of menstrual products as a commodity can be related to how government classifies products. Because menstrual products are classified as consumer products, it signals that there is no need to pay particular attention to them. She added that,

> "I find it unbelievable that menstrual products are classified as consumer products and are so unregulated. Depending on how you classify products, their development will be directed in a certain direction. If they are seen as just any consumer product, supply and demand are what govern their development; menstrual products will always have a high demand, but that is not because they are good products; rather, because nature demands that women use them. What I find is that you can generally choose what you buy and what you wear or want to eat, but this is a very important question."

Berg, who considered the failure to regulate or standardize menstrual products as an obvious sign of the stigma agreed, arguing that it becomes almost comical when

products that people know are unhealthy but choose to consume anyway are much more regulated than menstrual products that cannot be dismissed as easily. Discussing the lack of regulations and standards, she expressed that,

> "These are things I have been really angry about as they don't exist. There is obviously a product that is in contact with our most sensitive mucous membranes where the body is open, and the risk for infections is greater than normal. That explains a lot about the taboo, that we have standardized, like, chips I guess, and say that they can cause cancer, but you haven't looked at these products that are used continuously and are much needed. And people say, 'oh, we forgot this area, whoops!' That is very much a typical example of the taboo. We haven't forgotten anything else, it seems like, that is in direct contact with mucous membranes."

The same applies regarding classifications, standards, and labelling products as organic. When it comes to food, according to Anna-Lisa Persson, it has to be at least 90 percent organically grown to be labelled organic, whereas menstrual products can contain much less. This is unless they are third-party certified, such as in the case of some tampons that have been granted the Nordic Swan label. Persson explained that,

> "There are different regulations on food, which has to be 90 percent organically grown to be certified, and skincare or menstrual products where only one percent is needed to be able to call them organic. If tampons are labelled organic, it can often be about 20 percent that is organic cotton because there are no regulations. There's third-party certifications that do their own testing like the Nordic Swan who did their own test of tampons, which resulted in that they removed their label from one of the brands."

It seems as though one of the main arguments by respondents that menstrual products are not regulated or standardized is because the matter simply is not considered important, largely due to the stigma. Drevik stated that,

> "To be blunt, we're talking about a subject that the men would rather sweep under the rug and women don't see as important. Because it's a necessary evil, and that makes it difficult."

In summary, a number of aspects can be connected to the lack of pressure from consumers to regulate menstrual products. Firstly, the lack of communication about issues with menstrual products, which could be connected to the difficulties

about identifying and talking openly about such issues. There seems to be some kind of vicious circle where the difficulty in talking about problems with menstrual products because of the stigma keeps people from expressing their wants and needs. As a result, manufacturers do not think consumers have any issues with the products, so manufacturers tend not to change products, or develop new kinds of products to suit consumers better; thus, the stigma is reproduced. Secondly, there is a high level of trust in the government, especially in Sweden, to regulate products intended for oral intake, alternatively used on or inside the body, which implies that consumers are less likely to question whether such products might be controlled and safe or not. Third, and finally, menstrual products are often seen as a commodity, or a product that does not deserve much attention from regulators, because it is a 'necessary evil' and people would rather think about it as little as possible.

4.2.5. Social risk of trying new products

Furthermore, because of the stigma, there is a social risk implied by trying new menstrual products, since they might fail and result in leaking menstrual blood. This notion limits product developers, in the sense that the farther away a new type of product is from mainstream products such as tampons and pads, the more hesitant consumers might be in trying them. The homogeneity on the market can also be associated with the lack of safety standards, since the most accessible way to measure the safety of menstrual products often entails benchmarking the market leader. Solgun Drevik argued that,

> "Products are very similar because you want to resemble the market leader since the same testing companies are used, and so on. It's hard to come out with divergent products because then users don't have confidence in the new products."

On the topic of user's attitudes toward different menstrual products and engaging with their own bodies, Drevik, as a product developer who has interacted with many users over the years, knows from experience that as a consequence of the general perception of menstruation infused with stigma, many users are hesitant to engage actively with their menstrual blood and their genitals. She argued that most people want to use a simple product to deal with menstruation, to have it over and done with in a quick and easy manner, where 'out of sight, out of mind' is the motto and keeping a safe distance so as not to associate oneself with it, in

accordance with the stigma. But this does not apply to all people. Increasingly, the destigmatization is contributing to, and influenced by, more consumers who are willing to engage with their bodies and their menstruation by, for instance, using a menstrual cup.

Using a menstrual cup implies getting blood on one's hands, blood in the toilet that needs to be cleaned out, washing the cup and reinserting it, and not least, developing a technique for insertion as well as discovering the correct position for the cup to avoid leakage, which can take several cycles for some. Hence, menstrual cup use requires a different type of interaction and intimacy with one's menstrual blood and body, which, over time, becomes a normal part of one's everyday life, thus destigmatizing the experience of menstrual blood and menstruation for that individual. It also implies a certain level of social risk to try this new product, since it might fail, resulting in visible blood stains. As Moscherosch stated,

> "I would say the social risk is high everywhere. I don't know any country where culturally it's fine if you have bloodstains on your clothing. I don't think so. I don't know any country where this is easily accepted. It's a horrendous experience, no matter where you are. This is not something that you want to experience."

This could signify that for those willing to take such a risk, the fear of bleeding through is not as great as for others, implying that they do not experience the stigma as strongly or are willing to take the risk.

The use of menstrual cups further teaches users about how much they bleed, as it becomes visible in a whole other way than when absorbed into material such as a pad or tampon, and about the insides of one's own body, which is not something that is encouraged among women in other circumstances, at least not openly. This can be seen as increasing users' menstrual literacy, which in turn contributes to their knowledge about menstruation in general. This matter is further discussed in the section on education and knowledge.

Because it is uncommon that women are encouraged to explore and learn about their menstruation, Drevik states that she is impressed by those who are daring enough to get to know their own body and menstrual cycle by using a cup. Especially because it can take time, can be messy, and takes some dedication to pursue successfully. More specifically, starting to use a menstrual cup implies going through a number of steps, from my own experience and numerous discussions with friends and manufacturers: 1) figuring out what cup size and

shape will suit your body and flow; 2) paying a larger sum upfront than for other menstrual products in the hope that it fits and you figure out how to use it, and do so for a longer period of time, so that in the long run, it becomes a cheaper alternative; 3) researching insertion techniques, including different ways of folding the cup to insert it in the easiest way for oneself and trying it out, which can often be uncomfortable; 4) figuring out the correct positioning of the cup for your body, which is often different for everybody depending on, for instance, how low or high one's cervix is; 5) ensuring that the cup is inserted correctly by feeling around it with your fingers, possibly twisting it and pulling gently at it or cutting off the tip, so that it does not chafe or stick out; 6) hoping that it does not leak and doubling up with other menstrual products such as a pad or liner because the likelihood of getting it right the first time is rather slim, since research can only get you so far and you have to figure out what works for you; 7) taking out the cup with your fingers and getting blood all over your hands and emptying it in the toilet, rinsing with water, and reinserting; 8) spending up to three menstrual cycles to figure out how to use it without having any leakage; 9) figuring out how often you need to empty it, depending on the day in your cycle and how heavy your menstruation is that day; and 10) boiling or otherwise deep cleaning the cup between cycles in a pot that might be used for other purposes as well or dedicating a pot for only that use.

This process might entail different steps for different people. Some do in fact get it right on the first try, such as Lisa Perby who was so happy, she started her own company selling them. Others try several different cups and never find the right fit. Regardless, going through the process of learning how to use a menstrual cup implies a certain level of dedication toward getting to know your body, and committing to not being afraid of engaging intimately with your genitals and menstrual blood, the smells, getting it on your hands and possibly clothes, and investing a larger sum upfront than one might for other menstrual products. Engaging with your menstrual cycle, and menstrual blood to this degree, as opposed to when using disposable products where all you do is insert it into your vagina or underwear, take it out, and throw it away implies that users often become more comfortable with their menstruation and thus the notion of menstruation in general, which contributes to destigmatization of menstruation and menstrual products.

The notion that Solgun Drevik is impressed with further implies that those she refers to should be proud – the opposite of ashamed, which is the traditional view of menstruation. Therefore, the menstrual cup and engaging with one's body and menstruation can be seen as a way to contribute to the destigmatization of menstruation and menstrual products on an individual level. Furthermore, getting to know one's body in this way is often referred to as body literacy, which will be further addressed under the section on education and knowledge. Drevik stated that,

> "tampon users are more used to handling the products, but I am very impressed with girls who use the menstrual cup and think it's okay to handle [the blood] in that way. I am very impressed. […] There is a technique you have to learn, so there is some muck and sloppiness, and actually, you are much closer to your own blood than both tampon users and pad users. That is why it isn't breaking through because there are still so many people who don't want to know of, want to see, want to feel, or deal with all of that."

Furthermore, for those using menstrual cups, there are clear limits to how destigmatized they feel about menstruation. For instance, it is still very unlikely that you might see a woman rinsing her menstrual cup openly in the sink of a public bathroom, as Moscherosch points out,

> "I have not heard that women take their cup to the sink and rinse it in a public bathroom, I don't think that happens."

In summary, because of the stigma on menstruation and menstrual products, users are mindful of the risks implied by trying new products, which shapes the market in terms of what types of products are released and how willing or daring consumers might be in trying new products. Increasingly, menstruators are willing to try the menstrual cup, however. This signals that they are becoming more and more comfortable with their menstruation, which likely contributes to the destigmatization of menstrual products further. On the other hand, even menstrual cup users are unlikely to experience destigmatization to the point where they would rinse their menstrual cup publicly in front of other people.

4.3. Concluding remarks on the stigma in the menstrual product field and first steps toward destigmatization

To summarize, the menstrual product stigma prevails across the world, but the cultural variations imply that the stigma is varyingly strong in different countries and cultures therein. This entails that different factors are likely to be relevant for destigmatization in different cultural contexts. Education and knowledge, for instance, while relevant everywhere, are required to various extents and with differing adaptations depending on the recipient. Further, innovation and entrepreneurship, for instance, might be more relevant in contexts where the process of destigmatization has come farther, rather than in those where the stigma is stronger.

Moreover, the menstrual product in the context of Sweden has a number of implications on those working with menstrual products. For example, respondents have often had to develop social management techniques in order to be able to discuss their work outside their company environment. As the destigmatization has proceeded, this matter has become easier, and social management techniques are not needed to the same extent.

Finally, the menstrual product stigma has certain bearings in the field such as a lack of knowledge, regulation, and standards regarding product safety as well as a lack of pressure from consumers to regulate. These can be related to the neglect of menstrual products from political decision-making, exerting pressure on companies to rectify these matters, and consumers' trust in government to exert that pressure.

5. Reclassifying Menstrual Products

This chapter discusses the different ways in which reclassifying menstrual products can drive destigmatization. The chapter is structured according to each level of society and further to the factors underlying the mechanism at hand on that level. First, the individual level is discussed, next the organizational level and finally, the institutional. For clarity, this structure is repeated for each mechanism in the two subsequent chapters.

Reclassification is driving destigmatization in three primary ways. Education is occurring on the individual level, where individuals across society are learning more about menstruation and menstrual products, which both enforces and is reinforced by destigmatization. On the organizational level, increasingly informed consumers are gradually starting to express their demands for new types of products that suit their needs and wants more, causing the market logics to change, impacting the actions companies take in order to meet them. These actions are driving a destigmatizing agenda.

Further, market logics are also affected by the standardization, which is occurring on the institutional level. This causes somewhat of a reclassification of menstrual products from consumer products, or commodities, with a market solely controlled by supply and demand, toward being a matter of public health. Such a shift brings with it certain implications, in terms of how products are viewed and treated on a societal level, which can contribute to destigmatization. Hence, reclassification occurs in several shapes and forms, including the values associated with them on a societal level, how individuals relate to them, as well as in terms of formal rules, standards, and regulations. How this reclassification and destigmatization occurs will be further discussed in the forthcoming sections.

5.1. Reclassifying on the individual level: Educating

Through education, it is possible to teach or re-teach individuals that menstruation and menstrual products are not dirty or shameful, but entirely normal and necessary for human life to persist. In this way, menstrual products are reclassified as normal and thus destigmatized. Education and knowledge are imperative for destigmatization but can mean many things, depending primarily on the context discussed. It is clear that different cultural contexts require different kinds of education and knowledge.

On the one hand, expert knowledge about menstrual products is inconclusive, more or less globally, since there is, as previously established, a lack of research and testing on the contents of menstrual products and their subsequent effects on the human body. On the other hand, it can be argued that it seems as though there are different types of knowledge that are relevant regarding menstruation and related products. For instance, there is knowledge of the biological process of the menstrual cycle and pregnancy, which many people learn about in school, albeit briefly. Gynecologist Christina Lloyd stated that,

> "In sexual health education, they discuss the biological process of menstruation but that's pretty much it, unless the individual teacher chooses to discuss it further."

In places where the stigma is stronger, such as in developing countries, people have little to no knowledge about the menstrual cycle This can be connected to the culture of silence surrounding menstruation, which is stronger in some places than others, as discussed above in the section on the menstrual stigma. Michael Moscherosch at Johnson & Johnson recalled how he had learned of girls in India who thought they were going to die upon reaching menarche. He stated that,

> "We'd talk to girls that were telling us how the first time they had menstruation, they thought they had cancer because they started to bleed. Nobody had ever told them anything."

In order to address the stigma, it becomes vital to identify the level of knowledge in a given context and educate accordingly. In the case of developing countries, this often concerns education about the fundamental functions of the menstrual cycle. Moscherosch continued,

> "If you do research in India, for example, and ask about menstruation, they have no clue what that is, what it means, and without understanding it, you're not going to be able to overcome the taboos. […] If you don't understand about menstruation, why it is, what it does, what it means, that's a first step you have to take. Explain to people that you do not have cancer; this is normal, don't worry about it. It's very important."

As argued, the first step toward destigmatization is education. This stimulates a conversation about it, which normalizes and subsequently, over time, destigmatizes it. Moscherosch stated that,

> "[…] generally speaking, I think the more you educate, and the more you talk about it, the more you normalize it; automatically, there is less stigma on the product."

Education is the most fundamental aspect to destigmatization regardless of the culture discussed because to this day, there is still no place in the world where menstruation is destigmatized to the point that the population is saturated with menstrual education. Moscherosch continued,

> "I think [education is] generally important because it's still a taboo topic. It's not something you talk about at the dinner table, so it's kind of like a little bit of a hidden topic, more so in I would say the developing world than the developed world, but yeah, education is really, really crucial, and there's a huge need for it."

This notion was confirmed by entrepreneur Louise Berg who claimed that she was still learning new things about the menstrual cycle as an adult woman who has been menstruating for over 20 years. As an adult who menstruates, one can encounter matters regarding menstruation that are brand new, although they apparently affect many other menstruating individuals and seem to be basic knowledge, but that are not addressed in school. Hence, if you do not experience these yourself, you are unlikely to know about such matters, unless you speak to others about them, because what is included in school curriculums regarding menstruation is generally limited to the basic biological functions of fertility. Berg stated that,

> "I learn new things and I think: sigh, shouldn't this be things you learn about when you're young?"

In addition to expert or biological knowledge, there is vernacular knowledge of menstruation as a lived experience, which is not as widespread, nor widely valued on a public level, as the former. Findings indicate that menstrual products can be destigmatized through education about the menstrual cycle, and related products, but it is important that the knowledge shared is appropriate to the receiver. In other words, the menstruator needs knowledge that they feel is relatable and 'real,' in the context of their everyday lives and experiences of menstruating.

Although almost all women have their individual lived experience of menstruation, there is a lack of collective knowledge about what menstruating implies, often because the public discourse does not include women who talk about their menstruation. Rather, it consists of marketing and media, which often portray menstruation in terms of promoting freshness, cleanliness, freedom, and other romanticizing images of menstruating women. In other words, there are discrepancies between the knowledge of the biological process, the lived experience, and the public discourse of menstruation. Solgun Drevik pointed out that,

> "It's not until you work with these things that you understand how much work goes into it, because it is not something we talk about openly; people only think individually because that is where it happens. Behind closed doors. So, you don't know how anyone else experiences it. You think you're the only person in the world who experiences menstruation, and no one knows how much they really bleed, etc."

Regarding education and knowledge, there are three apparent categories of aspects that are vital for destigmatizing menstrual products. These are breaking silences and including everyone in the conversation, 'myth busting,' and providing 'real' information. These will be discussed in the forthcoming sections.

5.1.1. Breaking silences and including everyone in the conversation

An important aspect of education that drives destigmatization is breaking silences and including everyone in the conversation about menstruation and menstrual products. This entails ensuring that all people, regardless of whether male, female, or non-binary, are knowledgeable about the workings of the menstrual cycle and menstrual products. This is imperative not only for destigmatization directly but

also for getting menstruation and menstrual products on the agenda, especially since men represent a large portion of positions of power throughout society. Men's understanding of menstruators' matters is crucial to get good policies that address them. Inga T. Winkler, Lecturer in Human Rights at Columbia University stated that,

> "Gender equality is about gender relations, and men have notable stakes in reproductive health. Men constitute a significant share of head positions, making decisions that greatly impact women's everyday lives: from policy-makers deciding on matters such as the tampon tax, to principals choosing lightly-colored school uniforms without considering girls who are afraid of their period stain visibility. Achieving gender equality will require structural changes, but to make these positive changes happen faster, we need men on board." (Essity, 2019, p.21)

Although risking stigmatization, women are increasingly letting men into the conversation, which is likely enhanced when men show an initiative and interest. This also seems to be occurring to a greater extent currently, making such conversations easier. The greater an individual's understanding of that which is stigmatized, the less likely they are to stigmatize, which may also lead to destigmatizing behavior in situations or group compositions where there is a greater risk of stigmatization.

A matter that was emphasized as destigmatizing in the data was educating everyone and including everyone in the conversation. The primary reason for this seemed to be in order to provide men and women, boys and girls, and non-binary people with the tools to subsequently communicate openly about menstruation, thus evading any awkwardness or other stigmatizing behavior once the topic arises, or in order to break the silence about it. A vital aspect seems to be that any kind of shaming needs to be eliminated, both in terms of shame surrounding menstruation but also shaming those who have little or no knowledge about menstruation and that might experience a sparked interest when a conversation is started.

A consequence of educating girls and boys differently regarding reproduction and the menstrual cycle is that boys are closed off from at least parts of the conversation, which fosters the idea about menstruation being something they are not allowed to concern themselves with. Correspondingly, the separation of girls and boys in education regarding menstruation fosters the idea that girls should

keep their menstruation a secret and maintain the culture of silence surrounding it. Instead, to avoid stigmatization, it is important that boys and girls receive the same education so that a conversation about the matter is fostered, and no group is left knowing less, risking that these individuals might become future stigmatizers. Louise Berg stated that,

> "The fact that classes are still divided where girls go and talk about menstruation and boys are not allowed to take part gives birth to an idea in boys that 'I am not allowed to talk about this,' which means that they are not let in, and it means they don't think about it. It becomes an initial taboo that they are not allowed to touch, and girls learn from the beginning that 'this is not something I talk about; this is my secret.'"

Educating boys to the same extent as girls can also be a way to address the myths surrounding menstruation and menstrual products and to minimize the risk of misinterpretations that can lead to stigmatization. If the workings of menstruation become widespread and are considered common knowledge, myths and shaming practices will probably be eradicated, and destigmatization will follow. Gynecologist Christina Lloyd stated that,

> "…it is a question of knowledge, that there shouldn't be a menstrual stigma, that there is still so much misinformation, so the knowledge is really important, and it should be self-evident."

If boys and girls are educated equally about menstruation, then adults in the future will have more tools and fewer reasons to stigmatize menstruation. Nonetheless, until all children have access to such education, it is important to educate women and men as well. In some places, such as Northern India, it is common that men do the household shopping. This implies that, without specific knowledge or encouragement to purchase menstrual products, they likely will not do so. Further, without a conversation about it, it is even less likely that they will purchase the kind of menstrual product that corresponds to his wife's or daughter's specific needs. Michael Moscherosch stated that,

> "Education is extremely important. What I'm always saying is that don't only educate the girls, educate everybody, the mothers as well as the girls, but also the boys and the men. In Northern India, for example, in many regions the shopping is mainly done by men. If they don't understand menstruation, are they going to

> buy any, or the right product for their wife or their daughters? Probably not. So, the girls don't actually go out shopping, the women don't go out shopping so much either, so the guys go shopping. I don't know if you've ever asked a guy to go shopping for sanitary protections; that's an interesting experience, because the guys go all nervous about it and they have no idea; they don't want to be seen in the isle. And in India, there are places where they don't even offer the products or they are hidden somewhere, and if men don't ask for the product, they are not going to get it. That's why I think it's important that you educate the entire population about it, not just girls and women."

This has also been identified at Essity, who educate around 2.5 million people per year about menstruation according to Sofia Hallberg, Nordic Communications Director. In their Hygiene and Health report for 2018 and 2019, Essity further emphasized that breaking the silence and talking about menstruation in an educated manner and by including it as a natural and normalized part of general education is an imperative way to destigmatize. The report stated that,

> "Breaking the silence. […] Girls are encouraged to talk and discuss in an informed and positive manner to prepare them emotionally and physically for menarche and recurring monthly menstrual periods thereafter. […] Menstruation should be more talked about, let us make it our mission. Menstruation should not be seen as a taboo topic, but a natural part of education, development work, and other arenas. Public and private actors should use their reach and influence to enable more open conversations about menstruation." (Essity, 2019, pp.14 & 29)

Essity frequently discuss their communication, in terms of being a taboo breaking brand where they see themselves as somewhat of a pioneer who likes to take the first step and show others that there are ways to break the silence around menstruation. They use the metaphor of being an older sister to demonstrate to the metaphorical younger sister that if we can do it, so can you. The little sister is both other companies as well as users, and they apply it in terms of both advertisement and direct communication with users when they might ask for advice about product use or menstruation in general. Jenny Smith asserted that,

> "I think this, that we jump first, we take that step that maybe the little sister doesn't dare take and start talking about things and turn things upside down and create a debate, and that's something we've really done in the past few years."

One of their marketing campaigns, called #MensUtmaningen or #TheMenstrualChallenge, was aimed at spreading knowledge and intensifying discourse about menstruation in sports clubs and women's and girls' teams. The reason they targeted these groups was twofold. Firstly, because it is one of the places where girls might be exposed to stigmatization if they are a so-called 'early bloomer' and might quit their activity as a consequence. Secondly, the menstrual cycle can affect women's and girls' performances, especially in sports, which is why an openness and a conversation about menstruation is preferable, especially since coaches are often male. Jenny Smith described the campaign:

> "This was an initiative that we drove because we wanted to bring attention to all the girls out there who train but also those who don't train as much by getting clubs to start talking more about menstruation and actually educating coaches, who oftentimes are men and who don't even dare to speak the word and get it more on the agenda, and that it can actually really affect the girls on the team a lot and many of them even quit when their menstruation starts. If you're the first one to get it, then maybe you stop because that can be horrendously tough."

One way that has proven successful in the past to address this matter is to talk about it and signal to female athletes that they should not feel ashamed about menstruation as well as the ways it might affect them and their performance. Instead, having a conversation about the matter might create an understanding of the status quo and result in solutions that are more suitable and productive for both the athlete and the coach at that given time, instead of wasting time and energy on something that is not going well that day. Smith asserted that,

> "Just by starting to talk about things, because that's how you remove taboos, you can actually get a lot of girls to stay in the club and also that maybe you get to feel like it's ok, as a girl, to feel that 'maybe I can't perform as well this time because I'm menstruating, and I can tell my coach that and that's okay and then he can tell me that I can go to the gym or something if there's something I feel like I can't do."

The main goal of the project was to start a conversation among athletes and coaches about menstruation and normalize it in the context of sports, because all too often it is a matter that affects athletes to some degree but that is rarely discussed. Jenny Smith described the destigmatization strategy of the campaign as breaking the silence around menstruation by educating:

> "If you sign up for this, that means you have to do these things in the club: you have to start talking about menstruation; you have to go through this training about menstruation. All coaches should start talking to the girls [about menstruation] and should carry menstrual products in their training bags; obviously, the same way you have band aids."

The campaign is successful in breaking taboos and destigmatizing menstrual products. What generated the most positive response is that the men involved found relief in being able to base conversations on knowledge they did not previously possess. These men had namely been struggling to break the silence, not because they did not want to, but because they were lacking in knowledge about what to say and how. Smith stated that,

> "I think that what we got a lot of response to was that these men found it really comforting to have something to hold on to, some education and someone who started talking about it because they found themselves feeling very uncomfortable in that situation, of course. And then there's a group of teenaged girls who are sitting there, not wanting to do anything or don't want to come to practice or something – so, this way they got some tools. So, it's not that they don't want to, it's a lack of knowledge that makes them not dare to talk about things."

Another notion that points to the importance of education and knowledge in destigmatizing menstruation and menstrual products is the curiosity expressed by those lesser informed, as well as enabling an environment that fosters such curiosity and without stigmatizing on the basis of ignorance. For example, Odlén pointed out that when she talked to her male friends about her project to develop a new kind of menstrual product, she found them to be surprisingly positive and curious. She explained that,

> "They are aware that they know very little about this question, and they are almost ashamed, and they really want to know more. They know that 'this is the way society is, and that is why I have never felt like they need to find out more about these things, but now that you are talking about it, I realize that it is crazy that I don't know these things,' which is nice, but again, this is probably not very representative of men across the globe."

It is an interesting notion that those who would traditionally likely be in a position of power and take on the role of stigmatizers are described as ashamed, because this signifies that, in this particular instance, the traditional stigma that places

shame on the menstruator or the person who discusses menstruation seems almost nullified, as the shame is instead placed on the person who lacks knowledge about menstruation. This implies that in this situation, menstruation is regarded as a natural process that everyone should understand, but social norms that stigmatize menstruation have prevented the development and dissemination of such knowledge among the public, and particularly men. While it is likely that this view is under-represented outside the scope of Sweden, Lund or even her friendship group, it is an interesting occurrence that the shame had shifted, signifying a destigmatization of menstruation in that particular instance.

In a different sense, however, discussing menstruation and menstrual products openly during lunch with both men and women present can be seen as an individual-level destigmatizing action, where other individuals are invited to a conversation about something traditionally stigmatized as though it were not. The more such conversations are held, the more the discourse surrounding the topic will increase and the individual level destigmatization will affect the structural level destigmatization and the process will continue iteratively.

Including everyone in the conversation can be received in various ways where people are more or less receptive to discussing the topic. Another instance where non-traditional interest and curiosity were expressed was recollected by Louise Berg, who stated that,

> "Some people say, 'that is a girl thing' and what I say is: actually, I have been to schools and many parties where those most interested are guys who feel like 'Oh! Can I finally ask my questions now? Will you answer them?' They can be a bit hesitant at first but slowly but steadily they come over, one by one, and want to ask a bunch of questions, which is a lot of fun."

This can be seen as a further indication that discourse on menstruation is increasingly spreading into new spaces, out of the private sphere of women. It is an interesting notion that the initiative toward increasing that discourse is not only taken from the side of menstruators but also from men, who express an interest in menstrual products, functions, and experiences of menstruation. Again, this is an indication that attitudes are shifting from shaming and disgust toward encouragement and interestedness. Moreover, products, especially those that are new on the market, are being reclassified as fascinating rather than dirty objects to be hidden in secrecy. It is noteworthy that discourses and men's openness to

discussing menstruation vary between cultures. The social context where men are intrigued by Louise Berg's work in a private setting is very different from the public scene where many men are uncomfortable in the menstrual product aisle, as discussed by Michael Moscherosch. In the former, the proverbial ice has already been broken, Berg has taken on the role as the silence breaker and opened up the conversation. Unless this is done, however, the culture of silence makes people want to distance themselves from menstrual products, making purchases thereof uncomfortable. However, the more actors are let into the conversation, the more the culture of silence will be broken down, products destigmatized, and consumers will find it less uncomfortable to hover in the menstrual product aisle.

Another example where the conversation is spreading to include people who have traditionally been left out is with fathers who ask advice on how to speak to their daughters about menstruation. They are intent on showing their daughters that menstruation is not something they need to hide from their fathers and want to do so by starting a conversation in a constructive way, free of shame. If and when they succeed in doing so, they are proud of their destigmatizing achievement and want to share the outcome. Berg stated that,

> "It varies a lot who it is, but I have, for example, heard dads with daughters that are soon going to get their period, who ask me how to talk to their daughters: 'Louise, what do I do?' Then afterwards, they like to tell me so I can say that they've done a good job, which is funny. 'I spoke to my daughter yesterday!' 'Okay, well done.'"

This can be seen as a further indication of breaking silences through individual actions, namely fathers asking advice about how to discuss menstruation with their daughters and then doing so. Such actions can have the effect that daughters do not experience menstruation as stigmatized on the same level, nor as a question to be discussed only by women and hidden from men. By showing engagement and concern for their daughter's health and well-being, menstruation can be redefined as a normal matter related to any person, regardless of whether male or female. Furthermore, this quote once again illustrates a shift in attitudes, or reclassification, from shaming and silencing to openness, acceptance, and pride.

> "Before, it was more 'you can't talk about that stuff, [the market] is already saturated, people were more uncomfortable. Now curiosity has taken over and people want to be more modern. Like when I get a text message from my guy

> friend in the middle of the night asking how you take out a menstrual cup because it must be slippery, and there is no thread to pull on."

Breaking silences and including everyone in the conversation thus entails an important factor that contributes to destigmatization since it provides people with the tools to be able to discuss menstruation and menstrual products in a destigmatized and destigmatizing way. This is especially relevant for those who have previously been shut out of the conversation, often men and boys, from an early stage in their lives. These individuals often have a surprising will to engage in the conversation but may be hesitant due to the risk of feeling ashamed because they know so little about the matter, as it is often considered general knowledge by those who are having conversations about it in public currently, including many of my respondents. Instead of shaming, however, it is important that these men and boys are invited to join conversations, which may lead to a display of curiosity and enthusiasm toward learning more about menstruation and menstrual products.

5.1.2. 'Myth busting'

What can be regarded as expert knowledge is debatable. Is it the health experts who know about menstruation or the women who live through the menstrual experience who really hold the expertise? In most cases, it is probably the health experts who are regarded as such, but it is not them who are destigmatizing menstruation or menstrual products today, contrary to what previous research states. We have had health experts with knowledge of the menstrual cycle since the late nineteenth and twentieth centuries, whose knowledge caused a shift from a disarray of ideas about the blood that exited women once a month toward the 'scientific menstruation' (Vostral, 2008). This led to a contradiction between conservative health experts, who applied patriarchal constructions prescribing women to certain practices and behaviors during menstruation such as taking "a mandatory rest from school and activities during their periods," and feminist health experts arguing that menstruation is a natural and healthy process during which women should be able to continue with their normal lives (Vostral, 2008, p.4).

History has shown that it was the former set of ideas that gained traction, and in order to be able to do so, the idea that hiding one's menstruation became

reinforced. The ways in which menstruation was used to subjugate women, further indicates why hiding one's menstruation has been desirable. Vostral (2008, p.4) argues that "since the problematic bodily event was the menses, if women could act like they were not menstruating or at least convincingly hide their bleeding bodies, they might be spared the unsavory opinion that they were unstable and unfit as political beings and workers during their periods."

Furthermore, when taking a historical perspective, it is important to remember that many myths and widespread lack of knowledge of the basic biology of menstruation is prevalent in some cultures. The culture of silence surrounding menstruation tends to cause a lack of conversations about the matter, which inhibits the spread of information about, for instance, new types of products. This further affects their demand and availability on the market. This is evident in the slow pace at which information about menstrual cups, for instance, became clear to Louise Berg when she first started using one. She questioned this, stating that,

> "why does no one know about this fantastic invention?"

Once the silence is broken in a given context, there is often an iceberg of questions and discussion points below the surface waiting to be discovered. It seems as though this discovery often only implies breaking the silence by starting the conversation on menstruation and menstrual products and showing others that it is acceptable to discuss these matters. By being able to ask questions, one can get answers, and share experiences and knowledge, which diminishes the unknown mysteries and myths that uphold the stigma.

One of the barriers to convincing people in the Global South to try the menstrual cup is the many myths surrounding the hymen. The idea of the intact hymen as proof of a woman's virginity is regarded as a prerequisite for marriage in cultures where sex before marriage is prohibited. In these cultures, vaginal examinations are sometimes performed in order to determine whether a woman is a virgin or not, prior to marriage. If her hymen is not intact, it is often believed that she is not a virgin and she might not be considered for marriage. In reality, however, the membrane referred to as the hymen does not necessarily cover the entire vaginal opening; most often, it has a big enough hole to apply a tampon or allow for menstruation to pass, and can break or stretch for many reasons other than sexual intercourse (Planned Parenthood, 2020).

Due to the widespread lack of education and knowledge about the hymen and female genitalia, even medical practitioners around the world still practice such examinations in cases of, for instance, sexual assault, although research frequently shows this type of testing is not viable (Mishori et al., 2019). Because it is believed that the use of internal menstrual products such as menstrual cups and tampons will break the hymen, and thus affect a woman's potential examination results, these myths stigmatize the use of certain menstrual products. Hence, the most efficient way to falsify the myths and thus destigmatize the products is through education. Louise Berg stated that,

> "One of my greatest obstacles is the idea of the hymen, so I developed educational material to show that it is a myth."

Another category of myths that uphold the stigma on menstruation and menstrual products are those that segregate menstruators from their regular lives. In some cases, these practices confine those menstruating to menstrual huts. In colder parts of the world during certain times of the year, girls and women risk dying from freezing temperatures or smoke inhalation when trying to keep warm by building a fire in a confined space. One of the reasons for this practice is the lack of education and knowledge on the matter. Myth busting was thus argued to be one of the most fundamental aspects to break the stigma on menstruation by, for instance, Michael Moscherosch at Johnson & Johnson who stated that,

> "The most extreme cases are if you go to Nepal, where every year women freeze to death because they're not allowed in the house [when menstruating] because they are considered unclean and it has partially to do with that people are not educated about what menstruation actually is, and what it means, and that it doesn't mean that the milk gets sour or they can't go to the temple or something like that."

The lack of knowledge about the menstrual cycle is not singular to low-income countries, however. Although most people in Sweden and other high-income countries understand the fundamental biology of the menstrual cycle, knowledge about the workings of hormones, especially when manipulated by contraceptives, is rare. This knowledge gap causes misconceptions such as invalid notions about what happens to eggs and menstruation if it is not coming out of the body once a month. Such ideas further stigmatize menstruation and can only be addressed through education, according to gynecologist, Christina Lloyd, who stated that,

> "[…] there are different delusions about where the menstruation goes if it doesn't come out, etc. 'such a lack of knowledge that is connected to the hormones!' So, I think one of the successes that could come from the type of work you are doing is to create a natural understanding of the fact that this is something we have to raise so the knowledge about it is broader, that it exists in our school literature in a completely different way, that boys know a lot about it."

Another myth related to the stigma on menstruation, and female genitalia, is the notion of the perfect vulva. This myth is widespread and strong across cultures and is upheld primarily through the pornography industry. There are many issues related to the image of women in pornography. However, what is most relevant to this study is the way the vulva is portrayed, namely without hair and with small inner labia that are hardly, if at all, visible from outside the outer labia. In order to address this myth, it is important to educate by spreading positive portrayals of different looking vulvae to normalize their heterogeneity. Jenny Smith at Essity discussed this matter, stating that,

> "Society projects a myth of the perfect intimate area, fueling insecurities that get in the way of a positive relationship between women and their intimate area. But such perfection doesn't exist; in fact, different is the norm. To fight against the societal myth of perfection, we want to create body positive/v-zone positive images to help women feel proud of their v-zone."

In summary, when a culture of silence dominates a matter such as menstruation and menstrual products, the limited amount of information and knowledge that does spread is not necessarily accurate. Many of the myths surrounding menstruation and menstrual products are grounds for the stigma in the first place, which is why an important aspect of destigmatizing is to bust those myths and provide accurate knowledge in its place. This knowledge should also be relatable to the recipient, so it can be taken in rather than disconnected from the experience, which is more abstract and often more difficult to understand.

5.1.3. Providing 'real' information

Traditionally, medical expert knowledge has not only been positive for destigmatization, but findings show that it has always been valued higher than experiential knowledge. This seems to be changing, however. As menstruation and menstrual products are discussed more openly, more often, and in more diverse constellations, attitudes are changing, and curiosity is spreading. This seems to be triggering people to talk more about each other's experiences, and knowledge is spreading as a consequence. Furthermore, the more people learn about other's experiences, the more they realize that they are rarely alone in their concerns. This both increases the understanding and acceptance of their own body and menstrual cycle, resulting in higher confidence, which leads to destigmatization.

As previously mentioned, traditionally, there has been a focus on medical expert knowledge, and very little attention has been paid to the individual as well as shared experiential knowledge of menstruating. This includes menstrual product users' experiences. Some respondents have indicated that menstruators who are asked to share such knowledge express gratitude that their opinions, thoughts, and experiences are valued and taken into consideration in the process of product development. Just as in the case with the men Louise Berg had spoken to, as demonstrated in the quotes above, it seems as though once the silence is broken and the conversation is started about menstrual products, people are often more than willing to discuss. This could be seen as a direct contradiction to the stigma, but what it might also indicate is that although social codes dictate that we should not talk about menstruation openly, people still want to do so. Once it is viewed as socially acceptable in a given situation, people will often uninhibitedly express their thoughts and experiences. Entrepreneur Ingrid Odlén stated that,

> "when I did the market research, there were so many people who almost thanked me for allowing them to express their opinions when, really, I should be the one thanking them for contributing with their thoughts – there are a lot of companies who pay consumers to do this type of thing."

Another respondent who discussed the notion of consumers showing appreciation when asked about their opinions on their menstrual product use is the Lead Product Developer at Feminine Care, Sofia Ekstedt at Essity, who stated that,

> "Something regarding stigma that we can see is that we do lots of consumer research, and we talk a lot to the consumers, and most women are very happy about being allowed to talk about what doesn't work and so on. So, there, it's almost the opposite – one is very positive toward talking about what doesn't work and their experiences."

Taking users' needs and preferences into consideration is at the core of developing products that succeed in the marketplace, not only for entrepreneurs developing brand new products but also for those developing their existing product portfolio. This includes understanding how consumers feel about using their products and how they feel about menstruating in general. This is especially important to take into consideration when communicating through, for instance, advertisements. Former product developer at SCA (now Essity), Solgun Drevik, for instance, stated that,

> "So, you always have to see to consumers' relevant insights in all of it and that is that 'there are a number of days each month where I don't feel like I normally do, even though [menstruation] is natural, I don't feel as usual.' And it is different how people handle this. Some become moody, some tired, others try to act normally, but mostly it comes out anyway. […] It is important to make women feel as though they are taken seriously."

Taking the experience of menstruation seriously is considered a part of the mechanism I call claiming agency of menstruation and menstrual products and will thus be discussed in greater detail in the forthcoming chapter.

Another aspect of providing real knowledge that respondents considered important for the destigmatization of menstrual products was informing consumers about appropriate product selection for their different needs. Essity, for instance, deals with stigma, not only regarding menstrual products but also incontinence products. One challenge that these product stigmas hint at is that discussing both product groups at once implies that the user is stigmatized not only in one, but two ways simultaneously. This complicates things for manufacturers who have to deal with two matters that are not generally discussed openly. Jenny Smith at Essity discussed the differences between products intended for incontinence and menstruation and stated that due to stigma and associated difficulty in educating about these products and their use, many women habitually use suboptimal products for their needs. She argued that in order to

address the stigmas on these product categories, we need to educate about menstruation and incontinence, respectively, to be able to talk about their intended uses. Smith stated that,

> "they are adapted for different types of fluids. Products that are for incontinence are adapted to be able to absorb a rather large amount of fluid – urine – and should be able to absorb very quickly and in one place. Menstruation is more viscous and needs protection both forward and backward, and these are the things women don't know about. […] There are very many people who don't know this, and they don't understand why these products are more expensive, but it's a completely different type of more advanced product. So, I would say that this is something we work a lot with at Libresse, to break the taboos because it really isn't something you talk about."

Another respondent who points out the importance of education about correct product use is entrepreneur Daniella Peri at Yoppie. She argued that not only is there a widespread suboptimal usage of incontinence versus menstrual products, but also of tampons. This is related to the notion that the discourse surrounding menstrual products is primarily made up of what companies communicate on and around their products. In the case of tampons, Peri argues, the labelling of different absorbency levels causes consumers to want to use the one called 'normal' in order to not feel more out of the ordinary than they already do while menstruating. Peri stated that,

> "Women need to be educated about correct tampon use and why this is necessary."

To summarize, there is traditionally a separation between medical or biological knowledge and experiential knowledge of menstruating, where the former is what is taught in schools and educational programs, and the latter is less a part of the conversation about menstruation and more something to keep for oneself and a matter of figuring out a way to handle one's menstruation on one's own. As the conversation is growing and spreading, however, people are becoming more likely to ask about and share experiences, which places experiential knowledge in a more valued position than before. This contributes to destigmatization by enabling a discussion that is close to the matter at hand, without detachment and euphemisms.

5.1.4. Concluding remarks on reclassifying through education and knowledge

To summarize, education and knowledge were frequently discussed as important aspects driving destigmatization of menstruation and menstrual products. Through education, menstrual products can be reclassified as normal and perhaps even positively connotated, in the sense that they provide menstruators with the ability to continue their daily lives, although they are menstruating.

In order to break path dependencies pertaining to who engages in conversations about menstruation, it is important to include everyone in the education. This will give all people a basic knowledge on which to lean on, rather than remaining silent or contributing in a stigmatizing way because of ignorance. Further, it is of vital importance that that the information that is transferred in education is 'real,' in the sense that it is relatable and meets the recipient wherever they are, culturally and mentally, especially. Finally, breaking myths about menstruation and menstrual products that uphold the stigma is an additional factor that contributes to educating and ensuring that people have accurate knowledge about the process and experience of menstruating and using menstrual products.

5.2. Reclassifying on the organizational level: Changing market logics

As consumers become increasingly educated and confident about menstruation and menstrual products, their demands on manufacturers shift. They start asking for products that better suit their needs, in terms of user friendliness, fitness to purpose, environmental considerations, practicality of acquiring products, and so on. These demands place new types of requirements on manufacturers, who, traditionally, serve a large market with a few types of products, arguing that it is impossible to meet every menstruator's needs with such a broad customer base. Thus, they develop a product that is scalable and suits the masses, but not necessarily any products for those with specific needs or wants that diverge from the norm. With a consumer base that does not express their demands because of the culture of silence but consumes products anyway due to the natural process of menstruation, the market becomes guided primarily by manufacturers and their

initiatives to listen to consumers, because it is unlikely that they will express themselves on their own.

Simultaneously, there are very few requirements placed on manufacturers, given the lack of standards and regulations on menstrual products. With a shift in consumer demand, and potential forthcoming standardization, market logics are shifting from classifying menstrual products as consumer products, or commodities, toward being considered public health goods. The former signals that consuming the products is a choice, where the supply and safety of the product can be guided by demand alone. The latter, in contrast, signifies products that meet the inherent and natural needs of the many people born with a certain biological function and that need to be regulated as such for the protection of consumers.

Another aspect that is emphasized by entrepreneurs in the menstrual product field is the lack of standards, which slows down the time to market significantly and contributes to reducing the number and quality of products on the market. This is something that is indicated as a problem with two main implications. Firstly, the lack of standards implies a risk that unserious actors that sell unsafe products might jeopardize consumer safety. Secondly, it means that there is such difficulty in identifying what measures need to be fulfilled in order to ensure products' safety that companies starting up need to spend large amounts of time and money that could otherwise have been devoted to making even better products. Lisa Perby stated that,

> "From idea to finished product, it took 1 year because it has to be done right. But it took that long, and we have spent two million SEK on testing. If you can't do that, then you shouldn't go into this business. We have gone the long way to learn this, which is why I think everyone needs to do it. I called around to a bunch of different agencies to figure out what we should follow, and how to ensure that our menstrual products are safe. It's worrying how few people actually know what it takes. The large actors know but generally, it's much too easy to enter the field."

Without clear standards or regulations in place that pertain to product safety requirements, entrepreneurs need to reinvent the proverbial wheel each time a new product is to be released on the market. Although standards are often viewed as stifling innovation, in the case of menstrual products, the opposite is argued, for this reason.

5.2.1. Informed choice and shifting consumer demand

Consumer demand in the menstrual product field has remained stable and predictable for a long time, since focus has been placed largely on developed countries and disposable products, with little innovation and expansion into developing countries (Euromonitor, 2016). This, in combination with the fact that there is little regulation or standardization on menstrual products, has governed the supply and demand conditions, where demand has been high due to the products' connection to a monthly recurring bodily process in a large portion of half of the world's population.

However, the high demand has not necessarily been connected to users' satisfaction with the existing products on the market. Users have not traditionally reflected on their menstruation and menstrual product use to the same extent as they are increasingly doing now. The former implies a habitual consumption of products, rather than making an active choice and assessment of products on the market and in connection, placing pressure on manufacturers to supply products that meet high demands. Gynecologist, Christina Lloyd, stated that,

> "If they are seen as just any consumer product, supply and demand are what govern their development; menstrual products will always have a high demand, but that is not because they are good products; rather, because nature demands that women use them."

The notion that just because there is a high demand for existing products, it does not necessarily imply that users are satisfied with them, which was also supported by entrepreneur, Ingrid Odlén, who stated that,

> "I also think that there are very many women, which is also visible in my study, who are quite unsatisfied with their current menstrual products."

Sometimes, consumers need to get creative because they do not have access to affordable products that meet their needs. Consumers are smart and tend to find solutions to problems that might be unmet either globally or in their local menstrual product market. Moscherosch argued that,

> "Consumers are pretty smart, they figure this out. So, I know regions where women actually are using, for example, for their period, they figure out, because their period is probably not very strong. They double up on panty liners instead of

> buying napkins, because two panty liners are cheaper than one napkin. So, there is always an economic factor that helps women, plays a role in their decision about what kind of product they are using."

This can be seen as an example of the way the current menstrual product market lacks the ability to cater to every woman's needs and ability to pay, but also as an indication that issues with current solutions on the market might not always be communicated by consumers to manufacturers.

The creativity described in the previous quote, and other consumption practices, is associated with an informed consumer who reflects on her purchases regarding, for instance, willingness to pay for a given benefit, purpose fulfillment, environmental impact, and so on. One way that informed choice can be increased is through standardization. This can lower the information asymmetry between manufacturers and users about products, including their functions, safety, and appropriate disposal. Puleng Letsie from the African Coalition for Menstrual Hygiene Management stated that,

> "So, some of the things that standardization addresses is first of all, is that it shows that the product is identifiable by consumers according to a common definition. So, whether it's size or materials, it gives a common definition to the product, and that's true for any consumer product and related standards. It also gives the consumer sufficient information on the packaging to make an informed choice that the product that they're buying, or procuring, is safe for them, is appropriate for them. Then, the consumer should have information on appropriate disposal or pooling of used products, which essentially means disposal, collection, segregation, and the connection of the segregated waste."

Furthermore, as a consequence of increased knowledge and education, including increased menstrual cycle literacy, menstruators gain more confidence and become more aware of their personal needs pertaining to menstruation and menstrual products. This further enables consumers to communicate their needs increasingly, both among users and with manufacturers, which implies that the demand conditions in the field change. Entrepreneur Louise Berg argued that at the beginning of her menstrual career, in 2015, people in the start-up world would tell her the market was full, or saturated. In a sense, this was true, according to some business analysts, and was due to the focus on disposable products distributed in the Global North (Euromonitor, 2016). This statement implies

some disregard for untapped markets such as in the Global South, however, as well as the potential for new types of menstrual products, including reusables, which indeed are proving to be lucrative markets, as they are growing as of late (Euromonitor International, 2019). This is an example of how the market is used as an excuse for neglecting this type of product. Louise Berg stated that,

> "When I started this project, there was more than one person who told me that there was no market, that it was already full, and that there was no demand. If you only knew how many people told me that, and that was only the first six months. Big investors, businesspeople, they told me that this market was full and that there was no need for this. I wonder how they were reasoning, when half of the world's population menstruates – I would like to argue that there is a recurring need, but that's just my opinion."

Another way that the market is unsaturated is regarding segments such as consumers with heavy menstruation. These consumers often have to use several kinds of menstrual products at once, because there is no single product that satisfies their needs. This implies that existing products are both inefficient and must be changed very often, which can lead to difficulties leaving one's house for too long. Moreover, these consumers must pay much more than those with little or moderate bleeding. Instead, this segment could be seen as potential for innovation of new kinds of materials that are more absorbent and specifically for those who bleed more. Lloyd stated that,

> "Another parameter to remember is the amount of menstruation different women have. Women with very heavy menstruation have difficulty finding suitable menstrual products and often have to use both tampon and pad simultaneously. So, that's another aspect because these women not only suffer a lot from it, but it also costs them a lot of money."

A further development in the area is that many users have realized that the sizes offered at the beginning of the menstrual cup boom, namely small, for those who have not given birth, and large, for those who have given birth, were not sufficient. Instead, users and companies increasingly noticed that there was a need for further specificities, including shapes and sizes, to suit a broader range of users and vaginas. The notion that such variations are discussed is also in itself a step toward greater knowledge and literacy about previously silenced aspects of bodily

functions, which, again, furthers destigmatization of menstruation and menstrual products.

5.3. Reclassifying on the institutional level: Standardizing and supporting regulation

5.3.1. Standardization and regulations on menstrual products – a background

In accordance with the New Approach, i.e., an agreement laid down in a Council Resolution addressing technical harmonization and standards, the EU has since the beginning of the 1980s favored standardization, as opposed to 'formal regulation' as a means to regulate the technical requirements to ensure the safety of products. This is due to the many benefits of standards, including their adaptability according to, for instance, research findings and being voluntary in nature, yet providing motives such as quality assurance and higher specificity and clarity regarding how to fulfill technical requirements (European Committee for Standardization, 2016). Standards can be created on a multinational level by standardizing organizations such as CEN (on a European level) or ISO (on a global level), or among companies in a certain industry (Blind, 2002).

The standards in place in the menstrual product industry are sparse. A selection of these include an absorbency labeling standard stemming from the Syngina Test (which tests tampon absorbency) and a German standard, which is brief and outdated in terms of the scope of health aspects, chemicals, and testing that it addresses (Bundesinstitut für Risikobewertung, 1996). Both of these are applied globally (EDANA, 2016). Additional standards include an Australian standard, which includes ISO requirements on medical device testing (Australian Department of Health, 2019); an East African standard, where its primary use is for the legitimate importation of menstrual products as opposed to ensuring their safety (East African Community, 2008); and a Chinese standard for menstrual pads, although these are rumored to contain fluorescent whitening agents (Zhuang, 2015), etc.

In the United States, menstrual products are classified as medical devices and fall under the jurisdiction of the Food and Drug Administration (USFDA). The USFDA has issued a guidance document with recommendations considering aspects of the labeling, chemical contents, and performance characteristics of menstrual products. While it is more comprehensive than most standards, aside from the MDSAP, the guidelines provided are not particularly clear and highlight the lack of standard testing methods for chemical components (Center for Devices and Radiological Health, 2005). Furthermore, researchers frequently find e.g., dioxins (polychlorinated dibenzodioxin, PCDD, and polychlorinated dibenzofuran, PCDF), pesticide and herbicide residues, including glyphosates, substances that the FDA specifically recommends against, indicating that manufacturers seem to neglect the FDA's recommendations (Scranton, 2013). Two countries stand out with regard to their rigorous menstrual product standards, namely Canada and Japan. This standard, called MDSAP (Medical Device Single Audit Program), is a medical device standard, which through its high and expensive requirements tends to inhibit foreign entrants (US Food and Drug Administration, 2017). The United States also follows the MDSAP for a large number of products classified as medical devices, which includes menstrual products in the US. However, they seem to have chosen to exclude this product group from MDSAP regulations.

In combination with national or regional standards, it is the EU General Product Safety Directive that should theoretically ensure that any products on the market are safe to use (EDANA, 2016). However, if there is no formal research or testing done relating to their specific use, i.e., inside or on the vagina for an extended period of time and repeated usage over an average of 40 years (Nicole, 2014), then there is technically no way of knowing whether those regulations are followed. It is notable that, according to FDA spokeswoman Morgan Liscinsky, she is not aware of any

> "well-conducted, peer-reviewed research on the absorption of pesticides from tampons that would serve as the basis for regulatory decision-making" (Nicole, 2014: A74).

Furthermore, even if women were harmed by unsafe menstrual products, a lack of testing and knowledge surrounding potentially harmful causes thereof would make it difficult to prove the causality between the symptoms and menstrual

products. Since 1999, the call for such research on a national level has repeatedly been raised by Congresswoman Carolyn Maloney (District of New York), most recently in 2011 in the United States,

> "It was knocked down as unnecessary and a waste of money."

Philip Tierno, Professor in Clinical Microbiology and Pathology at New York University continues,

> "You can bet your bottom dollar if the bulk of the representatives were female, or if these males menstruated, they would have passed it by now" (Nicole, 2014: A73).

In Sweden, the issue of the lack of knowledge, awareness, and control of the chemicals in menstrual products has similarly been raised multiple times at a national level. Most recently, in 2016, which was the first time it had concrete effects. Textile expert, Anna-Lisa Persson, at the consumer representative organization called the Swedish Consumers' Association took the initiative and succeeded in gaining the government's attention, which caused a formal investigation of glyphosates in menstrual products by the Swedish Chemicals Agency. Prior to this project, no Swedish governmental organization had controlled menstrual products. One reason is because menstrual products are classified as consumer products on an EU level, and thus in Sweden too, which implies that they fall under the jurisdiction of the Swedish Chemicals Agency. Similar products such as band aids, condoms, and incontinence products that are classified as medical devices, however, fall under the control of the Swedish Medical Products Agency (Medical Products Agency, 2017a).

5.3.2. Reclassifying through standardizing menstrual products

I argue that reclassifying menstrual products on the institutional level aids in ensuring product safety, instilling greater confidence in consumers and thus, contributing to destigmatization of menstruation and menstrual products. As standardization is in its early stages, efforts toward destigmatizing through standardization (as well as innovation and entrepreneurship) are not yet employed to an extent where results are clear. This could be an indication that the institutional level is slower moving and that the individual and organizational

levels might be more easily affected and thus accelerate the process more quickly than on the institutional level. This could in turn be due to their structural embeddedness in legislation, bureaucratic organizations, fields, and governments.

Nevertheless, I argue that a number of attempts to use standardizing as a driver are found as an aspect that would benefit the menstrual product field in a number of ways. Firstly, for the purpose of destigmatization, standardizing menstrual product safety would signal to consumers, governmental agencies, and organizations alike that the product category and its users are taken seriously, as a matter of public health and safety. When those in power allocate resources toward something that has previously been neglected, it can contribute to the destigmatization thereof by giving agency to the matter.

Secondly, taking action in order to put forth women's and other menstruators' safety can aid in gender equality in ensuring that menstruators' safety is as important as others' safety and that menstruation and using menstrual products is not a choice, but rather a biological fact. Thirdly, standardizing menstrual product safety, if done in the 'right' way, can stimulate innovation by clarifying the safety measures required in order to place products on the market, minimizing the time and money that entrepreneurs need to spend on navigating that complex setting today. Fourth, and finally, standardizing can increase the transparency of product contents, which reduces information asymmetry between consumers and manufacturers. This empowers consumers with greater informed choice.

In order to address these benefits, a number of requirements need to be fulfilled, because, as findings show, there are barriers that prevent standardization from occurring. These requirements consist of supporting legislation such as product specific classification; creating a standard that is smart, for example, in the sense that it does not limit future product development by making current products the benchmark; getting the right actors on board; understanding and aligning goals among participating actors and increasing transparency between manufacturers and consumers.

5.3.2.1. Establishing supporting legislation

An aspect that is frequently mentioned by respondents when discussing the lack of menstrual product standardization is that the matter would be much easier to rectify had there been legislation that classified menstrual products in a more specific way than consumer products. By granting menstrual products the benefit

of specific classification, this might signal that they and their users and their users' safety are taken seriously by those with decision-making power. This in turn would aid in breaking the cycle of neglect of menstrual products and their users and thus aid in destigmatizing. The need for a more specific classification is generally described as the nature of how products are used, namely inside or in intimate contact with the skin, sensitive skin as well as the mucous membranes. Such products are usually classified, for example, as medical products, medical devices, pharmaceutical products or devices, or as cosmetics. This is the case in the United States, where products are classified as medical devices, either type one or type two, depending on whether used internally or externally. This type of solution is seen as beneficial, in terms of classifying products as public health goods and protecting consumers. Amanda Rosen at the Chemicals Agency stated that,

> "There was one of the menstrual cup manufacturers who reacted to the report by sending a letter to the parliament about how she wanted menstrual products to be classified as medical devices. […] this could be one way to get better control, but the way it is now, it's up to the industry to ensure that things are as good as they are, things could be worse."

Reclassifying menstrual products as medical devices in Sweden would not require a legislative amendment and would effectively place higher requirements on manufacturers to take responsibility for product safety, eliminating actors who do not take product safety seriously. Furthermore, the menstrual cup manufacturer that Rosen referred to was Lisa Perby at MonthlyCup who has worked toward getting the Swedish Government or EU to reclassify menstrual products as medical devices for years. Perby stated that,

> "You don't need to change the law to include menstrual products under medical device legislation. A bunch of other countries have already classified them as medical devices..."

While greater legislative support through reclassifying menstrual products seems to be a matter called for by many, there are barriers in terms of a lack of resources as well as mandate to ensure proper monitoring of the products devoted to relevant agencies by the Swedish Government. Anna-Lisa Persson at the Swedish Consumers' Association stated that,

> "It's problematic that the Chemicals Agency has so much on their plate; they are responsible for all products that aren't classified as anything specifically, which isn't a great position to be in. I think they should be classified as medical devices and that continuous random sampling is done by those who have the resources to do them, such as the medical agency."

In Sweden, medical devices are regulated, standardized, monitored, and controlled under the medical agency, which has a substantially larger mandate in how to conduct those activities in comparison with the Chemicals Agency, which is responsible for consumer products including menstrual products. According to Pontus Lyckman, who was Director of Standardization of Consumer Products at SIS during our first point of contact, an initiative toward standardizing menstrual products, alternatively changing the classification thereof, could come from the Chemicals Agency.

When discussing the matter with the Chemicals Agency, they agreed that reclassifying menstrual products would be positive for their monitoring and control, as well. Amanda Rosen at the Swedish Chemicals Agency was one of the project leaders of their investigation of chemicals in menstrual products during 2016-2018. From the very beginning, when the agency received an order from the government to perform the investigation, she was worried that they would not have the resources or mandate to perform the type of study that was needed, much due to the classification of products. She argued that if possible, it would be better for the medical agency to perform the investigation, but that it would be difficult to define menstrual products under the current wording of the medical device classification. This definition namely includes products that prevent or treat illnesses or pregnancy. Rosen stated that,

> "There have been questions about which governmental agency is responsible for the control of these types of products, but we have together with the medical agency arrived at, at least currently, it is us, since they cannot be classified as medical products, which I think is because they are not considered to have a medical purpose. […] It would be good if the investigation found that they would be better off at the medical agency because their legislation is better at taking care of these products."

Supporting regulation is pointed out as a matter that would aid in the standardization and further assurance of product safety in other places than

Sweden as well, such as in India. Menstrual product entrepreneurs in India find the lack of standards and supporting regulation a barrier to placing safe products on the market, similar to in Sweden. Suhani Jalota, founder and CEO of Myna Mahila Foundation, a women's health organization in India, is a small-scale manufacturer of menstrual and maternity pads. For the last 8 years, Suhani has been working in slum areas and rural communities in the Philippines, South Africa, Thailand, and India, distributing menstrual and maternal pads as a manufacturer. She stated that,

> "I think on the first question around the varieties of sanitary napkins and the quality maintenance across the different products, we really struggled from the very beginning, I think in understanding what the standards are. […] For sanitary napkins, though, it was and has been more challenging because we don't necessarily understand – is there a certain central laboratory where we can go with our products and ask them to test it across certain parameters and then what should we be finding and what the standard for that should look like and how is this in any way going to be different from the standards that are set for the large-scale commercial manufacturers, or should it really just be the same? […] And I think that that's still something we are not clear around, what are the actual standards that we can truly implement on the ground."

Because of the lack of specific rules and regulations on the safety of menstrual products, the Swedish Chemicals Agency needed to develop a new method for performing the investigation. Hence, if there had been supporting legislation in place, there would probably also have been standards in place and performing the investigation would have been facilitated. Rosen described that,

> "There are frames and rules for how risk assessments are made, and they build on that you have certain information about substances. That did not exist here, so we didn't do it in the 'real' way, instead we had to develop a new method."

Furthermore, supporting legislation in the form of for instance specific classification could also benefit standardization. This could place menstrual products within an existing category of business areas at standardization organizations, which could prevent them from falling between standardization areas, which has previously been the case. Helene Edmark, then Business Area Manager at SIS, stated that,

> "It has fallen between areas, there's no clear material, and no one has driven it from a consumer perspective."

Again, a comparison between menstrual products and condoms can be done, where the latter were brought to the forefront during the AIDS epidemic in the 1970s and 80s and were subsequently standardized and supplemented with supporting regulation. Anna Jonsson, Project Leader at SIS, stated that,

> "You don't know where [menstrual products] belong; there are so many different materials. Condoms, however, are under the rubber committee and received lots of attention as a health insurance."

Furthermore, even when the issue was raised at SIS, the notion that there is no supporting legislation in the form of, for instance, classification resulted in a down prioritization, due to the fact that starting up such a project is substantially more difficult than one where there is prior work or supporting regulations in place. In a discussion together with SIS and myself about how to go about standardizing menstrual products, Louise Berg pointed out that,

> "How should tests be done? How should standardization be done? We could do anything – the largest barrier is that there is no standardization yet."

In other words, historical neglect fosters continued neglect of the matter, due to the perceived difficulty of breaking out of path dependency. Practices that reinforce existing structures are also likely to reconstruct existing power structures between matters that are prioritized and those that are neglected, such as menstrual products. In order to break such cycles, clarity is needed regarding the product types and their specific needs and requirements as a foundation on which to build standards. Edmark stated that,

> "In areas where there is a clear, maybe even finished… then this; you didn't know where it would go; whether it would be a Swedish project, clear goals, and the more unclear the project, the fuzzier it becomes and then we have a bunch of finished areas where people specify a need and there is a group and then you prioritize that, where it's already burning and there are several companies that are already confirmed."

On the other hand, there are areas, previously neglected and also stigmatized, such as sex toys, which have now been standardized by the same organization. There are two main differences between the two projects. Firstly, the Swedish market for sex toys is much more concentrated and balanced in size among actors. Secondly, there was a specific problem to be addressed, identified by a doctor who continuously faced operations where he needed to remove sex toys from people's abdomens as a result of unclear standards to ensure product safety. This has not been the case to the same extent in the menstrual product field. Edmark stated that,

> "If you compare it to sex toys, doctors contacted us saying that there are a bunch of risks, and there's a need to develop standards. If it's not the industry, it could be consumer organizations who create an alert and then agencies pick up on it. Here, there haven't been large enough risks or quality issues that have been lifted; so, no one has driven the question. If there would have been a huge problem, it would have come up earlier."

Hence, respondents emphasize legislative clarity regarding product categorization as an aspect that would facilitate standardization. Such clarity could be reached by, for instance, classifying menstrual products as a more specific category than consumer products. One step in the direction toward addressing legislative inequalities regarding menstrual products is the example of the UK abolishing the tax on menstrual products entirely at the end of their Brexit transition period on January 1, 2021. This had not been possible under EU legislation, which, according to the UK government, mandates VAT on menstrual products (UK Government, 2021). All the while, Scotland was the first country in the world in November 2020 to provide "free and universal access to menstrual products in public facilities," thus working around the sales tax by not selling them (Woodyatt, 2021). Simultaneously, Germany reclassified menstrual products from consumer goods to daily necessities in 2020, enabling them to lower the tax from 19 to 7%. The minimum tax of 5% set by the European Union cannot be eliminated, however (Eddy, 2019). In other words, current legislation in the EU is thought to prohibit the classification of menstrual products as anything but consumer goods; yet, some countries are finding other ways to rectify related issues.

In summary, establishing supporting regulation, where products are reclassified would likely facilitate standardization by clarifying the types of products, what

tests might be appropriate to ensure their safety, how other similar products are regulated, etc. The current lack of legislation is therefore stifling the standardization process since there is nothing on which to anchor such work. Furthermore, as with standardization, establishing supporting regulation would likely signal that menstrual products and their users and their users' safety are taken seriously by those in power of decision-making on a governmental level. This would likely aid in breaking the silence and cycle of neglect, associated with the stigma, on a political level, and thus contribute to destigmatization.

5.3.2.2. Smart standardization

Another aspect that is emphasized as important to consider when standardizing menstrual products is to avoid negative side effects and standardize in a smart way that benefits consumers and manufacturers in the future as well as now. By initiating standardization that stakeholders perceive as smart, it is more likely that standardization will occur at all because one of the barriers that is limiting it is the skepticism among manufacturers toward standards in the first place. This attitude is based on the notion that standards are commonly shaped in a sense that places current products on the market as frames of reference for the standard. Such standards limit subsequent product development to forms that are comparable within the parameters of those products on a market at the time of standardization, further limiting the potential innovation on that market. This is not desirable in the menstrual product field, from manufacturers' perspective, nor from a consumer perspective or any other actors' perspective, for that matter. Instead, respondents frequently emphasize that so long as standardization does not limit the innovation and product development capacity, there are several ways that they could be useful.

In accordance with how certain respondents have named the concept, I have termed the creation of standards that are beneficial from a safety standpoint and that do not limit manufacturers in ways that are undesirable, smart standardization. Standards also need to be smart, in terms of employing compliance and enforcement protocols, because standards that are not followed or followed up are useless.

It is important to take all the different safety and sustainability aspects into consideration when creating a standard on menstrual products because it is unreasonable to pick and choose who and what the beneficiaries of the standard

should be. Actors need to work together to figure out how to ensure that future products are measured, in terms of what is good for people as well as the environment. Louise Berg stated that,

> "It's something I have sought and because this is the type of work format that I love, to dig up ways to find solutions. I think it's a lot of fun to think about how to include sustainability statistics, that it should be good for everything at the same time, and not only make sure that it's good for health and be total shit for the environment and everything else. We can't live in a society like that anymore."

Setting a standard on a reasonable level further implies that the standard fulfils that which it intends to, such as in this case ensuring product safety, but on a level that is attainable by different types of actors. Lisa Perby argued that,

> "I think the USFDA has a pretty reasonable level on their requirements. They bring up a lot of what is very important. It's still important that it's on a reasonable level."

There are countries which have adopted standards on medical devices onto menstrual products, with such high requirements that it is both expensive and inaccessible for any company that is not a global actor to follow. Such standards are likely to limit the supply and variation of products on those markets to the point where innovation is hampered additionally. Perby stated that,

> "It's only large multinational companies that are able to follow MDSAP. It's exaggerated."

Another important aspect is that standards pertain to the needs of the consumer in the local market where products will be sold. In some cases, the types of products on different markets vary widely, and creating a global standard would thus need to be smart enough to accommodate all different types of commercially sold products, at least. Moscherosch argued that,

> "The standards in my mind are generally a very interesting subject. I'm generally not a big proponent of global standards. I think standards need to use common sense, so one thing is, obviously you want the best possible product for the consumers, for the women in all the countries, so you want accessibility and affordability, and as I said before, it's sometimes very tricky to deliver. And then the other question is, what is the benchmark. So, if you look in the developed

> world, the benchmarks are commercial products, like always. In some regions, the benchmark is a homemade pad and even a product that would be considered not of high quality is still a significant improvement over a homemade cloth pad. So, it's tricky. In the end, I think that the important thing is how can we make standards that we maximize the impact, meaning that we enable the largest number of women to have access to the products, to live a normal life during their menstruation."

One way to ensure that standards are set on the 'right' level could be done by having different levels on which it can be complied with. Such standards have been set previously by ISO, such as that of latex condoms, according to Anna Sjögren, Project Leader at SIS. She argued in a webinar on the standardization of disposable menstrual products hosted by WASH United,[2]

> "I just wanted to point out that there, indeed, is no ISO standard on this specific topic, but there are on many other topics that work worldwide. So, it doesn't always have to be on a level that works for developed countries but does not work for low-income countries, you can find a middle ground. One example is that there is an ISO standard that works quite well for many years. It's the one on rubber latex condoms; it works globally, and a lot of low-income countries were a part of the development of that standard as well. So, there are examples and there are many standards that you can pick certain aspects from in order to create a specific standard for menstrual hygiene products, and also for local standards as well. So, there are ways of making an ISO standard that might not be so scary."

In summary, smart standardization can be seen as contributing to destigmatization, in the sense that it signals that products are taken seriously to the point where they are not only standardized, but the standardization has been thought through and engaged all relevant stakeholders in order to avoid negative consequences and to further the field in a beneficial direction. If on the other hand, standardization were to be done in a way that is not considered smart, this might reinforce the stigma by signaling that the matter is not taken seriously enough to do a better job. In other words, by not taking menstrual product standardization seriously enough to ensure that the standards produced are smart in terms of being high quality, taking all relevant stakeholder perspectives into

[2] WASH advocacy and education, with a focus on menstrual hygiene and human rights (WASH United, 2020).

account and reflecting their intended purpose, standardization may not result in destigmatization because it does not signal that products are in fact taken seriously by decision-makers.

Facilitating innovation

There was some hesitancy toward standards identified, often due to the risks described above, which could be mitigated by smart standardization. One aspect of smart standardization that was identified is the ability to facilitate innovation by clarifying safety requirements and enabling greater focus on creating good products. Solgun Drevik, former product developer at SCA, argued that,

> "I don't like standards because then I get painted into a corner, but if it creates more of a framework, it could be good. If there's a standard that keeps you in the 70s, then that would be detrimental because then it could become inflexible and slow down innovation. You have to do it in a smart way."

Michael Moscherosch held the same reservations but agreed with Drevik, arguing that standards which guide new manufacturers in the field on how to make safe and efficient products could stimulate entrepreneurship and facilitate innovation, but only if those standards are created in a smart way. Moscherosch stated that,

> "If you have a standard that says, 'in order to make a good napkin this is what you have to do, etc.,' it will encourage entrepreneurship and smaller operators to do more. Then, the more napkins are being produced, the more women have access to napkins, that's a good thing. Standards don't necessarily encourage innovation, keep that in mind. Because the standards are always written for existing products. […] The standard has to be very smart, so it doesn't limit innovation."

I engaged in multiple discussions with entrepreneurs including Lisa Perby, Nova Hoffman, Daniella Peri and Louise Berg as well as SIS regarding this issue. According to them as well as previous literature, providing safety guidelines through standardization and thus preventing each new innovator from having to figure out how to measure the safety of new products, which often takes large amounts of time and money, could reduce the time to market. As Helene Edmark states,

> "The main point where SIS wants to contribute to innovation through standardization is to shorten the time to market and influence the requirements and measurement methods that should be in place, if that is important."

Furthermore, as Moscherosch stated,

> "[…] Standards are great, standards can be very helpful, standards should make sense so that standards don't start preventing innovation or access. But the issue with standards, especially if you go into the developing world, you can't enforce them."

In other words, standardization is only desirable if done in a way that is beneficial to all stakeholders and one way to do so is by creating standards that do not stifle but rather facilitate innovation in the field. If standards were to stifle innovation, this would instead likely have stigma reinforcing effects, since users would be bound to using the same types of products that might not cater to their potentially evolving needs. Hence, by ensuring that the field has potential to continuously adapt products to consumers' needs and lifestyles, they are likely to make menstruation more comfortable and increase consumers' confidence, thus destigmatizing menstruation and menstrual products.

Setting compliance and enforcement protocols

Another aspect of smart standardization that respondents emphasize is addressing the need to ensure that standards are adopted and followed, which is not always easy. From a global perspective, standards can be difficult to enforce in the case of rural or other SMEs in the developing world due to limited resources and access to testing organizations and labs. This is a reason why standardization needs to be done in a way that accommodates all types of manufacturers. Further, it seems as though some respondents tend to forget that following standards is voluntary, unless countries decide to include them in legislation. According to Michael Moscherosch,

> "The other thing about standards is how enforceable are they? How enforceable is the standard? And one of the issues that I have is, I've seen standards that pertain to, for instance, bioburden – interesting topic – and absolutely the bioburden on a sanitary napkin or on a tampon needs to be low, they can't be sterile because it doesn't make any sense, but the bioburden has to be low. That means the materials have to be clean, the operations have to be clean, etc. But if you look at the test methodology that is required to determine bioburden, there is a lot of small operators that would not be able to do this. So, I know, for example, a very small organization in rural Uganda who makes reusable sanitary pads, and I can guarantee you that they don't do bioburden; they can't do bioburden. They are so far removed from everything that they have no way of doing it. Now, the question

> is if you now enforce the standard and say you have to do bioburden, you essentially take them out of business. Is that good or is that bad? I don't know?"

Unsatisfactory compliance and enforcement protocols can have adverse effects on manufacturers as well as consumers. For example, tampons are continuously becoming more absorbent and without effective communication to consumers, this might cause them harm. Anna-Lisa Persson argued that,

> "It is dangerous for tampons to be too absorbent, as it can dry out the mucous membranes, which in turn can lead to complications. This is not something that we talk about. But it is included in the latest Råd & Rön test, where tampons that absorb more than they claim to on the package have received lower marks and those that absorb less than they state are not marked higher or lower for it because it does not cause health problems. But from a consumer perspective, it is common to think that the higher the absorption, the better."

It is problematic when tampons become too absorbent than what they are labeled and thus in relation to what consumers need and expect from them. Christina Lloyd also argued that,

> "What has happened is that the absorption capacity has increased, which in itself can increase the risk for certain women to be exposed to infections because they dry out the vagina, which in turn can cause harm and increase that risk."

In summary, the importance of ensuring appropriate compliance and enforcement protocols in order to ensure that standards are followed as intended is an imperative aspect of smart standardization. This is important because if standards are not followed as intended, much work and resources devoted to standardization, which is often complex and expensive, are wasted.

Simultaneously, there may be an even higher risk implied if companies communicate that they follow a certain standard even though their products do not live up to it. This is because consumers are likely to trust in a company and its product safety if they are certified according to a standard, causing an imbalance between the perceived and actual legitimacy of the company. Furthermore, if this is exposed, the standard is likely to suffer a blow to its legitimacy and other companies following it, which might stigmatize the industry further. Moreover, if standards are not followed as intended, they will not have

the intended effect, not least a destigmatizing one. Hence, in order for standards to contribute to destigmatization, they need to be followed as intended.

5.3.3. Getting the right actors on board

One of the most important prerequisites for standardization to occur in the first place is getting the right actors on board. This is likely to contribute to destigmatization, not least by enabling standardization, but also because it signals that all the relevant stakeholders in the field take the matter of menstrual products, their users, and their users' safety seriously. The right actors generally consist of the dominant players in the field who are usually the same as those who can and will finance the process. Hence, the most important actors to get onboard are the large, powerful manufacturers with resources. This is mainly because, from an ISO and SIS perspective, standardization is first and foremost for the benefit of industry and if the largest actors in the industry are not represented in the process, it is not regarded as important or beneficial enough for them to engage. Thus, the process likely will not proceed.

In the case of the menstrual product field in Sweden and from SIS's perspective, the most important actor is Essity, being the largest Swedish player on the market and sixth largest in the field, globally (Euromonitor International, 2020). Early on in the process, SIS's perspective was distinct, in the sense that their understanding of what was important to standardize was directly aligned with the large industry representatives. Helene Edmark at SIS stated that,

> "If Essity are not interested at all whatsoever, then it is not important to standardize because they hold such a large part of the market share and are such an important actor so, if we are to drive the standardization from a Swedish perspective, then the most important actors also have to think it is important. Otherwise, it is not important. We are not a mutual admiration society that develops standards because we think they are important; we have to be driven by a need. And Essity, the largest actor, expressed an interest in the end of 2017…"

Further, it is also important to engage a heterogeneous group of participants in the process, in order to ensure that all different stakeholder interests are represented. Otherwise, the standard risks being skewed disproportionately toward industry interests without sufficient concern toward, for instance,

consumers. Cecilia Beskow, Director of Standardization at SIS at the time, stated that,

> "To get any kind of traction and ability to raise it on an international level, it has to be very well anchored both in industry and in regulative agencies, because starting a new standardization initiative with only the industry represented is not good because then we'll only get an absorption standard or something that suits them. So, it's important to get a breadth of stakeholders, so that it is done properly, not least the consumer side."

In other words, there is a risk implied if there is narrow representation from the field. Another risk implied when large corporations do engage in a project, is that although there are other stakeholders involved, larger actors might want to allocate more people around the standardization discussion table and hold greater influence over the outcome. Because the initiative to standardize menstrual products in this case came from myself, with a concern for consumer safety, and other actors with similar concerns showed commitment early on, less focus was placed on such risks in this particular process. Nonetheless, it is noteworthy that the Director of Standardization emphasizes the importance of considering consumer interests in relation to industry interests, a standpoint that was not expressed to the same extent by her colleagues at the beginning of the process.

Discussions about standardizing menstrual products had started in the end of 2016, and it was about a year later that Essity responded by stating that they had an interest in the area. Thereafter, they expressed little to no engagement in the matter; it was not until the end of 2019 that they sat down at a table to discuss the matter with other actors. As a consequence of Essity's lukewarm interest, the discussion at SIS has over these years continuously gone back and forth between being very industry focused and being focused on finding solutions to carry out the project without Essity on board. This continued work is most likely due to the strong engagement from other actors in the field, pushing for standardization. Simultaneously, it seems as though this engagement created a less rigid understanding of what was important to standardize from a SIS perspective. This became clear when they decided that the process should persist regardless of whether SIS would come on board or not. Edmark stated that,

> "We will keep going to meetings [with Essity] and make sure we have the important actors with us, and then whether we have everyone with us or not will not matter, because we will go through with it regardless."

When we were finally able to get Essity to a stakeholder meeting at SIS, they were joined by the European industry organization, EDANA. Together, they announced at the meeting that they were creating a standard for testing of chemical residue among their member organizations. Simultaneously, they argued throughout the meeting that they saw no need for standardization. When confronted about the apparent contradiction, they had no response. As a result, SIS decided to proceed with the standardization by appealing to the consumer protection perspective and ISO's consumer branch COPOLCO (Consumer Policy Committee of the ISO).

The way SIS approaches standardization, namely by collecting all relevant stakeholders and attempting to reach consent among them is a very difficult way to standardize. An alternative way, which seems to be more common in, for instance, the United States, is by drafting a standard among those actors already on board and then presenting it to the remaining relevant stakeholders for review. Moscherosch argued that,

> "Should the manufacturers, and I'm not only talking about the large scale but also the small-scale manufacturers, review that standard? Absolutely, they should give their input, but start with something, throw it out, and let people comment. That's much easier for everybody than if you say 'Oh, we're going to collect all those people together and then we all together develop a standard.' That's not going to happen. You can spend a career on this and not get anywhere. But it's much easier to develop a draft standard and see what others think."

Furthermore, had there been greater pressure from consumers, regular SIS standardization may have been possible. This could have been triggered if, for instance, the Chemicals Agency's report was to show that the safety of menstrual products was poor. In other words, in order to get the right actors on board, problems need to be large enough to rally consumers and/or the media. Edmark stated that,

> "Pressure from consumers is not strong enough; we're not there yet. If the Consumer Agency or the Swedish Consumers' Association were to see that pressure, that would be proof that this is needed, which would speed up the

> standardization. If mass media were to discover that the quality isn't what it should be, Essity would be on board instantly."

In the incontinence area, Essity had found that there were problems with the tests that were the industry standards, hence, not developed in accordance with international standardization protocol through participatory processes. Ellen Riise, Senior Environmental Specialist, however, did not find that there were any problems with the testing in the menstrual product industry, and thus did not see the same need for standardization of menstrual product testing methods. Helene Edmark, who had spoken to Riise about the matter, explained that,

> "I understand it all, but in the incontinence area we've had problems with the tests because they have been inadequate, the tests that the market have had as a common standard, that is. That's why they wanted to participate and affect that area, but they didn't think menstrual products had the same problem."

In summary, in order for standardization processes toward destigmatization to gain traction, critical actors that dominate the market and the existing discourse in the field need to be on board. Without their support, standardization organizations and other participating actors are taking the risk that the standard might not be adopted once established, making the work and money they spent on it redundant. One way around this potential barrier, however, is gaining the support of consumers through, for instance, consumer organizations or the media, which could lead to large manufacturers engaging for fear of tarnishing their reputation. Moreover, it is clear that a barrier standing in the way of actors participating in standardization, is that they have not understood the goals of the standardization among those already engaged. This will be discussed in the subsequent section.

5.3.4. Understanding and aligning goals

Another important prerequisite for standardization is for stakeholders to understand the fundamental goals of the standard, and to subsequently align goals among actors that choose to participate. It has namely become clear during the research process that several actors are reluctant to participate in standardization, simply because they do not understand what is implied by standardization itself, what it is that will be standardized, what it will cost them, what the results will

imply for their business, potential benefits and risks of standardizing and so on. Entrepreneur Daniella Peri stated that,

> "Standards are a bit scary since we don't know what they would entail, but I would definitely like to join."

A number of different approaches to the notion that a standard's implications cannot be known before it is completed. Peri clearly has a positive outlook where she expresses a will to participate in order to be able to affect the output of the standard. Essity, on the other hand, took a more conservative approach where they ended up not participating at all due to the apparent uncertainty for the company. An aspect mentioned as a reason for reluctance to participate in standardization was the scope of the standard. They argued that the larger the scope, the more they would be affecting other companies' business, which they are afraid might lead to being accused of building cartels. This is an indication that the particular respondent in question did not, indeed, understand what it is that standardization implies in this case, which is surprising, since Essity engage in standardization at SIS in other areas.

Ellen Riise, Senior Environmental Specialist, for example, has been active in the standardization of incontinence products at SIS and is thus well aware of the numerous benefits of goal alignment and standard setting. In other areas, however, they work with standard setting on a company level toward their suppliers, instead of on a field level. These standards are thus limited to affecting Essity's suppliers in transactions with Essity and Essity's consumers, but they cannot be accessed and cannot benefit anyone outside of that supply chain. Suppliers are often large, and have many customers, which means that their bargaining power can be sizeable, especially in relation to smaller customers. Riise stated that,

> "Sometimes it's a grateful position to be in that we are a large company, but so are our suppliers and then you need to have a relationship in order to get things moving. It works. That's how it is. You do good things together if you have the same goals in many aspects. In the standard, there are quality requirements, requirements connected to subsequent product safety assessments, of course, environmental requirements, but social aspects are also a part."

Since there is a standard on medical devices that they apply on their incontinence products as well as their menstrual products, Essity do not see a need for standardization in menstrual products. From Essity's perspective, as long as they do the right thing within the boundaries of their company, they have no reason to affect the rest of the field.

Essity have been meticulous with their product safety for decades and thus have full control over their supply chain. They have developed rigorous testing standards within their company that apply to both raw materials and finished products. Ellen Riise stated that,

> "SCA (now Essity) started in 1929, and what you can see is that as early as in the 70s we started working with product safety and for our products; these are products that become moist in one way or another and are worn against the skin for many, many hours, and so of course, it's something super important that has been worked with for a really long time."

They further place great emphasis on their relationships with suppliers who must sign agreements to follow Essity's standards, but again, the knowledge of the details of such agreements including the contents of the final products remains between the parties involved, without disclosure to consumers or other manufacturers. Susanne Lindblad also stresses that they take their routines in the event of customer complaints very seriously, stating that they reassess product safety to follow up on any issues expressed by users. Lindblad stated that,

> "We look at every input material and assess their safety. This includes finished products and post market surveillance to follow up on reclamations, which we call 'complaints,' where we have a rigorous system in place to follow up on the product safety assessment. And then we have close collaborations with our suppliers of raw materials. They all have to sign our standards agreements, which include that they have to conduct toxicology tests, where we ask for all possible information about the materials used."

There is no doubt that Essity is concerned about product safety. Yet, they were reluctant to participate in standardization that might affect the entire field in a market setting where there is an apparent fragmentation regarding safety standards and consequential uncertainty in determining what the requirements are to produce a safe menstrual product.

Michael Moscherosch at Johnson & Johnson took the same position. He argued that as long as they are certain about the processes that they have in place in order to ensure product safety, there is no need for them to make any additional efforts. His argument was that if manufacturers do not take product safety seriously, they are likely to be reprimanded for it, which will kill their business and as such, manufacturers are unlikely to place unsafe products on the market. Moscherosch stated that,

> "I can put something on the package saying here's our internal requirements that we follow, I can tell consumers that, but do we need to have a standard that is also applicable for other people? It's not a requirement for me to do business. What's important for me to do business is that I know that my products are safe, perform, etc. I don't need a standard for that, and I don't need anybody telling me what the standard is for that because I know what my standard is for that. Everybody has a standard. I would hope so. There are probably some people who slapped them together and hoped for the best but that's not how you normally would operate."

On the other hand, Essity are engaging in standardization to increase product safety in the field through developing an industry standard with other manufacturers and EDANA. Hence, they are contradicting their own statements. This could imply that Essity do in fact see a need for standardization and affecting other companies is not the issue but maintaining as much control as possible over the process is of greatest concern. This takes the form of engaging in organizational and industry standardization initiatives as opposed to field level initiatives, such as those organized by standardization organizations. Through organizational and industry level standardization, they can limit the number and heterogeneity of stakeholders involved in standardization, which, in accordance with Cecilia Beskow's statement on the matter, risks skewing the standard toward large manufacturers' interests, limiting consumers' and entrepreneurial interests' reflection in the standard. Moreover, Essity discuss the matter of scope, likely because the more they can limit the scope of the standard, they can control what comes out and limit the impact it has on their company. The scope of the standard they are developing with EDANA, namely only covers testing methods for chemical residue, which is much narrower than the matters a SIS standard would cover. Susanne Lindblad, Global Regulatory Affairs/Product Safety Director at Essity, argued that,

> "When it comes to product safety, I don't see it as a need because there is a standard on medical devices. A menstrual product should feel safe in a way that it shouldn't leak. So, you have to specify so that you know what the standard should be and that is what makes it difficult for us to understand when you talk about standardization and what it would imply. We have had a difficult time understanding the scope. It is difficult for a company to go in and steer a market, you could overstep and be accused of cartel building or be challenged by the marketing law, so it's difficult. I can understand your thinking [in increasing general product safety in the field by standardizing], but I can't talk badly about other companies. I can talk about and affect how we work but to affect others, the only alternative is through standards and then you can look at that. But from my perspective, you look at lab methods as one part and at chemical residues as another part…"

Clearly, it is important that the stakeholders that might participate in standardization understand the potential benefits thereof and also that consideration will be paid in order to ensure that any risks they take when doing so will be mitigated. While standards are an efficient way to ensure generally higher product safety, you have to ensure that you do not set a standard that has unwanted effects such as benefitting whatever product that contains the largest amount of raw material or such. Standards also need to avoid infringing all too much on companies' freedom to develop products for their intended markets, whose consumers' needs and ability to pay can vary. Michael Moscherosch argued that,

> "There's two sides to this topic; one is standardization, meaning maintaining set requirements for performance, safety, etc. and I think that's a really good thing and ideally, if you have something like that, that's globally applicable, that's even better. […] Now, the interesting thing with standardization is, it's not necessarily the standardization, it's the regulation of the standardization that becomes interesting. If I demand, for example, very high standards, then let's say for example, I'm making this up, if I demand a very high absorbency, then I have to put a lot of absorbent materials in there. The more material I use, the more expensive the product becomes. Suddenly, you run into the area where people who really would need the product, and who the standard is made for, because you want to make sure they get good products, suddenly they can't afford the products anymore."

A first step in ensuring that actors do understand the aims of the standardization can be to visit the most important actors and ensure, through personal contact, that they understand what the project entails and what is required of them if they are to participate. Helene Edmark at SIS stated that,

> "Standardization works best if you visit the most important actors at their offices before you hold a stakeholder meeting. So, you know that you can start and then you can clarify the questions to address, test methods, limit values and what is interesting for them. So, you have the decision-makers with you from the start. Then you have a starting-up meeting, instead of an information meeting, which is what you normally need to hold, and then we hopefully know that we can start because we have the most important actors on board."

In the case of menstrual product standardization, we were never able to arrange such a meeting because Essity were not interested in doing so. Hence, on the one hand, Essity argued that they were uncertain about what the standardization would entail and were reluctant to participate for that reason. On the other hand, they were not interested in meeting to discuss what the standard indeed would entail or what it could entail and that they very much had the ability to be involved in determining what it would entail. I would argue that if there would have been an opportunity to discuss the aims of the standardization and create a mutual understanding thereof between Essity, SIS and myself, there might have been greater potential for the standardization process to go further.

5.3.5. Increasing transparency regarding product safety

As previously mentioned, when there are uncertainties about the safety of products, this can be a source of further stigmatization of menstrual products; hence, standardizing about product safety can be regarded an aspect that aids in the destigmatization of menstrual products. On the matter of menstrual product safety, there has traditionally been information asymmetry through a lack of transparency between manufacturers and consumers. This is found to be addressed in a number of ways. Firstly, one means is to develop product safety standards, which will be addressed in a forthcoming section.

Another way is to conduct third-party testing, where results are subsequently publicly reported. This was done by the Swedish Chemicals Agency among others, including the French agency ANSES. The Swedish Chemicals Agency found it

extraordinarily imperative to report results as transparently as possible in this project, due to firstly the size of the user group and the risks implied by arousing undue suspicion on products. There was a lot of media attention paid to the project as it was announced by the government, which caused the agency to take greater precaution regarding the information they released in their report and how it was to be formulated so as to prevent excessively negative reactions from the public. Project leader for the investigation of chemicals in menstrual products at the Chemicals Agency, Amanda Rosen, stated that,

> "Just because it is such a common product that everyone who menstruates uses, it also becomes extra delicate when you are to present the results. So, we have thought a lot about how to present the results and what words to use. For example, it is not always that we present data as transparently as possible, normally we don't do that. In this case, we thought it was probably best to go out with as much as possible at once because it will anyway be requested later on, rather than giving some information to one journalist and some to another. In this way, we had more control over how the study was presented. So, that was special…And we think that we can calm people down and that we have reason to say that there is no great risk [of using menstrual products] and that there are other things to focus on instead."

On the one hand, the Chemicals Agency indicated that the risks involved in using menstrual products on the Swedish market, currently, are slim. On the other hand, they also pointed out the importance of increasing the knowledge about this product group including how they affect people and the environment. There is a risk that the results worry people to an unproportionate degree than they think reflects their risk judgement. If people think that the products they use are unsafe, there is a risk that products become further stigmatized than they already are. Therefore, the Chemicals Agency sees it as important that they do not trigger alarmist reactions. On the other hand, by talking about the results as though there is nothing to worry about, they can also be considered to be downplaying the results, since there were, in fact, 21 chemicals that might be dangerous, of which they know very little. Anna-Lisa Persson at the Consumers' Association agreed with this notion and stated that,

> "So, it is important to remember, when talking about menstrual products that we do not rattle people up by saying that there are lots of dangerous chemicals in them, because they are not very dangerous. So, we do not want to scare people

> from not using menstrual products and staying at home in bed when menstruating. From a societal perspective, that's not a very good idea."

When the results of the report were published, there was much less attention from the media than when the project was initiated. This could signify that the notion that products could contain hazardous chemicals was much more worrying. Another reason why it gained much attention initially was because of the gender equality perspective, where media discussed whether it was because of the products being directed toward women and girls that they had been neglected. Once the Chemicals Agency investigated the matter and concluded as well as communicated to the public that there was no need to worry, the matter was again destigmatized, as people trusted in their expertise and knowledge. Rosen stated that,

> "the report didn't gain a lot of attention; you could say the attention was greater before we started working than what it was when we actually published the report. But the initial attention related to it being a product that is primarily directed toward women and there was an equality motive about it being a product that women use, why hasn't it been better examined? Whether that's the reason why there hasn't been more care to find out if there are any risks. And then, of course, because they are used so intimately with the body and on the inner mucous membranes, of course, the mere thought of them containing hazardous substances makes you worried."

Furthermore, when the safety of menstrual products is discussed, it is often in terms of Toxic Shock Syndrome (TSS), a condition commonly referred to as 'the tampon disease' in Swedish. Health experts such as gynecologists maintain that when misusing menstrual products such as tampons, the lack of communication about the risks implied can put users in danger of losing a body part or even dying. Gynecologist, Christina Lloyd emphasized that the stigma on menstrual products prohibits people from talking openly about them, as well as associated risks, which causes ignorance, further amplifying the risks. Lloyd stated that,

> "Another aspect is that people might not understand the hygiene aspect fully, so that's where menstrual products come in; if you do not know the foundations of hygiene, you're exposed to a lot of risks, such as if you forget an inserted tampon. There are syndromes such as TSS which is a large risk. So, if you do not want to

> talk about something and there is a high level of ignorance, then risks are also higher."

On the other hand, while TSS indeed is a dangerous disease if contracted, the risks are much lower today than they were before, due to changed production processes. But this is not something that is emphasized or communicated efficiently. People often think the risks of TSS are just as high now as they were in the 80s, which may lead to further stigmatization of menstrual products. Anna-Lisa Persson stated that,

> "When people start to worry, they often bring up TSS and refer to things that were much more relevant in the 80s and that's a pretty long time ago. So, it's good to know that tampons have changed, not just because there are developments in the tampon industry but also because there are developments in the pulp industry. The fact that we call it 'the tampon disease' is a reference that the tampons of the 80s were much worse than those sold today."

There was a spike in TSS in the 1980s due to the process of bleaching the rayon in tampons using chlorine. Today, companies normally use oxygen instead of chlorine in the textile bleaching process, but this is not something that is commonly known. The very notion that the slang for this disease is connected to tampons can be seen as alarmistic because the majority of those who suffer from TSS, today, are not using a tampon (Friedmann & Hint, 2019). Persson continued by explaining that,

> "There is an Austrian company that produces rayon for more than 70 percent of tampons globally. Generally, in Austria they have good laws and regulations, and that product should be very clean from them; it is highly monitored and controlled in all stages of the production process. So, the rayon that comes from that company is a very clean and fine rayon, which is good because in the beginning of the 1980s, the bleaching of rayon was very problematic and contributed to much higher numbers of TSS cases."

Further, women and other menstruators experience so many issues with menstruation during their menstrual cycle, and one way to try to minimize those is by being transparent about the contents of menstrual products. The information asymmetry among established manufacturers and their consumers was one of the reasons why Peri and Hoffman decided to start their company,

Yoppie. They created a brand with the principle that all products offered would be organic, carefully sourced, and importantly transparent regarding the list of ingredients, which is rarely disclosed in other cases.

To summarize, the way in which the safety of menstrual products is communicated has a bearing on how the public perceives menstrual products, which affects their stigmatization regarding safety aspects. The greater the transparency about risks, the greater the destigmatization with regard to the aspect of the menstrual product stigma that is associated with product safety, in particular TSS. Furthermore, the ways in which product safety is communicated, today, varies in the sense that agencies are careful not to alarm the public. However, the communication around TSS can be regarded alarmistic in the sense that every tampon package must warn about the risks, where the risk of dying is emphasized disproportionately to the number of cases of TSS today.

Looking at the statistics regarding the frequency of TSS contraction in relation to tampon use, it can be argued that the risk is slim, especially since manufacturers changed the composition of substances and materials after the TSS outbreak in the 1970s and 1980s (Cowart, 2016). Standardizing can increase transparency about the safety of menstrual products, the comfort of knowing that the products one uses are safe will likely increase, which further increases the confidence of the user. Increased confidence in association with menstruation and menstrual products, as previously mentioned, aids in destigmatization thereof.

5.4. Concluding remarks on reclassifying

On the individual level, reclassifying menstrual products through education contributes to driving the destigmatization process forward. The main factors that contribute to destigmatizing education about menstrual products are: breaking the culture of silence by talking about menstrual products, including everyone in the conversation, busting the myths surrounding them, and replacing those myths with 'real' information that reflects the actual experiences of menstruating.

On the organizational level, changing the logics on the menstrual product market is contributing to the reclassification of menstrual products. This consists primarily of shifting consumer demand as a consequence of informed choice.

Informed choice can in turn be connected to education on the individual level. So, the more conversations we are having about menstrual products and menstruation, and the more consumers know about their bodies, the greater their ability to identify and express needs and wants related to menstrual products, which has not been the case before.

Standardization is frequently indicated as a factor that could drive destigmatization on the institutional level. First and foremost, it can be an enabler for increased innovation and entrepreneurship initiatives by shortening the time to market, but also as it would signal that the matter is taken seriously by decision makers. Standardization signifies one way in which menstrual products could be reclassified on an institutional level. Such reclassification would entail greater actual safety as well as signaling values of concern for public health and in extension possibly even gender equality. Evidence of standardization succeeding in driving destigmatization has yet to be established conclusively, but my findings indicate a number of efforts in that direction.

In order to standardize menstrual products, there are a number of aspects that need to be taken into account, however. Firstly, a facilitating factor would be the existence or establishment of supporting legislation, which could be done, for instance, by classifying menstrual products as a category that is more specific than consumer products. This would enable more rigorous testing and monitoring of the product group. It would also be an additional indication from decision-makers on a political level that the products and their users and users' safety are taken seriously, which contributes to destigmatization by breaking the cycle of neglect.

Secondly, standardization would need to be 'smart' in order to avoid negative side effects of standardizing such as hindering innovation due to applying frames of reference that pertain to products currently on the market. It also needs to have compliance and enforcement protocols in place in order for followers of the standard to deem it efficient. Thirdly, getting the right actors on board is a fundamental prerequisite for standardization to take place in a participatory manner. Without the largest, most significant, actors, standardization will not go forward in regular terms. In such cases, alternative ways of standardizing, such as with consumer protection as the main driver, are found. Third, in order to get the right actors on board, it is imperative to create a mutual understanding of the interests and goals of the standardization. Fourth, and finally, standardizing can aid in reducing the information asymmetry between consumers and

manufacturers, which contributes to consumers feeling safer and more comfortable about their choices, being able to compare products more efficiently. Increased comfort and choice help in destigmatizing.

Furthermore, these factors could in turn contribute to, not only standardization, but also destigmatization. This is because together, they would ensure that the potential standards that do unfold are of high quality, take all relevant stakeholder opinions into account and do in fact further the field in a beneficial direction for all involved, including consumers. If the resulting standards instead would be of low quality, would not be followed, would not include all relevant perspectives and would stifle innovation, it is unlikely that they would signal that menstrual products are in fact taken seriously and would most likely not contribute to destigmatization.

6. Framing Menstrual Products as Positive

Findings show that organizations often tend to frame matters concerning menstruation and menstrual products in line with social movements or other concepts generally accepted as positive. Such a 'positive' association can mean being important, interesting, or good in some other way, such as innovation in order to normalize and, in effect, destigmatize menstrual products. In other words, framing menstrual products as positive contributes to driving their destigmatization.

By employing such frames onto menstruation and menstrual products, the matter is opened up and associated with that which is not stigmatized, and rather seen as something attractive or normal. In this case, menstruation and menstrual products are often associated with feminism and women's right to safe products as well as sustainability and discussing the products in terms of what is an environmental, economic, and socially viable alternative. These considerations occur on all three levels of society, and there is evidence that framing menstrual concerns within the three pillars of sustainability enables new outlooks on menstrual products, which are less concerned with stigma and shaming and more so about doing better now, for, and in, the future.

The sustainability movement is also known as the environmental movement but, as respondents frequently refer to sustainability as a concept and because vernacular discourse has substantially increased regarding sustainability, I employ the term sustainability movement. Hence, I have chosen to use sustainability as an *in vivo* code to refer to the movement that includes consumers adjusting their lifestyles and companies developing business models to increasingly act in ways that minimize the resources they use. Aside from environmental quality, the concept of sustainability and sustainable development also includes concern for social equity and economic prosperity (Clune & Zehnder, 2018).

The holistic approach of sustainability has been found to reflect a growing trend in the menstrual product field where attention is increasingly being paid toward all three pillars. Not least the social pillar, which can be seen as represented by social and gender equality and thus driven by, for instance, the feminist movement, which is increasingly permeating through society, especially in Sweden. This includes manufacturers taking initiatives toward destigmatizing menstruation and menstrual products as part of their social engagement, which, incidentally, is likely profitable in terms of product sales as well. The economic aspect is progressively being addressed in terms of consumers' right to priceworthy products that suit their willingness and ability to pay whether they buy reusable or disposable products. This shift from profit-focus toward more holistic business models is also congruent with the changing view on menstrual products as consumer commodities toward public health goods. In summary, the frame of sustainability is opening up for a new take on menstrual products, not least in the form of product innovations and innovative business models that pertain to different pillars of sustainability but more often than not, all three.

6.1. Framing on the individual level: Growing demand for better solutions

Demand for solutions that are better for the environment, for the body, more user friendly and more affordable is currently being expressed, where it has not before. An argument used to demand better products is wanting products that are more sustainable. For example, respondents often argue that the growing use of menstrual cups is largely due to the sustainability movement, which has contributed to more and more products, services, and behaviors being scrutinized in terms of their environmental, social and economic footprints. Lisa Perby at MonthlyCup argues that because of people's increasing concern with engaging in more sustainable consumption patterns, individuals are also more willing to try new, more sustainable alternatives than the conventional products. Perby stated that,

> "Looking at today's political debate, there is a lot surrounding the environment, which did not exist to the same extent when I started using the menstrual cup in 2010."

The menstrual cup in and of itself has destigmatizing effects, since its use counteracts the stigma that is associated with engaging with one's menstrual blood on the level of what is required when using a menstrual cup, and thus contributes to the destigmatization of menstruation and menstrual products. This point is argued by respondents such as Perby and Solgun Drevik and is further discussed in the section on the social risk of trying new products under innovation and entrepreneurship.

While sustainability is becoming a growing concern among consumers, it is clear that environmental concern is still secondary to the physical and social aspects of menstrual products, such that physical comfort and user friendliness as well as the security of knowing one's product will not leak and cause social discomfort. Furthermore, growing demand for better solutions is closely linked to other factors identified as driving destigmatization, such as informed choice and shifting consumer demand as well as growing menstrual literacy. An increasingly enlightened consumer is likely to learn about solutions that might suit them better, as well as triggering them to reflect on their needs and wants from a menstrual product. This includes economic, environmental as well as aspects concerning their own safety and comfort.

Nevertheless, as previously discussed, by considering menstrual products in terms of sustainability, there is increased potential for normalization, not least because discussing any products or services in terms of their sustainability has become increasingly common. By employing sustainability as a frame and source for innovation of menstrual products, the discussion around the products becomes associated with two concepts that are generally perceived as normal or important. In this way, innovation and, in particular, sustainable innovations, aid in destigmatization.

Manufacturers naturally source information about their potential customer base's needs and wants where sustainability is identified as a trend to be picked up on. Sofia Ekstedt at Essity stated that,

> "Sustainability is one example of one such large international trend that you can pick up through different channels. You can pick it up in interviews with consumers, but also from customers, so retailers, or just if you monitor what's being written online…"

In order to meet consumer demands for sustainable solutions, companies and entrepreneurs continuously work with trying to find new, more sustainable materials to construct either existing or new types of products. Senior Environmental Specialist at Essity, Ellen Riise, stated that,

> "To make the smallest possible environmental footprint with our products, we try to find ways to work with renewable materials, materials that can be disposed in existing recycling systems and such. So, that is very challenging, that's something we look at a lot."

Due to the positive connotations of sustainability, framing products as sustainable has profitable effects on sales, even though that may not be a company's primary selling point, initially. Lisa Perby, co-founder and CEO at MonthlyCup, for instance, started selling menstrual cups because she found them so practical and wanted to bring them outside the environmentally conscious, or "ultra-green" community, as Perby stated, which was much smaller in 2010 than it is today. Incidentally, with the rise of environmental consciousness, menstrual cups are increasingly sold on the basis of being more sustainable than other alternatives. Perby points out that it is one of the four key success factors of their business arguing that,

> "When I started using the menstrual cup in 2010, I thought it was an ultra-green product because I was forced by an ultra-green friend to try it. But if you look at the debate today, it's a lot about the environment."

Another way individuals are framing menstrual products to encourage them to be taken more seriously as a lucrative area, deserving of financing and innovation initiatives, is in accordance with feminism. For example, Michael Moscherosch argued that access to suitable menstrual products is imperative in working toward gender equality, and thus frames the menstrual product matter in terms of feminism. Moscherosch stated that,

> "If anybody talks about gender equality without addressing menstrual hygiene management, they essentially should shut up, because it's not going to happen. If a woman can't go to work, if a girl can't go to school, there is not gender equality."

Because of the stigma, the culture of silence around menstruation seems to have left the matter of access to menstrual products to the market alone rather than

actively striving toward it on an institutional level. This is currently shifting, where more and more countries and states across the world are providing free, tax-free or reduced taxed menstrual products (Eddy, 2019; UK Government, 2021; Woodyatt, 2021).

In summary, framing menstrual products as a matter of sustainability is encouraging people to think and talk about products from the perspective on how efficient they are in terms of resource use, and how they can be evaluated socially, economically, and environmentally. The more people talk about sustainability, the more normalized it is becoming and by normalizing sustainability, that which is discussed in terms of sustainability can also be normalized through association. In this way, framing menstrual products as positive matters such as sustainability contributes to destigmatization.

6.2. Framing on the organizational level: Innovation and entrepreneurship

On the organizational level, new product and service initiatives are framed in terms of the positively accepted concepts of innovation and entrepreneurship. Not limited to the context of the menstrual product field, innovation and entrepreneurship are two closely intertwined concepts. The reason why they are closely linked in this case, is because menstrual product entrepreneurs are all more or less working with innovation, whether it be innovation of new products, product improvements, or business models. Further, innovation and entrepreneurship can be seen as both a consequence of changing consumer demands, which are most often framed in terms of sustainability and feminism, as discussed in the previous section, but also as a contributor to destigmatization in and of themselves.

As in the case of standardization, strong substantiation of the destigmatizing effects of innovation and entrepreneurship has yet to be confirmed; nonetheless, as seen in this study, there are several indications toward their potential benefits. To date, there is, thus, evidence of a number of attempts at destigmatizing through the use of innovation and entrepreneurship. Based on this evidence, I

argue for ways in which innovation and entrepreneurship could further destigmatization, as well as aspects that could aid in such a development.

By introducing new products, improvements and business models, I argue that innovators and entrepreneurs have the opportunity to bring a different type of attention to menstrual products than traditionally. By releasing solutions that are innovative, user-friendly, sustainable, adaptive, funny, or sleek, the market can be increasingly segmented and different users' needs and preferences can be met. In this way, the market is developed into one that has a greater variety of products and with different functions and benefits, which has four primary destigmatizing effects.

Firstly, by framing menstrual product development as innovation and entrepreneurship, the menstrual product market is seen as more attractive, and thus less stigmatized, by more actors including other innovators and investors. They might then see opportunities in the field and invest, which can lead to even better products and solutions.

Secondly, the more products and solutions that consumers have access to, the more empowered they might become. The reason being that if the supply of products on the market increases, there is more pressure on companies to 1) make better products to win consumers over, 2) increase the transparency regarding product safety, and 3) empowerment increases simply by giving consumers the benefit of a wider range of good products to meet their needs and preferences. Empowerment of the consumer further leads to increased confidence in relation to menstruation and menstrual products, which consequently leads to destigmatization.

Third, with greater access to a wider selection of products, there is hope that currently underserved segments of girls and women in rural settings of developing countries, but also vulnerable communities in developed countries, might gain access to more practical, safer, and more easily disposable menstrual products. With better ability to manage one's menstruation, studies show that the stigma diminishes (Bobel, 2010). Finally, in places where access is less of an issue, a wider variety of products might increase the conversation about menstruation and menstrual products as well as the menstrual cycle literacy among menstruating people, which further stimulates destigmatization.

Innovation by entrepreneurs and large companies alike seems to be occurring in similar ways, namely with a primary focus on framing in accordance with demand for sustainable solutions and other insights that they gain from consumers, either through their own observations or through market analysis. It is noteworthy that a number of insights and challenges identified in previous sections in this chapter have been recognized by innovators as opportunities for product development and innovation. Therefore, these will be repeated in order to describe how actors work with consumer driven innovation.

Another aspect that innovators have in common is the need for openness throughout the product development process. In other words, they must completely ignore the stigma on menstruation and menstrual products in order for the process to work. The main difference between innovation in large companies and among entrepreneurs, however, has to do with the barriers that these actors encounter. While product development is likely always costly, the resources are generally scarcer for entrepreneurs than established manufacturers; moreover, applying for external funding for innovation in a field with a product stigma poses certain challenges.

6.2.1. Overcoming financial barriers

As in many fields, entrepreneurs in the menstrual product field have ambitious ideas about how they will solve the problems of the world. It seems as though their conviction and pathos may be extraordinarily important, however, since there are a number of barriers involved in menstrual entrepreneurship that they need to overcome. Once those are indeed overcome, it is likely that financed initiatives, such as in the start-up sphere, signal to others that innovating and pursuing entrepreneurial initiatives in the menstrual product field is profitable, worthwhile and interesting. Also, that it is not only seen as a matter of importance by the entrepreneurs themselves but also financers who might generally invest in less stigmatized initiatives. In other words, one way in which overcoming financial barriers might aid in destigmatization could be by securing financing from investors who are usually associated with non-stigmatized ventures. This way, menstrual product initiatives might be associated with a normal product portfolio, or as one among many initiatives, rather than sticking out as something that should only exist in certain private spaces.

Louise Berg emphasized that one of the reasons that the time to market is taking longer than expected is because of the barriers posed by the social stigma in place. In every aspect of a menstrual entrepreneur's work, people involved need to take a personal stance on how they feel about menstruation and the stigma at their initial encounter with such business ideas. This implies that the entrepreneur needs to talk to and work with people who do not necessarily have the same views on the matter as them, at least at the outset. Instead, people's initial reactions are often in line with the stigma and automatically have a negative approach toward menstrual entrepreneurs and their ideas. Berg stated that,

> "I always have to work around the stigma."

My understanding is that overcoming such reactions implies breaking patterns of behavior that have been deeply engrained in people's minds since a very young age, which might imply a great deal of effort, especially related to one's personal values and moral standpoints. In other words, by applying for financing for their menstrual product business, menstrual entrepreneurs are provoking people who may not have been confronted by the matter earlier, to reflect on whether they want to appear socially conventional and refrain from investing, or whether they want to bring to the forefront, for instance, values of equality and allocate money for their initiative.

Doing the latter also implies that investors openly defend the business venture, and thus the value of investing in menstrual products. Allocating money to and arguing for the importance of menstrual products both strongly contradict the traditional neglect of stigmatized products, and thus is likely to contribute to destigmatization.

Respondents argued that as menstruation is becoming increasingly destigmatized, gaining financing is becoming easier, and people are increasingly agreeing to stand up and talk about the menstrual venture they are embarking on together with the entrepreneur. Louise Berg explained that,

> "It's so taboo. You don't think of it as so taboo, but you've learned that these are things you don't talk about. So, when I talk about menstruation or questions about the body and ask uncomfortable questions, you have to take a stance and then you say 'no!' and that has also had an effect, because in order to get financing and things

like that, people have to stand up and say what it is they do, and now it's becoming easier."

In summary, overcoming financial barriers implies that investors who likely hold some power in terms of financial resources signal that they support ventures to innovate menstrual products, thus assigning a notion of importance and positive attention to menstrual products, which have previously been neglected, in accordance with the stigma. Oftentimes, investors will need to speak openly about their investment, and thus aid in destigmatization by breaking the silence, and emphasizing the menstrual product field as a business opportunity rather than something to be hidden, silenced or deemed disgusting.

6.2.2. Being open

In projects geared at innovation and development of menstrual products, it is imperative that the social stigma is neglected among participants. This is because the stigma signifies a social barrier, hindering the ability to discuss the core of users' experiences. In order to develop products that accurately and successfully meet consumers' needs, it is, as previously discussed, vital to understand those needs. I argue that this likely contributes to destigmatization in at least two ways. Firstly, the more people who behave in a destigmatizing way, the greater the possibility that such behavior will spread to others who come into contact with those people and are able to have increasingly open and destigmatized conversations.

Secondly, if those who develop new products disregard the stigma when doing such work, it can be argued that the innovation output will have greater potential to meet the accurate needs of consumers. In the opposite case, if product developers maintain a mental and social distance from the experience of menstruating and using the products they are developing, then it seems less likely that those products will be as close to meeting the inherent needs of consumers. This is because if you cannot communicate openly about the intimate details of menstrual blood, how it runs and seeps, how thick it is, how clotty it may be, and how products might chafe, move around, be shaped by the buttocks or thighs when moving, what happens when exercising and sweating, and other aspects that are stigmatized in the development process, then those things will likely not be considered, and the end product will not be as well suited to consumers' versatile

needs. The better products satisfy consumers' needs, however, the more likely consumers are to be more comfortable and confident, which contributes to destigmatization.

Respondents argued that the fundamental principle is that you have to understand what happens when the menstrual liquid leaves the body, how it enters the pad, in what speed and how it moves. In order to learn about these things, it is imperative to become accustomed to all aspects of menstruation, including the smells – a desensitization process that can be compared to the one healthcare workers go through when they start employment in hospice. This is an interesting comparison because while engaging in so-called dirty work (Ashforth & Kreiner, 2014a), or stigmatized work, becomes normalized through the everyday, there is also a form of separation between viewing care-taking of a patient as something personal, rather than as doing a job. As soon as it becomes personal, it seems as though there are socially constructed ideas about what is deemed gross or awkward, but by objectifying the work or the menstruation it can become normalized in the context of work rather than body liquids. Drevik described that,

> "Something that was really important to work with was the way the flows acted and what the liquid was like. […] In some way, it's like a process of learning, just like when you work in elderly care, you have to learn to deal with those smells. If you come in as a visitor, you feel kind of like 'how can you work with this?' 'Well, you get used to it,' and I think it's the same thing with this. You just get used to it because it's our job – to develop the best solutions for this liquid. So, we see it as more than a liquid, and then it becomes just like in healthcare, where you maybe don't see the patient as Adam or something, but rather a patient who needs help, and that's your job. So, I think you have to learn to distance yourself from it, rather than make it personal."

An important part of understanding users' experiences and needs is trying to put oneself in their shoes by trying the products oneself. In development processes, a constructive way to understand the users' experiences of products is for developers to test them themselves throughout the process. According to Solgun Drevik, former product developer at SCA (now Essity), after trying out new products, the team members would thoroughly describe their experiences, which were considered the fundament on which they then built their development efforts. New team members might be taken aback by this type of open atmosphere at first,

but they quickly get used to it, because it is too inefficient to talk around matters just because it is stigmatized and unfamiliar. Drevik stated that,

> "A relaxed jargon is a prerequisite and a must to be able to develop together. Just in our own teams that we worked in, we would test and come in and tell each other exactly how it felt – so, you have to be able to describe very descriptively to each other what experiences you had of the product. Everything builds on that in order to know how to go forward. So, you need high ceilings and definitely understanding. That's how it is at these types of work places, I'd say. Then, if you come in as a new member, you might think 'wow, wow, wow,' but then you quickly become seasoned I guess you could say. So, that's just a phase, I'm entirely convinced."

This is much unlike the process that Berg explained where new people introduced to the business concept became defensive. Instead, members of the development team might be hesitant at first but quickly catch on to the relaxed jargon. Having applied to a project at Essity, however, these people are aware, beforehand, of the type of products they will be working with, which is not necessarily the case with those entrepreneurs with an interest of starting a collaboration or gaining financing for a menstrual product initiative.

While potentially controversial in the 1980s, when Drevik was working at SCA, the social openness is practiced until this day in most departments that concern products such as diapers, incontinence- or menstrual products. Susanne Lindblad, who currently works in regulatory affairs at Essity, argued that,

> "We who work here are very open. As a newly hired employee, you probably react to it, but you get used to it quickly. We work with incontinence products too, where we are very open as well."

Furthermore, because understanding the users' experience was vital for everyone in the development team, they would make the same products but shaped for the male developers to try them as well. Drevik described how the men would often come back and question whether women could really walk around with these products because it was so uncomfortable to wear inside their underwear. This way, they were able to identify what exactly it was that they found uncomfortable and find better solutions. Perhaps, including men and this type of exercise in the development process was especially fruitful because women are likely more used

to the general discomfort of having to wear some sort of menstrual product, and someone who is not accustomed in the same way might gain a deeper drive due to their newfound understanding of what menstruating people go through. This can be seen as a telling way to distinguish a superior developer from an inferior one. Drevik described how,

> "The men in this industry have the same silly humor, so we've had some silly workshops, you can say. Yes, we would send out the men with especially made versions, so they could feel and squeeze too. And it was a bit funny to hear their comments, 'Ah! can you really walk around with these?' 'Yes, but now you have to really think about how it feels' and the 'Yes, yes, well, then I'd like to do this' 'Yes, well, good.' So, they were definitely engaged. Very engaged in the development process. Well, everyone wasn't, but those who really were good developers did not hesitate to try themselves."

Open engagement in the product development process can be seen as one of the key success factors in developing menstrual products that do well on the market. It was these unconventional practices that made Solgun Drevik and her team so successful in their menstrual product development and innovation work. In fact, their projects resulted in her getting over 70 patents and inventions that are widely used today. This includes the absorbent core of menstrual pads. Drevik stated that,

> "I was a part of those projects that were a bit groundbreaking, but throughout all these years, there have been some odd projects once in a while. And with these thin, thin products, I was a part of it from the beginning, but I am not the only mother to it all. But on the other hand, to these products on the market today, the shape of the core they have, I am the mother of those! The fact that we went to the basic knowledge we got through all the molds and plastic forms. So, that is the base from which they develop today, that's from me."

Another insight originated in the intimate engagement with the female genitals and their associated liquids that led to a meaningful product development was when Drevik and her team realized that pads and liners needed to be more breathable. They found that pad and liner users were producing larger amounts of discharge than those using tampons. As a consequence, the number of user-reported cases of yeast infections also decreased substantially. Drevik stated that,

> "It's the same with panty liners, there are a lot of people who, maybe don't get yeast infections – not that bad, but who get more discharge, because the body produces more, the more you confine the space the whole time. The body reacts to that. Yes, you have more discharge as a tampon user than a pad user because you're there irritating the mucous membranes the whole time. That's not something you think about. It got a lot better when we drove through breathable panty liners. And then thrush and that stuff decreased too. So, it needs to be breathable."

To summarize, in order to develop products that satisfy consumers' many needs, it seems imperative that those engaged in the development process are able to have an open and destigmatized atmosphere throughout. This enables them to openly discuss the nitty gritty details of menstruation, menstrual blood, the genitals, and all instances that might be affected by menstruation in one's daily life and take those into account in new products. With products where all such considerations are accounted for, users are likely to be more comfortable and feel confident about their menstruation and menstrual products, which is likely to contribute to destigmatization.

6.2.3. Bringing menstrual products into the start-up sphere

There are a number of ways in which entrepreneurs are attempting to break new ground, both within and outside of the menstrual product field. For example, they are bringing menstruation and menstrual products to the innovation and start-up scenes, often dominated by men and hi-tech domains. As previously discussed, by bringing menstruation and menstrual products into new arenas such as in the case of moving the matter from private to public spaces, more people are exposed to it and the conversation automatically becomes more widespread and includes more people. The more such discourse spreads, the greater potential for destigmatization.

Infiltrating the innovation and start-up scene with menstrual products can be seen as a way of shifting group compositions. While this may imply that a group of potential stigmatizers is more diluted, we know little about how stigmatized menstruation is in that particular kind of scene. Simultaneously, there is an acceptance that the product is not like any other, in the sense that men do not consider themselves knowledgeable in the area. This may imply that women are

seen as knowledgeable and are thus respected in a new way in that particular scene. It may also be possible to view this concept as framing menstruation and menstrual products as innovation, which enables a redefining of the matter as something attractive, forward-thinking, profitable and interesting rather than something shameful that should be hidden.

Women entrepreneurs in the menstrual product domain can get a certain kind of respect that is unusual for women in the start-up world. Ingrid Odlén, a young entrepreneur developing a new kind of menstrual product, for instance, stated,

> "often, when you work with start-ups and there are a lot of men there, and they are often quite laddish and maybe you work with something technical, and one of those guys will come over and tell you what it is you work with… but if you work with menstruation, you can avoid it because they understand how wrong it would be for them to claim that they knew more about it than me."

Lisa Perby at MonthlyCup agreed and explained that there has been a substantial shift in how people react to her business. She stated that,

> "I have very positive encounters. When I tell people who I am, they often know my company and I am met with a lot of respect and appreciation. Every week I get emails from people who want to work here, they think we do so much good from all different perspectives. At least, here in Sweden. When I started, it was a bit worse; the product wasn't as famous and it sounded a bit odd, and there was more nose wrinkling."

It is clear that menstrual entrepreneurship is seen as much more acceptable today than it was five to ten years ago. Entrepreneurs who have been working with menstrual products have different experiences regarding the reception of their business ideas, depending on how long they have been active. Odlén thinks it is very positive to be an entrepreneur working with menstrual products in the start-up sphere, today. She stated that,

> "There are so many women who do not think that I am trying to capitalize on us [women]; rather, they see me as someone who is trying to solve a real issue and so genuinely help. […] I have had so much support, so many people have contacted me. I was in an article in Sydsvenskan [the largest newspaper in Southern Sweden], and there were many people who showed positive support around that. So, it is a lot of fun to work as an entrepreneur with this kind of project."

Other entrepreneurs who have been active for longer than Odlén tend to tell a different story, however. In 2013, menstrual products were not discussed as often and openly prior to social movements and policy makers started placing gender equality, in general, and menstruation, in particular, onto the agenda. At that point, the conversation about menstrual products was very different. Since then, however, gaining support in terms of for instance collaborations and financing has become considerably easier. Louise Berg, who has been working with menstruation since 2013, stated that,

> "Timing is a big thing. When I pitched in 2015, there was very little talk about menstruation."

In summary, by bringing menstruation and menstrual products into the startup-sphere, it is likely that destigmatization can occur through increasing the scope of the conversation about the matter at hand. This broadens the number and segments of people who engage in the conversation that would otherwise have been excluded from it, much like I discussed in the section on moving menstrual products from private to public spaces. In this case, it is not a public space but a space that is normally associated with hi-tech and savviness. By associating these matters, generally viewed as normal, interesting and attractive, menstrual products can potentially be associated with that description as well.

Furthermore, if menstrual products are seen as a category where innovation is needed, socially beneficial, environmentally beneficial, or profitable, it may inspire others to innovate therein, who might otherwise not have done so prior to that. The femcare or femtech industry has a lot of potential for those willing to invest in opportunities, but for various reasons, this has not been done. Perhaps, bringing menstrual products increasingly into the start-up sphere will change that and destigmatize the products, making them more normalized and important.

6.2.4. Consumer insights driving innovation and entrepreneurship

As in the majority of markets, the most fundamental source of inspiration for innovation is understanding consumers' needs and preferences. This might look slightly different in a product field that deals with stigma, however, since function and use are hidden behind closed doors in the privacy of people's bathrooms and underwear. Another significant aspect to menstrual product development and

innovation is that consumers might not be very engaged in or educated about their own menstrual cycles and might thus have limited ability to identify their menstrual product needs, and much less ways in which such needs might be better satisfied. Therefore, by engaging consumers and their insights about menstruating and using menstrual products as a source for innovation and entrepreneurship, manufacturers might signal that consumers and their experiences are taken seriously, as well as being able to satisfy consumers' needs in a better way. Both these aspects are likely to increase consumers' comfort and confidence, thus contributing to destigmatization. Former product developer at SCA (now Essity), Solgun Drevik, argued that,

> "When you listen to a customer, they can rarely solve the problem, unfortunately, but if you translate that to a technical solution and turn it into an insight… If I don't listen to the customer, then I have nothing to gain. Then I can make up anything, but there won't be anyone who wants it. That's the biggest mistake that detached inventors do. They have often come up with a solution that no one else is interested in, other than themselves."

On the other hand, in markets where groundbreaking disruptive innovation occurs, it is rarely consumers who identify ideas about *how* their needs might be met. Although even in Henry Ford's case, as the anecdote leads, consumers might have actually identified that they needed faster horses, which he then proceeded to satisfy with cars. Furthermore, as menstrual cycle literacy as well as education and knowledge have been discussed in previous sections, we will discuss how entrepreneurs and other innovators address challenges and needs in the menstrual product field as well as how they aid in their destigmatization.

When it comes to innovation at Essity, they work solely with the development of their existing product portfolio. Strictly speaking, this is not something my other respondents would call innovation, which they define as more radical, including developing new types of products, new types of business models, combining existing products with new business models, or making existing products out of new types of materials. However, because they themselves consider their product development to be innovation, I will categorize it as such. Additionally, they have been known to innovate, in terms of radical product development such as developing the absorbent core that is now widely used by most pad manufacturers, has occurred at Essity (then SCA) by Solgun Drevik.

When developing products, focus needs to be placed on the benefit that you want to deliver to your consumers, not on the products themselves necessarily, since they are only a way to provide a benefit and satisfy a need. The better menstrual products are at satisfying menstruators' needs, the less issues they will have with their menstruation, which contributes to the destigmatization of both their menstruation and menstrual products. Michael Moscherosch at Johnson & Johnson stated that,

> "I don't know of any company that makes or develops products that do not include the consumer because that would be a disaster from day one. You need the input of your users, in the cultural context. If you don't do that, it's a crapshoot. It might be a success, but it might not. I think it's absolutely crucial to work with the people who you're trying to create a benefit for. […] In my mind, you need to understand. It's not about the product, the product is just the means to deliver a benefit. You need to understand the needs, and you need to understand the benefits. The product is just a way to deliver a benefit and address that need. You're never going to learn about the needs and the benefits and sometimes they're not very obvious, if you don't talk to your consumers, if you don't involve them in the development of the product."

Most of what Essity produce or sell comes from an insight about a consumer need or preference, which they call a consumer insight. They ask a number of questions in order to identify these insights. Sofia Ekstedt, Lead Product Developer in Feminine Care, explained that,

> "Everything we do comes from some type of a consumer insight. This implies that we start by collecting information about consumer needs. What do consumers wish for? What needs to they have? What demands do they have? But also, other stakeholders' requirements like laws, processability, standards, things that we need to relate to. To satisfy those needs, what functions does this product need to have?"

These insights can be picked up through systematic market research, or through trends identified on social media. The latter is often done locally or regionally, where they have more specific communication with the market they work in. Insights can lead to new innovations, as well, such as in the case of Essity's black panty liners. The concept of wanting to hide one's panty liner among other people when changing in a public changing room can be seen as stigmatizing in the sense that even among other women, menstruation, and other reasons for which one

might use a panty liner, needs to be hidden regardless. On the other hand, the concept of black panty liners breaks the notion of everything having to do with women's genitals and menstruation to be clean, hygienic, white and virgin, which implies that the innovation can be seen as destigmatizing in that sense, simultaneously. Lena Anebreid, Technical Customer Support Manager at Essity, stated that,

> "In those cases, we have often picked up through those who work on that market locally or regionally, they usually know what their market looks like and their consumers. So, they know what is demanded and maybe pick up trends, like on social media in Russia there was talk about them wanting this and that and then that gets picked up along the way. One such example is that in some markets they sell a lot of black underwear. So, we were contacted by consumers who asked why we don't sell any black panty liners."

In one of their larger market analyses, Essity identified consumers' stress levels that correspond to different stages of the menstrual cycle in connection to menstrual products. Users experience the highest stress levels when they use and need to get rid of used products, especially if they do not have access to a bin. This triggered product developers to develop a new type of wrapper that enables the user to roll up a used pad in a new pad wrapper, squeeze the ends, which stick together through glue strips and take it with them without risking messiness or odor from spreading. The product launch was connected to a marketing campaign called Live Fearless, since the innovation is thought to provide a better solution and help women feel more comfortable about menstruating, hence destigmatizing the experience of menstruation. This in turn might increase user confidence about menstruating and menstrual product use, which can aid in destigmatizing the matters. Sofia Ekstedt stated that,

> "A number of years ago, we started looking at women who wanted to be out and about; they want to be able to get rid of their menstrual products. You can say that when you buy the product, there is a low level of stress, then you have them at home – not very stressful, but then the use and getting rid of-process is very stressful for the woman. How could we then reduce the stress when getting rid of the product? And then, we looked at it and saw that lots of women wrap their product in some way, in toilet paper, in the old wrapper… You wrap it because you don't want it to show but you often need to carry it with you. So, what we did then was that we created this resealable wrapper so you can wrap your product,

> stick it in your pocket, stick it in your bag, it won't create a mess, it will stick, you can keep going, without worrying that it might get messy and smell. So that became an innovation that was delivered together with Live Fearless."

This innovation was not always appreciated, for instance, in Sweden. Apparently, consumers said that it did not work. The reason it did not work was because consumers in Sweden did not care enough, or rather were not stressed enough, or affected enough by the stigma, about being able to dispose of the products in a mess- and odor-free way. This is likely to do with the notion that they often have access to a trash can or bag. In places where such access was limited, the innovation was more well-received. Sofia Ekstedt at Essity stated that,

> "There are a lot of Swedes who say that this solution does not work – well, that's because you don't care – you crumple it up and that's not how it works, because you don't have that problem in Sweden, while in other parts we saw that this was a huge problem among school girls who didn't want to go to school because they didn't have any place to get rid of the products. So, that triggers 'we have to do something for these girls,' all those women who have that stress, then you have to do something and that creates innovation insights."

As indicated, it is important to analyze all steps in the process of using the products, and the packaging matter in terms of disposing used products has been a topic of discussion for a long time at Essity. This is indicated by the notion that both current product developers and former developers have struggled with reducing consumers' stress about potential smell or visibility of their used products to others in public spaces. Solgun Drevik argued that,

> "We worked a lot with packaging because an important insight was that no one wants to come to the toilet. I'm not talking about one's own toilet, but someone else's or something, and you can see or smell menstrual products. You don't want to smell, and you don't want to see. So, we worked really hard at how to make that as good as possible."

This issue can be seen as buying into the stigma of menstruation needing to be kept out of sight, and the more companies develop products that are silent and unnoticeable, the stigma is reinforced. On the other hand, with the levels of stigma that are experienced in different cultures, today, it can be argued that we are all still far from accepting aspects such as odorous used menstrual products,

which is likely one of the most stigmatized aspects of menstruation. Further, handling one's own menstruation is one thing, but dealing with others' menstruation is different and can be compared to the Swedish saying, 'my children and other people's brats,' which implies that people are much more forgiving when it comes to their own issues, than they are with others.' Drevik stated that,

> "You have a life cycle of a product that you need to take care of and that wasn't something a lot of people had thought about. Most people had identified that it's so damn disgusting to go to the toilet after someone that's menstruating because then it's one step away from handling your own menstruation, and all of a sudden you have to deal with someone else's menstruation and that's when it gets really disgusting and you come back to 'my kids and others' brats' and it's the same principle that goes through people all the time."

While many consumers are likely to think that existing products on the market satisfy their needs, especially as they are continuously improved by large companies such as Essity, others identify gaps in the market that they would like to see new products fill. There are few products that meet the needs of women in rural areas of developing countries that have limited access to environmentally friendly disposal. Louise Berg wants to rectify this by developing a new kind of product that can be decomposed safely in the environment. This has not been done earlier, and she meets much resistance but instead of discouraging her, she finds it enticing. Her continued argument is that products need to be developed to meet the real needs implied by the lives that women live today. Berg stated that,

> "I want to develop a menstrual product that satisfies the requirements of the lives people lead, and because people said it wouldn't work."

Gynecologist Christina Lloyd agrees with Berg's discussion about the lack of good menstrual products that suit the lifestyles and budgets of those in developing countries and that this matter should be raised not only among manufacturers but that it would also be interesting in terms of research. She stated that,

> "Today, the question of quality of life is huge. You could say that research on willingness to pay could be really interesting to look at with regard to menstrual products."

Furthermore, new kinds of business models with sustainability orientations are continuously arising. One idea is a holistic concept that includes the whole menstrual cycle throughout a person's entire life. Daniella Peri compares her concept to an online medical service but for menstrual cycle needs where lay knowledge including household remedies and indigenous practices is incorporated so as to pay respect to old traditional expertise developed over centuries as well as a reaction to the neglect of women's needs and issues in Western medicine. She described it as,

> "From menarche to post-menopause, with an offer including products such as thrush medicine, natural vitamins, smaller pads for those who bleed less or who are smaller people, pregnancy pads, UTI-tests, herpes medication, access to OBGYNs as well as a platform for "tailoring one's wellbeing."

To summarize, in order to innovate products that are of the greatest benefit to consumers, it is important to involve users in the development process. This might seem like an obvious point, but there are still many menstruators around the world that belong to segments that are under-served by the current menstrual product supply. Furthermore, there are certain potential tensions involved in listening to consumer needs, such as when consumers express a want or 'need' for products that reinforce the stigma rather than destigmatize, such as in the case with black panty liners. The stronger the stigma, the more such tensions are likely to arise when working toward destigmatization, but companies seem to be dealing with them by focusing on destigmatizing communication about products to affect public opinion in the long run.

6.2.5. Adapting to local needs and preferences

When searching for consumer insights and identifying needs, cultural matters that guide behaviors and practices associated with menstruation are one of the most important aspects that should be considered. For companies that are present in many different cultures, this implies that they need to employ different research questions depending on the context in which they are developing products. This is important for destigmatization, since the notion that all consumers and their respective needs should be taken into account in order to signal that they are taken seriously by manufacturers. Thus, insight about varying demographics, wearing

times, economic, logistic and infrastructural aspects that affect user patterns need to be considered. Sofia Ekstedt at Essity stated that,

> "We often say, a bit sloppily, that we are global, but we do not exist in the whole world. Instead, we are in South and Central America, the Nordics, Russia, around the Mediterranean, China, and South Africa. But this means you have to have different research questions, of course, depending on where you're active."

In other words, innovators must understand the local ways that the stigma on menstruation and menstrual products might affect users and their needs. It is not only the stigma that guides behaviors, however. Naturally, infrastructural and economic factors play in as well. For example, consumers' income and access to toilets with doors and locks as well as to running water will affect how often they can change or empty products in a safe and hygienic way.

Developers at Essity have established a model for how consumer needs can be determined. This model can be likened with a hierarchy of safety, comfort, and discretion. These three concepts are fundamental for most consumers' menstrual product needs around the world, the difference being how they are prioritized. Sofia Ekstedt at Essity stated that,

> "Consumer need can be seen as a hierarchy of safety, comfort and discretion, which is pretty similar for everyone, but people prioritize a bit differently. There are slightly different underlying needs depending on where you are. In Malaysia, for example, they want washable products, which maybe we don't. So, there are various underlying needs."

It is noteworthy that Essity do not actually sell their products on the Malaysian market, perhaps for the very reason that they have identified a preference among Malaysian consumers for reusable products, which Essity do not offer. This is similar to Johnson & Johnson who produce O.b. tampons sold off their femcare business in North America. This could, at least partially, have to do with the lack of demand for digital tampons, i.e., tampons that you insert with your finger, on the North American market. Instead, consumers in North America prefer applicator tampons, such as Tampax. Michael Moscherosch at Johnson & Johnson stated that,

> "We currently are not active in that business in North America, we sold that business to somebody else. But we are still very active in the rest of the world. So O.b. still belongs to Johnson & Johnson, and the big market for O.b. is Europe anyway. North America tends to be more interested in applicator tampons and that's like Tampax or something like that. Why is that? I would say it's a cultural thing."

Tampax were considered too big, bulky and visible when carried to and from the bathroom in comparison to the much smaller O.b., at least when they were first introduced on the Swedish market. Christina Lloyd argued that this is why Tampax never gained any real market shares here,

> "[…] Tampax's tampons with applicators, […] they did not gain traction because they were too big. So, they were too visible and that was embarrassing."

This sparks an interest regarding which of the two camps is more destigmatized. Is it the North Americans who do not find larger, more visible tampons embarrassing, or is it the Europeans who are not afraid to insert tampons with their fingers and get their hands dirty – I mean bloody? This is probably difficult to determine from my data, but what the matter could indicate is that Essity's prioritization model could, in fact, have some truth to it. It may well be that the comfort of using an applicator to swiftly insert the tampon and staying out of touch with one's blood is a greater priority for North Americans than for Europeans. Exposing the fact that one is menstruating may be less of a concern, alternatively those using tampons will bring their handbag to the toilet with them so as to hide the tampon inside. Europeans, however, may find it more important that products are discreet and can easily be carried in one's hand without showing to other people, and do not worry as much about getting more intimate with their bodies and menstrual blood in private.

Furthermore, because most products on the menstrual product market are developed for the middle- and high-income countries, there are few products that address the needs of those in the developing world. This implies that oftentimes the same products are used, but in suboptimal ways. This leads to consumers in developing countries being exposed to higher risks of product failure than those using the same products in developed countries, due to their different lifestyles and thus menstrual product usage patterns. Greater risk of product failure, or leakage, contributes to users being less comfortable about their menstruation,

which further reinforces the stigma rather than destigmatizing menstruation and menstrual products. Hence, in order to destigmatize menstruation and menstrual products, it is likely that developing products that are more adapted to local needs, including contextual aspects such as demographics, weather, and user patterns will contribute to a greater sense of comfort associated with menstruating. When comfort associated with menstruation is increased, this further likely implies that users gain confidence about menstruating, which in turn decreases the stigma. Michael Moscherosch stated that,

> "In the developed world, generally, the average wearing time is 4-8 hours, and this has been the case for a very long time so, generally speaking and if you look at adverse effects, you know that it's a safe, assuming the product is hygienic and made according to the standards, it's a safe time. It's true that microorganisms grow in the napkin and the longer you wear it, the higher you get the bio burden but as I said, the interphase between vagina and napkin is somewhat limited through the natural seal that the labia minora forms so that the microorganisms on the napkin causing a vaginal infection is somewhat limited. It's not impossible, but it's somewhat limited."

Thus, products that are sold on the markets in developing countries should, theoretically, be of higher quality than those in developed countries, due to the increased risk of infection, and be sold at a lower price. Because this does not seem like a very attractive business model, however, to my knowledge, no company to date offers such products. Hence, there seems to be some room for innovation in this area. Moscherosch explained that,

> "What I think, the wearing time is a really, really important question, because, generally, what we find is that the average wearing time in low- and middle-income countries [LMICs] is much longer, as I said, driven by the lack of safe and sanitary locations to change, but also driven by the cost of the product. So, what we as manufacturers, and it doesn't matter if you are a large-scale manufacturer or if you're a small scale, rural manufacturer, what we have to be aware of is that we actually need to make products for LMICs that should have a higher performance standard than typical western products because of that long wearing time."

The asymmetry between intended use by mainstream products on the market and how they are used in developing countries could further be one of the reasons for consumers' negative experiences with them in reference to the previously

discussed social movement campaign #MyAlwaysExperience, which was started in Kenya. Hence, companies that develop products that are not being used as intended in specific places, might need to pay increased attention to consumers' needs, especially if they do not belong to the primary segment for which products are developed, since the risk exposing consumers to ill-being and themselves to public criticism. Michael Moscherosch's reasoned that,

> "I have no idea if Procter and gamble sells different products in Africa and in Sweden. Assuming that they are selling the same product, and the consumers are not happy with the performance you have to start asking yourself 'why are they not happy with the performance?' and one of the reasons could be because the wearing time in Nairobi is longer than the wearing time in Stockholm."

The notion that consumers in different places around the world use their menstrual products for a varying number of hours is something that Essity has picked up on. Instead of releasing different products on different markets, which they do to some extent, they try to maintain the same product line in all their markets to stay as cost efficient as possible. Nonetheless, they ensure that there are products within that line that cater to all markets. The most popular product in Europe may be one of the least popular in Mexico and vice versa. Sofia Ekstedt at Essity stated that,

> "If you look at for example Mexico, you often talk about them using their products during a longer time, which is true for some extent. That means that we sell our largest product in Mexico – it's a thick night product, that's our bestseller – you should be able to use it for a long time. It's not only used at night, but it's also used during the day, because maybe you want to put it on when you leave your house in the daytime. So, it should hold until you come back, depending on what you're doing. In Europe, our most commonly bought product is the thin, slightly shorter pad. So, it's different but there's a similar product in Mexico. However, it has much fewer users than in Europe. What we see is that those who use the large product in Europe and those who use the large product in Mexico – there, it doesn't vary much in time, but it varies when you choose a different product."

Furthermore, there is often a discussion about fragranced menstrual products. In the context of the developed world, including Sweden, the discourse surrounding fragranced menstrual products consists of two main arguments. Firstly, the products are seen as entirely pointless and reinforcing the stigma, through yet

another way women are told by society that they should be clean and fresh in ways that are not necessarily connected to what is natural, in accordance with, for instance, Essity's description of the menstrual and vulva stigmas.

Secondly, fragranced menstrual products are discussed in terms of whether they should be permitted, as considered previously in terms of the Swedish Chemicals Agency's view on the matter. The argument here is that there are many documented cases of allergic reactions to the fragranced products. In the context of the developing world, however, menstrual odor is a real issue for women who wear their pads for a longer time than recommended and would risk stigmatization if they were to start smelling. In other words, in places where menstrual products are used as intended, fragranced products are seen as reinforcing the stigma. On the other hand, the same products are seen as destigmatizing in places where concealing the menstrual odor becomes imperative to avoid stigmatization due to longer wearing times.

One could argue that products that are seen as reinforcing a stigma in one market should be removed from that market, while continuing to cater to those for whom they contribute to destigmatization. On the other hand, according to my respondents, there are users in all markets that wear products for a longer amount of time, and thus might have a need for fragranced products in order to avoid stigmatization. Further, it could be argued that dislike toward fragranced menstrual products is a display of ignorance toward those who lack access and financial means to change menstrual products as often as recommended. Michael Moscherosch stated that,

> "The issue with fragrances is that you don't need fragrances for the napkin to perform, but consumers very often want it because they want to address the potential risk of menstrual odors. That's specifically important in low- and middle-income countries where the wearing time of the products tends to be much longer. I mean the issue there very often is that women don't have the facilities to change their products, so they put the product on in the morning and wear it all day long and then change it again at night. Which is, you know, twelve hours or even longer than that. So, the longer the product is worn, the more potential there is for menstrual odor and consumers try to address that by using scented pads."

Another aspect that guides menstrual product preferences and, hence, innovation and product development is tradition. Girls tend to use whatever their mothers

use and thus can be found at home. Traditions can cause certain cultural preferences to develop more slowly, such as the demand for thicker products. Developers argue that thicker products do not necessarily absorb more, but certain consumer segments seem to feel a greater security in the palpable thickness rather than in the less tangible high-absorbency thinner materials. This could be connected to the notion that before they were developed into thinner, more technologically advanced products, pads were indeed thicker. Perhaps, there has been a tradition of using products that are thicker, which has not moved as quickly as in other parts of the world. Whether this is the case or not, thicker products are preferred, for instance, in Mexico, as discussed, but also in certain segments in Russia among other places. Sofia Ekstedt at Essity stated that,

> "Sometimes, we launch products only for Russia, for example. It can be a product in a lower price segment because maybe a consumer segment can't afford all the extra features – there might be a need for a slightly cheaper product. Or, for instance, these thicker products, because in some countries a thick product means it's a good product because in their conceptual world, it means that it is safe and secure. Not necessarily because it absorbs more, but for them, that's what it signals. So, then we sometimes give them that."

To summarize, local adaptation of innovation and entrepreneurship efforts need to be taken into consideration in order to further destigmatization since different users have different needs. Also, if those needs are only met in a selected number of places around the world, that is likely to further stigmatize those whose needs are not met adequately, which contributes to increased inequality and stigmatization for other associated reasons. Because they (we) are such a large group, menstruators vary infinitely, not only in user patterns and physically, but also with regard to aspects such as ability to pay, access to infrastructural resources such as private bathrooms with locked doors and running water, and not least, weather conditions. One size does not fit all. Thus, in order to increase consumers' comfort and confidence associated with menstruation and menstrual products in general, products need to cater to those needs in order to contribute to destigmatization.

Furthermore, increasing consumer driven innovation and entrepreneurship, that address consumers' real needs and demands is likely to contribute to an increased variety of products on the market. With more products on the market, it is likely that consumers find products that meet their particular needs. This will likely

make them more comfortable and confident about their menstruation, which further contributes to destigmatization.

Traditionally, however, large companies produce similar products for a wide, often global, or at least semi-global, market. This seems to be changing, however, where initiatives do pertain to different market segments, whether it be high- or low-income segments or those environmentally conscious. This is may lead to further market segmentation, which can increase consumers' ability to choose products that suit them better. With such a large portion of the population that is in need of menstrual products, comes many different body types, bleeding patterns, and financial circumstances. These aspects could be seen as drivers toward segmentation of a lucrative market of a recurring need. The more attention companies and society in general pays to individual menstruators' needs, the more empowered they are likely to become and the greater confidence they are likely to gain. These aspects in turn contribute to destigmatization.

6.3. Framing on the institutional level: Feminism and policy making

Actors urging a government to consider taking greater control, for instance, by investigating and regulating the contents of menstrual products, frame the matter according to agendas that are commonly seen as important by the government. This strategy is seen as a particular skill developed through experience of government interaction, as well as other legislative or standardizing bodies such as SIS. For example, in her letter to the government encouraging them to mandate investigations of the safety of menstrual products to an appropriate agency, Persson frames the matter both in line with the feminist and the sustainability agendas. She also does this consequently throughout her interviews, both with me as well as on public radio. On the public radio show Plånboken, or The Wallet, Persson stated that,

> "In Sweden, there is no one that knows how much environmentally hazardous chemicals menstrual products contain and how they, in that case, affect our bodies." (Laquist, Berg & Aktén, 2016)

Although feminism has spread unmeasurably across Sweden in recent years, including the Swedish government calling itself feminist (Potter, 2014; The Government Offices of Sweden, 2015), applying as many frames as possible is considered to fortify the claim. Thus, framing the lack of menstrual product control as not only a feminist matter, but also an environmental one further strengthened the Consumers' Association's argument in their letter to the Swedish government because of the continuously increasing concern about the climate. Hence, menstruation was not only framed as a matter of protecting women, but also the environment, in order to gain further support for the cause.

Another way framing can be leveraged is by likening menstrual products to condoms, a public health product group that was destigmatized to a great extent during the worst outbreak of AIDS and HIV, when it was framed as something good, important, and the best way to prevent the spread further and protect oneself and others (Rimal & Creel, 2008). By likening menstrual products to condoms, one also invites the reader or listener to consider that although they are both used in the genital area, sex and condoms are apparently less stigmatized and more controlled than menstrual products, despite the increased exposure to potential hazardous chemicals of the latter. Persson stated that,

> "I cannot help but see this from a feminist perspective as well where condoms – I think it's really good that condoms are controlled, but the time spent wearing a condom is very, very small in comparison to the time wearing a menstrual cup, tampon, or pad."

Framing resurfaces in relation to the standardization of menstrual products to ensure their safety, which can be framed as a means to facilitate innovation. This was done by SIS to help justify the work when it was lacking financial and other support from large manufacturers. Since innovation is currently seen as something important, interesting and desirable, by employing a frame of innovation, again the attention was shifted from the stigma on menstrual products. This encourages the association of menstrual products to something positive, rather than negative, which likely aids in their destigmatization.

On the institutional level, feminists and feministic actions frequently raise the social inequalities between those who menstruate and those who do not, not least in relation to the implications of menstruation and menstrual products. Policy making is called for by such activists as a means to rectify these inequalities, and

certain attempts or first steps toward doing so are underway. These policies not only address the social inequalities, but they also take a holistic approach and include all pillars of sustainable development. By raising matters concerning menstruation and menstrual products to the agenda, they are increasingly viewed as important, which, on an institutional level, signals that instead of neglecting them, they should be paid attention to, in order to ensure their safety, affordability, and access, etc.

6.3.1. Acting out feminism

In terms of what is seen as activism, I argue that destigmatizing actions, or actions that "drive new path creation" (Briscoe & Safford, 2018; Schneiberg & Lounsbury, 1986) and subvert path dependency (Kenny, 2013) can be seen as activism regardless of whether affiliated with any specific social movement and by whom they are carried out. This is because there is destigmatizing intent behind the actions that are in line with the frames of social movements (Dudová, 2010). In this case, they pertain primarily to feminism, and the intended effects of actions go beyond the scope of self-interest although they may have positive effects on the actor as well. I view these framing actions as ways that contribute to changing the conversation about menstruation and menstrual products toward destigmatization.

Looking at the destigmatizing actions that are carried out by actors that are not directly affiliated with social movements as activism toward destigmatization, can be seen as a way to address the previously limited integration within the triadic relationship between the effects of businesses and social movements on institutional change processes. This section commences with a discussion on feminism found in the empirical study that furthers the movement toward destigmatization of menstrual products and associated pivotal events. This section also discusses a number of individuals who actively work toward changing destigmatizing menstruation and menstrual products and pivotal events related to their work. Following this, I discuss the ways in which actors are contributing to changing the conversation about menstrual products.

Possibly as a consequence of menstrual products being classified as consumer commodities rather than public health goods, healthcare professionals are less engaged in matters concerning menstrual products and their safety than one

might think. Aside from them, two of the most important stakeholders are the feminist- and the sustainability movements. Gynecologist, Christina Lloyd, argued that,

> "Naturally, the feminist movement in itself as well [has a stake], which is quite obvious, but also the sustainability movement."

The most important way in which feminism drives the destigmatization of menstruation and menstrual products is by moving the matter from the private to public spaces. This can be seen as signaling to the public that menstruation is a matter of everyone's concern, since it is one of the most fundamental prerequisites for human procreation and each individuals' own existence. Furthermore, by bringing it out of the proverbial shadows of a bathroom stall and a private conversation between women, a clear step is taken toward breaking the culture of silence. If it does not spark a conversation among those who have not participated earlier, at least it is likely to plant a seed and a train of thought that was not there before.

5.3.1.1. Moving menstruation and menstrual products from private to public spaces

One of the most pivotal events for the destigmatization of menstrual products in Sweden occurred in 2013, when Liv Strömquist, cartoonist, artist, and radio/podcast profile, delivered her two-hour long talk on menstruation on one of the most popular radio programs and podcasts in Sweden, called Sommar och Vinter i P1. The essence of the program is that famous people or individuals that are regarded as 'interesting' in some respect, alternatively that have something interesting to say, are invited to speak for two hours about whatever they wish with short breaks for songs of their choice (Hopfinger & Hellners, 2019; Persdotter, 2013; Sveriges Radio, 2018).

Strömquist's work can be described as by Ylva Lindberg, a Swedish researcher in literary studies, (2016, p.7) who in a study on "the voices of contemporary Swedish women humor cartoonists, whose art often demonstrates original and challenging views of the relationship between men and women," states that,

> "For example, Strömquist articulates feminist messages underpinned by complex theories from different scholarly disciplines. Her fairly traditional- looking strips, which address both men and women, are textually dense in a way that invites intellectual activity. This academic feature is contrasted with recycled news images

and personalities from the gossip press. She also uses collage techniques and reworks famous paintings, for example, works by Gustave Klimt and Frida Kahlo."

Liv Strömquist also creates so-called menstrual art, a term that has been coined as a 'new word' in the Swedish language as of the year 2020, along with for instance climate strike, the Greta-effect, and six other sustainability related words (out of a total of 35 new words) (Farran-Lee, 2019). The art that has gained the most attention comprises pieces of art plastered on the walls of one of the largest subway stations in Stockholm, Slussen, depicting ice skaters with leotards stained with red blood between the legs. The pieces, a part of the exhibition The Night Garden, are otherwise entirely in black and white (Frid, 2017).

Picture1: Liv Strömquist's ice dancers at Slussen subway station in Stockholm (Askegård, 2017).

The menstrual art on the walls of one of Stockholm's largest subway stops is both a sign that the destigmatization process is both underway and a driving force. Louise Berg stated that,

> "People can think whatever they want about the art itself, but it would never have worked five years ago. No one would have ever said yes to it; they would have looked at each other as if it were the craziest thing in the world… So, [to destigmatize menstruation, we need to] talk about it, do things around it, bring it to the surface. Taboos only exist because we keep it hidden."

The art further triggered a national political debate about what type of art should be considered suitable in the public spaces like the subway and whether that is a viable place for taboo-breaking. The story of the pieces at Slussen was also picked up by a number of international newspapers, including the Guardian, Daily Mail and Metro (Hunt, 2018; Scott, 2017; Tweedy, 2017). Observing the comments by readers of these articles indicates that far from everyone receives the story positively although Strömquist herself states that most of what has reached her has been encouraging (Frid, 2017).

In her talk and her art alike, Strömquist refers to menstruation where it happens – between the legs. This is unusual. In advertisements, for instance, menstruation has traditionally been portrayed as a blue transparent liquid poured onto a sanitary pad with a uniform background, which can be seen as a distinct separation of the product function and the lived experience of a menstruating person whose blood is red, goopy, clotty, and spreads unevenly on whatever is between one's legs at the time. The menstruating ice dancers can be seen as a much more realistic representation of menstruation with their irregular blood smears staining through their leotards. This can further be seen as a move toward talking about and showing menstruation in a less stigmatized way, that is more in line with the lived experience and reality of menstruating. In other words, in a way that does not attach shame and embarrassment to anyone involved, including the person menstruating and the person who brings it up.

The menstrual talk in 2013 drove the increased concern for gender equality and contributed to the public's widespread reception of the #MeToo movement with its onset in 2017 (Hopfinger & Hellners, 2019; Persdotter, 2013). The #MeToo movement was not about menstruation, rather about shedding light on and protesting the widespread sexual harassment of women across the globe and specifically in work places. Hopfinger and Hellners (2019) thus suggest that discussing the topic of menstruation in public service radio was received as an expression of feminist values of gender equality, which was further addressed in 2017 at the inception of the #MeToo movement (ibid.).

This movement is considered another pivotal event in the destigmatization of menstrual products in Sweden. Strömquist argued in an interview in 2018 at the Swedish yearly book fair in Gothenburg that the viral spread and breadth in scope that the #MeToo movement reached was a clear indication of the 'mainstreaming' of feminist values,

> "feminism is on the agenda all the time, it is regarded an obvious angle in a way that I did not experience at all ten years ago, there's a whole other climate now" (Clason, 2018).

In other words, it can be argued that feminism is increasingly seen as legitimate with anchored acceptance among the general public in Sweden. Sourcing an artist such as Strömquist and her art to decorate the walls of the Stockholm subway can also be seen as an action of Region Stockholm, or a collaboration between the region and the artist. The fact that the region in question decides to hang the art in the first place implies that there is an acceptance on a decision-making level in society that accepts and even projects values in line with destigmatizing menstruation merely through showing menstrual blood publicly in a world where menstruation generally has been hidden and silenced. By doing so, the region signals to its inhabitants and visitors that Stockholm's elected and employed decision-makers support the notion of displaying menstrual blood openly, in direct contrast to the stigma on menstruation.

A stigma can only survive if those with power to uphold it continue to stigmatize, but when political shifts occur and powerful agents in society, such as Region Stockholm in this case, explicitly act in contradiction to traditional ideas about what can appropriately be displayed publicly, they signal that their notions about what is legitimate in the public space has changed. Because feminism furthers women's status in society, it hence increases their power, and because menstruators generally are women, the pervasiveness of feminism should also, theoretically, contribute to the destigmatization of menstruation and menstrual products.

Other means to move menstruation and menstrual products from the private to the public sphere is through publishing books. Most prominently, books that inform either about the workings of menstruation, or about the ways that menstruation affects people and societies around the world. Clara Henry and Anna Dahlqvist are both authors of books associated with menstruation. Henry

was already famous on social media, when she released her humorous, yet informative, factbook about menstruation and female genitalia for pre-teens.

Another proven way to reach out to the masses is through YouTube and as one of Sweden's most famous 'YouTubers,' Henry frequently uses her platform of circa 396 thousand subscribers to increase the talk and knowledge about menstruation. This started in 2012 when she discussed menstrual cramps in a humor sketch in one of her vlog episodes. The video quickly became her channel's most viewed and most commented, and Henry realized she was on to something. Just like Strömquist, Henry was invited to speak to the public on the radio show Sommar och Vinter i P1. Here, she discussed how there was a clear need for increased talk about menstruation because of the spiking demand among her subscribers and others for videos where Henry talks about menstruation,

> "I started making more videos about menstruation. After the second one, people started calling me 'Mensclara' [or Period Clara], which is funny because I had talked about Justin Bieber four times, but everyone refused to call me Justin Bieber-Clara. It became almost comical how all my vlogs held more or less the same viewing statistics, except the ones that were about menstruation, where views, out of nowhere, skyrocketed. I started receiving emails from 10-year-olds who had started menstruating and asked if they weren't normal and 16-year-olds who had not started menstruating and were wondering the same thing. And it was somewhere around there, when young girls started turning to me, instead of asking a mom, sister, school nurse, that I started realizing that menstruation apparently isn't something you should be talking about. Actually, I had realized that long before. When I started menstruating, at 13, I had heard about menstruation one single time." (Henry, 2015)

This story shows that before Clara Henry started talking regularly about menstruation on YouTube, there was a lack and a hunger for such conversations. It also illustrates that when the silence around menstruation was broken, many individuals contacted Clara in a quest to feel normal, rather than talking to someone in their proximity, possibly because that ice had not been broken. A large follower base on social media such as YouTube and enormous reach facilitates the ability to increase talk and change the conversation about menstruation and menstrual products toward a more destigmatized discourse, particularly for the younger generation.

Furthermore, Anna Dahlqvist published her reportage on menstruation and power around the world, in 2016 (Dahlqvist, 2016). It was, generally, well received and appreciated around the world for pointing out both the ways in which women and other menstruators are still being discriminated against, as well as the widespread movement toward increased talk and thus destigmatization of menstruation. In her review of the book in one of Sweden's largest newspapers, Ida Therén argued that these two sides to the story make her both outraged about the seemingly ever prevailing stigma, and simultaneously hopeful about the ongoing destigmatization. While the matter had been on many Swedish lips for a number of years, this is only a fraction of the discussions going on, and what is being said is far from representative of the conversations that take place elsewhere. The argument Dahlqvist makes in the book, which is also argued by several of her respondents, is that it is difficult to understand the lack of variation in menstrual products available on the market, when there has been a need for them, literally for as long as people have walked this earth. Therén wrote that,

> "It is easy to become outraged when you read this book, at the same time as it fills me with hope. The fact that there is an ongoing awakening around the world regarding these questions makes a difference. That fact that we are even discussing that menstruation exists, is the largest step on the way there. It is nothing to be ashamed of, but rather a prerequisite for the continued existence of the human race. What we have seen in Sweden is only a small part, of a new global discussion about menstruation, and how it affects people. The more organic way there goes through cloth pads, menstrual cups and recyclable alternatives, with thoughts around new materials. As several people in the book point out, it is actually bizarre that there aren't more alternatives for how to take care of the menstrual blood, although it has existed throughout time. To talk about menstruation is a huge step in removing the stigma. Because why should women around the world really be ashamed of having fully functional uteri? Something that's so wonderful."

These individuals, to name a few, can be seen as menstrual heroes in Sweden who in various ways are working toward changing the ongoing conversation about menstrual products, not least by moving menstruation and menstrual products from private to public spaces. Further, it is clear that the conversation about menstruation is somewhat more destigmatized in relation to the average conversation about menstruation in the world. It is likely similar in other countries with similar cultures, such as the other Nordic countries, Northern European countries or even Canada.

On a global level, it can be considered a pivotal event when Canadian poet and artist, Rupi Kaur, posted a photo on Instagram, her primary medium for distributing her poetry, of herself in bed with a blood stain at her crotch in 2015. The photo was subsequently deemed too controversial by Instagram and was removed. As Kaur in protest uploaded the same photo again, this time with a note about it having been removed the first time, together with "their patriarchy is leaking," the post was once again removed (Wortham, 2015). This was a clear effort from Kaur's side to destigmatize menstruation and women's bodies in an arena, social media, where these are primarily displayed as sexualized objects for judgement and their natural functions are thus considered to stray too far away from that purpose.

Picture 2: Photograph by Rupi Kaur and Prabh Kaur from a series called Period. (Kaur, 2015)

This confrontation sparked debate and media attention and Kaur gained great support from her many followers on Instagram, Facebook, and Tumblr. She refused to accept that Instagram would continue to reinforce the menstrual stigma

by removing her photos and continued to post the image as it had been removed, encouraging others to do the same. Additionally, Kaur continuously posted powerful texts with feministic messages about Instagram's actions. These texts were shared over 17, 000 times on Facebook and Tumblr (Kaur, 2015). Part of the caption on the photo when she posted it the second time around reads,

> "Some women aren't allowed in their religious place of worship. Out of their homes. To do certain things. And are told they are sick. As if the period is a common cold. Yes. This is here in North America. I have been hospitalized many times because of issues associated with my period. I have been suffering from a sickness related to my period. And ever since I have been working so hard to love it. Embrace it. Celebrate it. Even though it's given me so much pain in the past few years, and they want to tell me I should be quiet about this. That all of this we experience collectively does not need to be seen. Just felt secretly behind closed doors. That's why this is important. Because when I first got my period, my mother was sad and worried. And they want to censor all that pain. Experience. Learning. No." (Kaur, 2015)

In the end, Kaur won the fight and Instagram changed their policy on what is deemed socially acceptable to display publicly on social media, now including menstruation. Hence, Rupi Kaur moved menstruation from the private to a public sphere, in this case, social media.

The fact that some were outraged by the art contributed to a public debate that triggered people to actively think about and take a stance on the question of whether menstruation should be depicted publicly in this way or not. The mere notion that such thoughts were prompted in people, who may never have considered such matters beforehand, can be considered destigmatizing, regardless of what their personal conclusions were on the issue. This is because it causes people to go through a cognitive process of associating and comparing menstruation and menstrual art to their own values, which is in contradiction to the disassociation that stigmatization implies (Chrisler, 2011; Gregory, Flynn & Slovic, 1995; Jensen, 2006; Vaes, 2014).

The event can be seen as pivotal because it changed the rules when it comes to how women's bodies can be displayed in public, in terms of social media. Since this event, there has been an increasingly stronger influx of posts about menstruation not least that visualize menstrual blood, which was, hence, previously not accepted by Facebook and Instagram. Kaur thus succeeded with

her coup to destigmatize menstruation and women's bodies to the point where they are not able to be displayed on social media. Jenna Wortham who reported on the incident argued that,

> "Why is it that Facebook users are mostly fine with certain kinds of imagery (bikini-clad spring breakers, say) but often offended by others (a mother breast-feeding her child)? To activists, such double standards reinforce the notion that women's bodies are primarily sexual objects — and that very little has changed since the days of old media. Perhaps posting about taboo topics in public, right alongside the quotidian details of our lives, helps normalize, desexualize and destigmatize women's reproductive health — a topic shrouded in shame for far too long." (Wortham, 2015, p.1)

Today, in 2020, menstrual content is accepted on social media such as Instagram and many accounts because the sole purpose of destigmatizing menstruation exists and thrives.

6.3.1.2. Concluding remarks on moving menstruation and menstrual products from the private to the public sphere

In summary, by moving menstruation and menstrual products from the private to the public sphere the conversation is broadened and intensified, which contributes to breaking the culture of silence and aids in destigmatization. This can be seen as relating to the social pillar of sustainability, where shaming people for menstruating can be seen as inequitable; thus, destigmatization is a way to address social equity. Some of the most influential players in the Swedish field since 2013 include Liv Strömquist, Clara Henry, and Anna Dahlqvist who further promote the conversation about menstrual products by publishing books, talking in public, displaying art publicly, and establishing organizations with the sole purpose of destigmatizing menstruation. On the global scene, one of the largest influencers is Rupi Kaur who contributed to the shift in social media banning the display of menstruation toward accepting it. Further, these efforts also spark debate in media, which further contributes to the growing conversation in itself.

6.3.2. Raising menstrual products on the agenda

Several types of initiatives can be effective in raising menstrual products on the agenda in order to set policies that aid in their destigmatization. The most

fundamental reason for most initiatives thus far seems to be the call for greater control and safety of menstrual products, hence framing in terms of gender equality and feminism. The Swedish Government and its agencies as well as other governments and agencies around the world seem to be underfunded when it comes to prioritizing menstrual products and their safety, however. This is counteracted by a number of initiatives such as those by consumer agencies raising the matter.

The Swedish Consumers' Association, for instance, advocates for the cause to raise menstrual product safety on the agenda. The only reason menstrual product safety was discussed at the Consumers' Association was because Persson was unsatisfied with the lack of attention to menstrual products and that they have been neglected for too long. There is a lack of pressure placed on the industry, or the manufacturers, to develop standardized testing methods and provide information about their products' safety. Because they are a small agency, however, the Consumers' Association have limited resources. Persson stated that they tend to prioritize product areas where they know there are substantial issues such as children's clothing and toys. Anna-Lisa Persson, who worked as a textile expert at the Swedish Consumers' Association, stated that,

> "The reason why we talk about these issues here [at the Consumers' Association] is because I work with them and because they make me angry, there is so much more we could do, like talk to the industry and do more investigations, but we do not have the resources."

Persson's anger testifies to a pathos concerning women's right to the knowledge that the products they use during menstruation are controlled and safe. She held that this is not the case because of the fact that menstrual products are classified as consumer products, the government allocates limited resources to controlling them, implying that manufacturers are those responsible for ensuring product safety along with the Chemicals Agency. As discussed above, Persson was one of several others to argue that it would be better that menstrual products were classified as medical devices, as it would imply that the medical agency would instead be in charge of developing and carrying out testing as well as other ways to ensure their safety. Instead, as a result, it is up to consumers to determine which products are safe and which are not. Persson argued that,

> "[I]t should not have to be up to the consumer, us women, to every time we have our periods to have to think about what we should use to manage it, whether it is endocrine disrupting or not. One should, without having to think about it, be able to pass a dodgy kiosk and buy the tampons they have, even though it is a brand you have never seen before in your life. That is our fundamental principle as a consumers' association."

Furthermore, what is also clear is that consumers' associations and governmental organizations have only received a limited amount of reporting on issues with menstrual products from consumers. This is one of the main reasons for why there has been a lack of initiative to raise the matter to the agenda toward increasing the control of the products' safety. During 2015 and 2016, the Chemicals Agency received reporting from around eight consumers who were either worried about glyphosates in menstrual products, had experienced irritation when using menstrual products, or complained about a strong odor coming from the products when the packaging claimed to be scent-neutralizing but not scented per se.

It is not the large, established corporations that cause the most concern at the Swedish Consumers' Association, since it is in the manufacturers own interest to ensure that their brand remains untarnished by incidents caused by their products, in other words, that their brand legitimacy remains unthreatened. It is rather the newer brands, for example, taking advantage of the boom of the menstrual cup that raise concern. Hence, depending on how serious new manufacturers on the market are about their product's safety, there is a risk that they might reinforce the stigma rather than destigmatize, as is the main perspective from which innovation and entrepreneurship is discussed in this thesis. Persson argued that,

> "[W]e [people] generally trust the industry to manage on their own, and in general I think they do. I have a hard time thinking that the really large brands such as Libresse and O.b. would not take that responsibility; it is far too much in their own interest to make sure that their products do not contain any harmful substances, and if they were to, then they would kill their own market. On the other hand, the lack of control implies that rather obscure brands and companies can enter the market, as it is unregulated, so it can open up for dishonest actors."

Because of this theoretical risk, Persson and her colleague were prompted in 2015 to write a petition to the Swedish Government inciting them to initiate safety controls of menstrual products. The matter had been raised previously in 2012 in

a motion from the Social Democratic party, as the Moderate party and their alliance were in power. At that time, the motion was rejected with the argument that the Chemicals Agency were able to conduct such testing. The government did not, however, assign the Chemicals Agency with any specific task to do so. As a result, the matter was dismissed until it was again raised by the Consumers' Association. This time around, however, the call was heard, and the government included an investigation of menstrual product safety in a larger project aimed at researching the environmental safety of various consumer products, which was to be conducted by the Chemicals Agency. As it turned out, Persson's concern about unserious actors was subsequently confirmed by the Chemicals Agency's investigation from 2017 to 2018, where one of the menstrual cups from a manufacturer without any brand name or country of origin on it proved to contain chemical residues far above the limit of what is regarded safe (The Swedish Chemicals Agency, 2018).

There were two main reasons that the matter gained traction the second time around. Firstly, the timing aspect, implying that, in recent years prior, the discourse around menstruation and menstrual products had intensified and the movement toward menstrual destigmatization had gained momentum. One of the reasons the discourse had increased was due to the increased use of menstrual cups, which had contributed to the conversation about chemical residue in menstrual products in general. This is one of the reasons why the role of entrepreneurs, such as those selling menstrual cups and who are disrupting the menstrual product field is so imperative. Moreover, the increased discourse can be seen as both a driving force and an indication of the destigmatization of menstrual products.

Secondly, in order to gain traction for matters such as the control of menstrual products, it is imperative to 'speak to agencies' in the right way by framing matters in a way that makes it attractive and positive for the counterpart. This implies that there is some tacit communicative skill or leveraging of expertise or power possessed by the Consumers' Association, possibly grounded in the fact that it represents the consumer collective, who hold the power of public opinion and demand. Persson stated that,

> "I think it was the right timing and I do not think that we would have spoken so openly about menstrual products ten to fifteen years ago – it does not feel like it is very taboo today. So, I think it is all about the zeitgeist of being able to talk about

> it, talking about the chemicals, discussing it in media and governmental agencies – we know how to speak to agencies and say you should do this […]"

Hence, when placing the matter of menstrual products and their safety on the agenda, it is important to speak to the right people, organizations, and agencies, and doing so at the right time and framing them in the 'right way.' Furthermore, as a process was initiated toward standardization, the Swedish Consumers' Association assigned one or two representatives to attend any meetings arranged by SIS. This signals that the matter had become an important issue from the consumer organizations' perspective. Hence, it is possible that once the matter was raised onto the standardization agenda, it became a prioritized matter at the Consumers' Association as well.

Raising menstruation and menstrual products on the agenda was discussed as an important aspect by several other respondents, as well. The first step to destigmatization of menstruation and menstrual products is talking openly about the matter, spreading knowledge about it, and recognizing that it is a question of gender equality, which is why it needs to be raised on the agenda. Gynecologist, Christina Lloyd, stated that,

> "The dream is to have a society where there first of all is an open discussion about it. I mean, this is the same area as people who have pain during intercourse, which is not something we talk about. You can say in the break room at work that 'I have such a headache today,' but you would not say 'I have such pain in my vagina today.' That's not something we do very often. And we rarely talk about having a heavy period; it is embarrassing, and it is immediately associated with the stigma where people think 'oh she's menstruating, then she's probably cranky and brutish' and if we do not break through that with good knowledge, then we won't ever get past that [stigma] and view it from an equality perspective. I think it is knowledge and raising it…"

Entrepreneur, Louise Berg, also stressed the significance of raising menstruation and menstrual products on the agenda in order to drive destigmatization. Because Sweden is one of the most gender equal and sexually liberal countries globally, the menstrual stigma will have diminished on its own in accordance with increased equality and sexual liberation. This is not the case, however, and stigma is something that has to be dealt with, specifically. In order to break such engrained behaviors, people must actively decide to talk and act in a certain way that

contradicts social norms. This causes discomfort, which the individual needs to develop ways to manage. This takes will, strength, and bravery in many cases. Berg stated that,

> "We have never started to talk about it, so the taboo lives on and then people think that it is already solved because we are one of the world's most equal countries that starts giving sexual education at younger ages than most, but still, we hide our tampons in our hands because we don't want to show that we are menstruating. It is something that is still there, and the reason it is still there is because we have never dealt with the taboo."

While efforts on the individual and organizational levels are imperative, it is changes occurring on the institutional level that are seen as 'real.' In order to 'really' destigmatize and take menstruation and menstrual products seriously, policies need to acknowledge the needs of menstruating people and rectify inequalities associated with menstruation. These matters are large and complex, however, and require collaboration across sectors and borders simultaneously as initiatives need to focus on the specific needs of the local. For this reason, the matter may need to be framed somewhat differently in accordance with the sector and actors on the receiving end of the argument. In their Hygiene and Health Report in 2018-2019, Essity stated that,

> "WHO advocates for girls to grow up in a context where menstruation is considered healthy and normal; where all girls are well-informed, have access to sanitary products, and receive the support they need.
>
> – This is happening in some places through the efforts of certain individuals and organizations. In order for this to happen on a larger scale, long-term programs, thorough leadership, management and investment are needed. Parliamentarians and government leaders are crucial for making this happen. Ultimately, menstruation needs to be high on their agendas for real change to occur." (Essity, 2019, p.16)

Finally, there are organizations in Sweden and around the world dedicated to destigmatizing menstruation and increasing menstrual equity in the public as well as private spheres. Rebecka Hallencreutz was one of the founders of an organization called Mensen, or 'the menstruation.' In their own words,

> "Mensen aims to discourage menstrual taboos and increase the general level of knowledge regarding menstruation. Myths and ignorance exclude individuals in their daily life and therefore it is necessary to challenge negative and stereotypical attitudes. We want to increase the understanding towards menstrual experiences and contribute to a sound and respectful perception for one's own body, as well as other peoples' bodies and experiences." (Mensen, 2020)

Mensen takes different measures to destigmatize, which include educating children and youths about menstruation; knowledge spreading among young adults through study circles and period parties; lobbying for lowering the tax on menstrual products, which amounts to 25% in Sweden, although it is currently being lowered or removed entirely in many parts around the world; making workplaces more menstruation friendly by educating adults and ensuring availability of menstrual products in work places in order to create a more equal and safe work environment for people who menstruate, and finally, by arranging talks, lectures, panels, and workshops on menstruation from an intersectional gender equality perspective (Mensen, 2020).

In an interview with Gothenburg's leading newspaper, Göteborgs-Posten, Hallencreutz explains how she became a feminist several years before her eyes were opened to the menstrual stigma and the silence that surrounds it and associated matters. On the topic of her own engagement and the work they do through Mensen, Hallencreutz stated that,

> "I'd had my feminist awakening a couple of years earlier but completely missed this whole menstruation aspect. That it's such a taboo and isn't seen as okay to talk about. The feeling of being gross and not fresh during menstruation didn't feel like my own but rather something other people had projected onto me. It's crazy that we don't talk about menstruation and that ignited a flame. […] I hope that people learn something new that gets them thinking and that they understand the enormous problems the menstrual taboo causes around the world." (Aquilonius, 2015, p.1)

To summarize, an important aspect of menstrual product destigmatization is by placing them on the agenda. This is done by talking about menstruation and menstrual products in arenas where decision-making is done, and it is important to do so in the 'right way.' This implies leveraging expertise and connections that have been established prior to that interaction. Because talking about that which

is stigmatized is counterintuitive, in the sense that the stigma dictates that the matter in question should not be discussed openly, it takes some pathos and courage to do so.

6.3.2.1. Addressing the Sustainable Development Goals and the 2030 Agenda

Just as in many industries, the Sustainable Development Goals (SDGs) have triggered a tangible response by organizations across sectors. This global policy and all the 17 goals it addresses are frequently used to frame matters as positive and important. The clearer the link between policy point and matter at hand, the more legitimacy is signaled. In spite of its comprehensive nature, the SDGs do not mention menstruation, which has received critique from researchers and activists engaged in the matter of menstrual equity. Had there been an explicit mentioning of menstrual health, the matter would have been more specifically raised on the agenda, which perhaps would have caused a greater shift toward investments and policy considerations to further menstrual equity and destigmatization. The Case for Her, an advocacy organization geared toward menstrual health and pleasure in sexual and reproductive health and rights, state that,

> "Although menstrual health has received attention in recent years from various national governments and civil society organisations, there remains a gap in a comprehensive agenda to address the daily needs of menstruating women and girls." (The Case For Her, 2017, p.3)

Menstruation has moved from being entirely neglected to the slight improvement of being mentioned in the peripheries of global and national policies. Dr. Venkatraman Chandra-Mouli, who works with Adolescent Sexual and Reproductive Health in the WHOs Department of Reproductive Health and Research, was interviewed for Essity's Hygiene and Health Report 2018-2019, stating that,

> "Over the last 20 years of his work on adolescent health, he has seen menstruation move from a non-issue to the fringes of the global health and development agendas. He believes that to bring out the institutional and social norm changes needed, menstruation has to be higher on both the global and national agendas." (Essity, 2019, p.16)

Nonetheless, the goals and their subpoints can be applied to concerns relating aspects such as good health and well-being (SDG 3), quality education (SDG 4), gender equality (SDG 5), clean water and sanitation (SDG 6) and partnerships for the goals (SDG 17). While the connection to the first four may be more obvious, the link to SDG 17 can be explained as,

> "Everyone needs to come together—governments, civil society, scientists, academia and the private sector to identifying gaps and emerging issues, to recommend corrective action. Comprehensive Menstrual Health education need to be tailored to local conditions, both the information and materials, to ensure they are relevant and reflect local needs." (The Case For Her, 2017, p.3)

The SDGs are frequently used to emphasize the importance of menstruation and menstrual products as a matter that needs addressing in order to further healthy societies and gender equality. Such efforts can be triggered by social movements and activists who employ a sustainable development agenda to the menstruation matter. Essity state in their Hygiene and Health Report on 2018-2019 that,

> "Over the last few years, however, we have witnessed a movement to break the stigma of menstruation. Women and men around the world are speaking up about menstruation and the needs periods present. These menstruation activists are paving the way for a future where menstruation is considered a normal bodily function and discussed openly. They show us that changing the way we deal with periods is necessary to achieve the Sustainable Development Goals of ensuring women equal access to sanitation (SDG 6.2) and empower women (SDG 5). When women's needs are taken into account, we build a society where women have the same opportunity to realize their basic human rights and close the global gender gap." (Essity, 2019, p.19)

The same is argued by entrepreneur, Louise Berg who argued that the matter of menstrual products was opened up with growing interest in feminism and sustainability and more specifically, the MeToo movement and the 2030 Agenda, respectively. Framing accordingly also facilitates support for her endeavor in the form of, for instance, financing. Berg stated that,

> "Thanks to the #MeToo movement and the 2030Agenda, my life has become significantly easier."

Further, the 2030 Agenda is another aspect of framing in terms of sustainability that is applied as a source for new innovation in the menstrual product field. The 2030 Agenda places focus on developing products according to not only access to suitable raw materials, but also with consideration to consumer health, user friendliness and affordability with global regard and the environment. This shifts focus from the embarrassment associated with stigmatized products toward a discussion about their sustainability. Louise Berg is working on developing such a product and stated that,

> "I place very high demands on all the researchers and product developers I work with. A fundamental requirement is that it needs to work in low-income areas because it is very common for manufacturers to compromise with quality and user friendliness aspects in developing countries' markets."

The 2030 Agenda and the sustainable development goals can be seen as an important aspect in raising menstrual products on the agenda, as a representation of framing in relation to concrete policies on the institutional level that are widely known, accepted, and considered positive and forward thinking across sectors. This type of framing is also done in the standardization process as an effective way to drive menstrual interests forward. Helene Edmark stated that,

> "As soon as there are project suggestions that can be tied to the SDGs, the decision to take that work further is immediately facilitated"

Considering menstrual products on the institutional level also affects sustainability in the menstrual product field on the organizational level as well. As previously mentioned, the SDGs are applied as a means to raise attention and gain support for new innovations, such as in the case of Louise Berg's product, Next Period. Berg stated that,

> "My work with Next Period checks off 14 of the criteria in Agenda 2030, namely all of them except numbers 13, 14, and 15. The more attention the 2030 Agenda gets, being able to say that I can check off 14 of them also makes my work easier."

Large, established, menstrual product manufacturers are also intent on framing their work according to the 2030 Agenda, which further drives the sustainability of menstrual products, aiding in their destigmatization. Senior Environmental Specialist, Ellen Riise, at Essity stated that,

> "We have a number of things we are proud of having done, such as in 2016 having started working toward the United Nations' SDGs […], where we focus on six out of the 17 that exist."

In summary, although menstruation and menstrual products are not explicitly mentioned in the SDGs, the matter can be easily connected to a number of the 17 goals. This connection can aid in bringing menstruation and menstrual products on the agenda and increase the attention toward it as an important matter to consider on the policy making level. This encourages important conversations about menstruation, menstrual products, and people's needs and difficulties connected to these, matters which have previously been silenced and neglected.

6.3.2.2. Framing according to innovation on the institutional level

Another type of policy that aids in raising menstrual products on the agenda is the innovation centered export policy set by the Swedish Government. If companies and other organizations are able to connect their business with this agenda, they are more likely to gain support from the government. Framing initiatives in terms of innovation becomes especially important when applying for grants from government funded agencies, which organizations such as SIS do frequently. Further, they tend to drive certain types of standardization projects more if they can be considered "strong Swedish areas," which are those where Sweden has greater interest such as the forestry industry or, coincidentally, the menstrual product field.

Such interests can further be framed as part of the Swedish brand and can include areas where Sweden's industry is strong but could also pertain to areas where Sweden has strong social values and is seen as being at the forefront by other countries, such as in welfare and the continuous spread of feminism and increasing gender equality. Specifically, Sweden's government has an expressed feminist trade policy (Government Offices of Sweden, 2019), which further supports the notion that holding a Swedish secretariat in the standardization of menstrual product is in line with Swedish interests and could be a reason that SIS continues to push that agenda. Furthermore, by framing the standardization of menstrual products as a wider interest in Swedish export policy, this creates a connection between a stigmatized matter and a matter that is viewed as important by powerful decision-makers in society. Edmark stated that,

> "The management team have not given any feedback but are very positive and interested, and everyone is excited for a Swedish secretariat, provided that Essity and other Swedish stakeholders take part. This is regarded as particularly important for the government since they have created an export strategy, which clearly states that Sweden should strive for taking Swedish leadership over standardization areas. As such, this is an important area and also a very 'hot' topic because of the increasing discussions on menstruation in the public sphere."

It is not up to standardization organizations to determine what it is that needs to be standardized; rather, that decision needs to be discussed among the relevant actors to prevent the development of standards that do not match the needs and wants of the industry. Nonetheless, innovation was seen as such an attractive label or frame by important actors to the standardization process that it was possible for SIS to leverage in order to gain financing for the early stages of the project. As previously discussed, standardization processes generally rely on the financing of participants; however, because only smaller companies without the resources to fund the entire project themselves showed interest initially, SIS had to find alternative ways to do so. This included applying for a research grant from an innovation funding organization, Vinnova, together with Louise Berg as well as applying for a governmental grant. Helene Edmark at SIS stated that,

> "If we did not have innovation and Vinnova, we would only have the export perspective and Essity. Now, we can actually connect that we can hopefully get Vinnova financing and an innovative company who want something with a new product. And then all of a sudden, we have another leg to stand on in this work."

This speaks to the dependence on large corporations to support standardization, which makes sense from the perspective that standardization is for and by industry members. It is also apparent, however, that small- and medium-sized enterprises rarely have the resources or power to drive such a project on their own. Edmark stated that,

> "Small- and mid-sized enterprises and innovative companies have problems when there are no standards to adhere to. The larger companies have their own tests that they think are good, and they are not dependent on anyone else unless some other country in the EU were to develop a standard because then there will be pressure on stakeholders to participate because then it will happen regardless."

Instead, SIS have gone through a lengthy process to try and find alternative ways to drive and finance the process when, realistically, they could have shut it down years ago, concluding that there simply is not enough interest among the most influential actors in the field. As time passed and the large actors were continuously hesitant to climb on board, SIS ran out of resources designated for the process and had to leverage money from other projects instead. This is uncommonly done and can be seen as an act of agency toward the cause of ensuring the safety of menstrual products. Finally, in the beginning of 2020, it was decided that the project would carry on but take a different turn. Because it was so difficult to gain participation and financing from the large corporations, SIS decided to standardize through the consumer interest branch of ISO, called COPOLCO.

6.4. Concluding remarks on framing

As discussed in this chapter, framing menstrual products as positive and important is considered one of the three driving mechanisms contributing to menstrual product destigmatization. The products are framed in terms of concepts that are already established as positive, interesting, important and desirable such as most prominently sustainability, innovation, and feminism.

On the individual level, a growing demand from users to consume less and more responsibly places pressure on companies to supply the market with products that affect the environment less, that appeal to customers in all segments with differing needs and income levels, and that are user friendly and kind to the body. These needs are increasingly triggering entrepreneurship and innovation in order to find new, creative, and sustainable solutions to a matter as old as human kind. In order to drive what is considered 'real' change, however, namely destigmatization on the institutional level, implies framing menstruation as a matter of gender equality and public health, thus making policy creation imperative.

7. Claiming Agency of Menstrual Products

In this final chapter of findings, I discuss the ways in which claiming agency of menstruation and menstrual products acts as a mechanism that drives destigmatization. Whether or not, as well as how people talk about menstruation and menstrual products, is frequently raised as one of the most important drivers of destigmatization. Claiming agency on a matter that has previously been silenced, ignored, and stereotyped is a most effective way to gain power and confidence, which both on the individual level as well as in relation to others aids in destigmatization. Traditionally, as discussed in the section on the history of the menstrual stigma, menstruation has been a concept defined by men, both in terms of its cultural meaning as well as practices that women should adhere to. Claiming agency can be seen as a direct reaction to this, where women take charge and decide what is considered normal, acceptable, and natural when it comes to menstruation. This is often done in communication with other women or menstruating people, where creating communities, communicating in a 'real' way about menstruation, the menstrual experience and menstrual products, as well as reconstructing associated symbols and attitudes, play defining roles in the destigmatization process.

7.1. Claiming agency on the individual level: Creating Communities

7.1.1. Sharing information between users

New medias for communication bring with them changed communication patterns. It is evident that social media creates new possibilities to communicate about menstrual products where forums for claiming agency of stigmatized matters fill a previous void.

Social media plays a growing role in modern day society, with one of its primary benefits being the efficient and cheap communication with others. As more users connect to various social media networks, we can also see increasing numbers of groups coming together, where individuals share some interest or quality that they see some benefit in talking to others about. One such aspect is the workings of female genitals, and all related aspects including menstruation, and hormones as well as potential associated medical conditions. In such groups, one can witness users seeking and providing mental support as well as personal experiences, tips, and advice. Moreover, what brings the greatest value to them is the notion that users can interact without risking destigmatization from those who do not associate with the concerned matters. This enables a safe space, whereas raising conversations about topics that individuals might never have been able to discuss in other settings, which in turn implies that these trigger reflections and possibly recognition in others, and one might not feel as alone with one's issues any longer.

Consequently, members learn about each other's bodies and experiences, which further increases their understanding of themselves through sharing such information. Access to this type of information sharing can further increase consumers' menstrual cycle literacy, make increasingly informed consumption choices, and exposure to new solutions or products to address their menstrual health needs. Taken together, these three matters can further be seen as enabling consumers to claim agency of their menstruating bodies and associated products, increasing their confidence regarding menstruation and menstrual product use, which aids in the destigmatization thereof.

Through social media, users have an increased ability and tendency to share information about menstruation and menstrual products through, for instance,

Facebook groups. An example of a Facebook group where open, destigmatized, and destigmatizing conversations about menstruation are the norm is a Swedish group called Fittlife. The name is a play on the word 'fitlife,' commonly used to describe activities posted on social media that may be inspirational toward a healthy lifestyle. Adding a second 't' makes the first part a Swedish word for the vagina, insinuating that the group is meant to discuss genital health among those with vaginas. The group serves a number of purposes including mental support, sharing experiences and tips, recommendations, etc. The fundamental reason for the need of such a group is the high percentage of people with vaginas who have genital issues; the group administration cites a number of 75 percent,[3] in combination with the general lack of knowledge about genital and menstrual health among women as well as in healthcare. The administrators of Fittlife believe and argue that the most important step in increasing genital health, generally, is,

> "talking about it in an open and natural way."

In other words, talking about menstruation without any stigmatization (Fittlife, 2020). These groups are unveiling matters that have previously been silenced, due to the notion that men's bodies are seen as the norm, and women's uterus and menstrual cycle are not discussed to sufficiently enough. For this reason, online groups on social media where stigmatization is forbidden, and some level of anonymity is accessible if desired, are found to be important for menstruating people to claim agency of their menstruation experience and the subsequent destigmatization of menstruation and menstrual products. Louise Berg stated that,

> "It is completely mad that there is so much we don't know about the female genitals compared to the male genitals, but no, we have an entire cycle and some extra organs that affect the entire body, every month, and things can go wrong. But we have put that in a closet and said 'no, it doesn't exist!' and that is another aspect of the taboo that groups like Fittlife all of a sudden allow us to find information on."

[3] This number is unreferenced, but there are many references to the same number regarding the number of fertile women who at some point have a genital yeast infection (Rylander, 2015)

Admittedly, this quote could be considered as pertaining to education and knowledge. I have chosen to categorize it under claiming agency, however, because of social media's ability to create community and enable an open and supportive conversation where people are free from judgement and can discuss anything and everything, regardless of how embarrassing or shameful the topic would be in public or even face to face. Furthermore, this might be particularly important for those who do have limited or no access to social contexts where menstruation can be discussed openly, because observing the mental support and advice being spread among members can have a similar effect, without actually engaging in the conversation by writing a post or comment.

Moreover, although Berg was blatantly aware of the stigma and the widespread lack of knowledge and talk about menstruation, it became even more clear when she started working with menstruation and started talking to others about it. In other words, it is difficult to know about menstruation, unless you talk to others about their experiences and reflect on your own. Both in terms of understanding your own experiences as well as knowing what is normal and what is not. Because it is socially unacceptable to some degree to discuss menstruation in most circumstances, and because people generally have very little knowledge about it, breaking the silence and starting to talk about it is not always easy. Berg stated that,

> "I think: why aren't girls talking about it? But I am enlightened about it, since I work with it every day, but I understand that for someone who has never talked about it, that it is really difficult for that person because how do you talk about something you don't know anything about?"

Furthermore, creating communities helps in claiming agency and subsequent destigmatization through enabling consumers to create their own ways of talking about menstruation and related topics in a destigmatized way. This gives users greater confidence, in accordance with what Mirabito et al. (2016) argue and empowers them to make informed choices about their menstrual product consumption. Berg stated that,

> "The views on health and environment, and the fact that you can take power over the products you're using and say, 'what is it, actually, that I am using?' You take power as a consumer and recommend each other to find out about and start using something that is actually good for you."

In summary, creating communities enables information sharing between users, which contributes to claiming agency of the menstrual experience by establishing a destigmatized conversation spreading mental support and experiential knowledge. A forum where menstruation and menstrual products can be discussed in a destigmatized way might further be especially valuable for those who have less access to social settings where the matter can be discussed openly. By being a member of such a group, an individual might experience support and destigmatization without actually engaging themselves, but also by seeing others supporting each other and knowing that they would gain the same support if they were to engage by writing a post or commenting.

7.1.2. Being exposed to new solutions

Another way that creating communities through social media contributes to claiming agency and destigmatization of menstrual products is through enlightening one another about different types of menstrual product solutions, which becomes a form of word of keyboard marketing. The menstrual cup was invented in the end of the nineteenth century but because of lack of means, including financial means and viable channels to reach target audiences, the products never gained traction until now. Further, the menstrual cup per se can be seen as a contributor to claiming agency because of how it is used, but it's spread would have been impossible without social media and the willingness from consumers' side to share information and experiences with using it. Berg stated that,

> "I think [the destigmatization] is caused by social media amongst other things. The menstrual cup came at the end of the eighteen hundreds or something, but why it hasn't taken up space is because others have had more money, but thanks to social media, private women recommend them… So, I think it's a lot about that women or those who menstruate share information with each other and that is why the menstrual cup has boomed because they haven't gained more revenue from marketing from the beginning, rather it was through one's friends you found out about it. And that was pretty much impossible before the internet."

Perby concurred, emphasizing that the first and foremost key to their success at MonthlyCup was their marketing strategy, which built on online presence on social media and through word of keyboard.

> "When I started working with menstrual cups, very few people knew what they were; but today, we have succeeded so well with our marketing that I would like to claim that most people know what a menstrual cup is. Then, there weren't many menstrual cups among retailers but today, we have over 1400 stores [selling our cups]."

Recommendations through word of keyboard and social media influencers, including bloggers, are the main reasons for the increased use of menstrual cups and the related destigmatization of menstruation and menstrual products. Gynecologist, Christina Lloyd also recognized the increasing role of social media when it comes to what affects consumption choices, stating that,

> "It's also interesting to see that we are going back to more traditional ways, where the menstrual cup is becoming more popular again, which really is the most comfortable for women. And a lot is happening there, I think many girls and bloggers can have large influence there."

An area where the culture of silence is clearly shifting through creating communities is when it comes to discussing menstrual cups where users are increasingly willing to discuss menstrual cups, their use and perks in new, blatantly open ways. Lisa Perby, co-founder and CEO at MonthlyCup, pointed out that,

> "We can see that people are very likely to tell others about [using a menstrual cup]. It is a rather controversial topic to write about on Facebook, still people do it. But that wouldn't be the case if it were tampons, because this is so much better, to the extent that it is revolutionizing, which means people are much more likely to share with their group of friends and get them to start using menstrual cups as well."

It is unclear whether users are really talking more about menstrual cups than tampons or pads; perhaps, there may be a large increase in conversations about them in recent years, but the real difference seems to be the *way* in which they are discussed. Using a menstrual cup implies a more active role and claiming agency when it comes to dealing with one's menstruation. This is not least due to the rather advanced techniques required for using menstrual cups, as opposed to tampons or pads. On the other hand, the increased spread of menstrual cups implies that many people are trying something new and talking about something new with regard to menstruation, and in new ways, conversations that tampons

and pads are not triggering. Furthermore, it is interesting that the emotions associated with menstrual products are shifting from shame, disgrace, silencing and disgust toward acceptance, openness and even coolness, pride, and courage. Louise Berg, for instance, explained how people talk differently in public about menstruation and menstrual cups now compared to when she started working with such matters in 2015 because their attitudes have shifted. Berg stated that,

> "What is accepted and what isn't in public spaces? People often want to be a bit brave, before it was just gross but now you want to be a bit modern, brave and edgy and dare to talk about these topics."

Manufacturers argue that menstruators go through phases where they have different needs for various products in accordance with phases they are going through in life. It is primarily at the point of entering a new phase where users are likely to change their behavior and are open to trying a new type of menstrual product. This has consequences both for users as well as manufacturers. If this holds true, it would imply that the more communication about different types of products that a menstruator receives at the intersection of phases, the more informed they can be in their decision-making. However, once consumers have established a routine that works well, they are unlikely to change their preferences, since this implies a social risk that products might fail and expose them to embarrassment and shame in the worst case and in the best case an annoying mess to deal with. Moscherosch thoroughly explained his theory,

> "So, women tend to – when they start menstruating, and I'm generalizing a little bit here, it's not true for everybody, but the general trend is that women, when they start menstruating, they get advice from, for example, their mother, their sister or their friends, from somebody they start developing a menstrual management; they develop a routine, 'oh on the first day I use a heavy napkin and then later I'm going to switch to a thin napkin and then I use a tampon' or whatever. Whatever it is, women develop a system of how to manage their own menstrual protection. There are very few times in the life stages of women where they start changing. So, for example, first time they give birth, after birth the situation changes completely, they might have to adjust their menstrual routine because their body has changed, and the flow rate has changed. Or girls that leave home and go to college and live-in dorms or whatever; they get exposed to other products that they had probably not been exposed to at home. So, there are certain times in the lives of women where the situation changes and that opens up the possibility to change the routine,

> if they're willing to try new products in a limited way. I mean not go all crazy – high risk, but generally speaking, if women have figured out how to deal with their menstruation, they are not particularly interested in changing that, because every change bears the risk that it doesn't work."

A similar notion is argued by Solgun Drevik who stated that,

> "In different phases of one's life, you use different products. When you're young you say, 'menstruation can't interrupt my life.' Around childbirth, you say 'I should probably not be sticking a bunch of things in my body because of hormonal fluctuations. When you're done with the whole childbirth ordeal, you go back to tampons. No one starts using tampons when they're 'old.' People are more likely to try new things up until they're 25, but it's very much emotionally driven."

It is noteworthy that manufacturers are fully aware and emphasize that consumers are cautious of changing their habitual menstrual product use for fear of product failure and related exposure as menstruating and consequential stigmatization. They also argue that women might need different products depending on what life phase they are going through. Nevertheless, the same manufacturers tend to develop products that are homogeneous and the types of products that address those needs are very few, leaving large segments and many women and other menstruators without access to comfortable, user-friendly, and affordable menstrual products. I argue that with more types of products and solutions on the market, however, these aspects could be alleviated, contributing to greater comfort and destigmatization of menstruation and menstrual products.

In summary, creating communities enables users to find and spread information about new products and solutions through word of keyboard marketing, which is often done by consumers and manufacturers alike. This increases knowledge and access to different products and solutions that users might not otherwise have been exposed to, and thus theoretically increases their ability to find solutions to suit their needs better than before. Greater access to better solutions can aid in destigmatization since it increases the likelihood that consumers will find solutions that make them more comfortable when menstruating, which should increase their agency and confidence in association with menstruation, and greater confidence among those experiencing a stigma contributes to destigmatization.

7.1.3. Growing menstrual cycle literacy

As previously discussed, sharing knowledge between users is a way to claim agency by increasing their understanding of other's experiences, which further increases their understanding of their own menstruation experience, since they gain a context and point of reference to compare themselves with. As stated in Essity's report, Personal Well-Being – Key to Public Progress, understanding one's own body and having open conversations in both public and private spheres contribute to women's and girls' ability to claim agency and empowerment,

> "Menstruation is a powerful entry point for gender equality, empowering girls and women to understand their bodies and speak up about their needs. […] To create a society where women's hygiene and health needs are taken into account encompasses a combination of public policy, training and information, and courageous conversations in both the public and private spheres." (Essity, 2019, p.29)

Because menstruation and menstrual products are generally not discussed openly, people tend not to talk to others about their experiences, which limits an individual's knowledge to their own experiences. This realization is something most people who work with matters concerning menstruation go through including myself, and Louise Berg, who stated that,

> "I often say that when I started filming my menstruation documentary, it was like this: I thought I knew everything because I had been menstruating for 20 years, so of course, I knew everything. Then, I started working with it and established that I knew nothing. But it is hard to know that when you think you know everything. People don't like to think that they've experienced something for 20 years and still know nothing about it."

The importance of learning about one's own menstruation and menstrual product use in relation to others' menstruation was pointed out by former product developer at SCA (now Essity), Solgun Drevik, as well. Without that knowledge, consumers tend to choose products labeled 'normal' because other labels can be more stigmatizing even though these might suit their needs better, especially the large ones. Drevik stated that,

> "We had a lot of discussions about the size of tampons because everyone wanted to be normal. […] There are very few people who know how much they bleed and who know what tampon size they need; that's a whole other level of knowledge."

Another aspect that signifies a gap in the knowledge about menstrual products is that tampon users often think they should use the same size tampons throughout their menstruation because they think that the size which they should use is dependent on the size of their vagina. In reality, users are supposed to use the size that corresponds to how much they bleed that particular day and using the wrong size can imply risks. Specifically, using a tampon that is too absorbent, which is judged by the fact that it is not filled with menstruation at the point of removal, can, for instance, cause abrasions in the mucous membranes, which in turn can lead to a heightened receptivity to disease and infection. Drevik argued that,

> "It is a whole science when it comes to tampons, and knowing that, no, you should not be using the same size throughout your period, absolutely not."

Furthermore, without talking to others about how much you, yourself, and they menstruate, very few people know whether they have a heavy or light flow, since they have nothing to compare it to. This can have consequences as basic as consumers using suboptimal menstrual products, but it can also lead to medical consequences that become more serious due, solely, to the lack of knowledge about one's own menstrual flow. After presenting my research project at Essity, one participant pointed out during the subsequent questions and answers session that,

> "There are those that are heavy bleeders too, who get anemia in the end and economic consequences because they are too tired to work, etc. A consequence of the fact that it is not discussed very much is that very few people know that they are heavy bleeders and it's very difficult when you ask women how much they bleed because they have very different opinions. That's also something that's not given much attention."

Another respondent who argues this point is entrepreneur, Daniella Peri, co-founder at Yoppie. Their business model provides consumers with the ability to customize the package of menstrual products, depending on how much they bleed and for how long, which they order online. This implies that habits, such as using the same tampon size throughout one's period, causing issues due to the use of

higher levels of absorption than needed, are hopefully broken. In the UK and North America, this type of business concept has proven successful by brands such as Flo, Cora Life, LOLA, and Blume. Hoffman stated that,

> "The third and final pillar of the business model is the mission of educating about menstruation in cultures where women are discriminated against while menstruating."

Learning about one's body does not necessarily concern learning about others' bodies, of course, but it takes an open mind and conversation about genitals and menstruation to be able to learn about how one can develop one's knowledge about one's body. This is primarily because the female body including sexuality and menstruation have traditionally not been seen as matters to explore or cultivate. Nevertheless, body literacy is increasingly raised as a matter of importance, especially for young women. Entrepreneur, Lisa Perby, for instance, concurred by stating that,

> "I want women to be able to make an informed choice, and I have been to the Swedish National School Agency to discuss this because in the sexual education you talk more about sexual consent than the physical [aspects of menstruation]. It's great that you talk about consent, but we have to talk about everything so that there's no shame surrounding menstruation."

To summarize, by communicating more openly about menstruation, for instance, through creating communities, people are able to share their experiences of menstruation in a destigmatized setting. By taking control of the conversation and the sharing of information about experiences, people are able to learn more about their own experience of menstruating because they gain a point of reference against which they can compare. This is a form of claiming agency, which contributes to breaking negative cycles such as menstruators who are unaware of their heavy flows for which they might need medical attention or extreme levels of pain, which might be a symptom of endometriosis. By understanding others' experiences, these individuals might realize that their condition needs attention and that they are deserving of that attention, rather than being silenced and told to manage on their own. This will likely contribute to increasing the conversation about menstruation and menstrual products, both among consumers as well as healthcare workers who are confronted with patients seeking help with such

matters. By talking more and by providing those experiencing increased issues with their menstruation with help to mitigate it, their discomfort will hopefully be reduced, and their confidence increased, which will likely contribute to their experience of menstruation as less stigmatized.

7.2. Claiming agency on the organizational level: 'Real' communication between manufacturers and users

7.2.1. Increasing communication between manufacturers and users through social media

Social media enables increased communication not only among menstrual product users, but also between users and manufacturers. This implies that manufacturers can, in a more cost-efficient way, reach out to their customers with both support as well as marketing new potential solutions and learning about social trends and preferences that consumers express online. If manufacturers have more and easier access to information about users, it is also likely that they will be able to deliver products that better cater to their needs. Further, social media enables targeting the desired consumer segments through the use of for instance hashtags, which to an extent, at least in theory, eliminates potential stigmatizers from receiving and complaining about destigmatizing communication. As it turns out, however, there are certain barriers in place that prohibit all too destigmatized communication on social media, which will be further discussed below.

Another way social media can aid in destigmatization is by increasing manufacturers' ability to communicate with their users in a more targeted way. Through social media, manufacturers are able to more efficiently reach out to their target audience, both with regard to financial efficiency, as it is generally cheaper than, for instance, television campaigns, and in terms of getting straight to people's devices on whatever platform they are active. This can happen via, for example, targeted advertising and content analysis through cookies. Lisa Perby argued that one of their main success factors is their use of social media marketing, which has enabled them to reach a customer base much more efficiently from a financial aspect than any other type of solution could provide. She stated that,

> "We are the largest manufacturers of cups in Sweden, today; it has completely exploded. I think it's largely dependent on the fact that we've succeeded with our marketing through social media."

Perby further argued that their success even encouraged so many others to copy their business model, which resulted in their advertisements becoming much more expensive. Whether this is true or whether there are larger influences like advertisements on social media becoming more costly due to increased demand in targeted marketing through that specific channel in general is unclear. Perby stated that,

> "We became fantastically good at marketing – I'm a bit tired of others copy catting us because then our advertisements become very expensive. We have had to cut down a lot on it now because they have changed their algorithm."

Social media channels undeniably provide popular means to communicate with one's consumers and without online presence, large companies that deal with business to consumer are likely missing an opportunity. Essity makes use of social media in a number of ways, and one of the most telling numbers is their reach to 28 million consumers with their Essentials Initiative. The more efficiently a company can reach a greater number of people with their destigmatizing communication, the greater the potential to destigmatize the effects. Communications Director for the Nordic region, Sofia Hallberg, stated that,

> "The way we work with these questions that are under the umbrella name Essentials Initiative is to a great extent on social media. Last year [2019], we reached 28 million people through this type of communicative venture."

Companies make use of social media in connection with their marketing campaigns to spread their destigmatizing messages as far and wide as possible. Essity, for example, used social media to spread the word about their menstrual challenge campaign to break the silence on menstruation in sports. The campaign ran in the Nordic countries of Sweden, Denmark, Finland, and Norway. In each country, a famous role model athlete, alternatively team, was employed to champion the campaign. It started with the Swedish national team player Lotta Schelin who played for Rosengård at the time. This way the message is not only spread through Essity's own social media accounts, but potentially also through the sports champions' accounts. The more accounts that share the campaign

related posts, the greater the follower bases that are reached and the greater the chance of more re-posts. The same model was subsequently applied in the other Nordic countries. Jenny Smith described that,

> "It was knowledge around menstruation that we raised through this campaign, and in Sweden we got help from Lotta Schelin who jumped onto the initiative together with us because she, herself, had been a victim of this throughout her soccer career when she was younger. She had so many problems with menstrual cramps and migraines and such. So, she said, 'of course I'll do it' and that was fantastic, and she really was really passionate about this question. So, it was a challenge that started in Rosengård where they then sent it on to other clubs in Sweden. Then, we did it in a similar way in the other Nordic countries."

The campaign was well received and had reached around 375 teams in Sweden in March 2020. In fact, it was so successful that Essity decided to take it further and are currently planning the next steps. According to Jenny Smith, their most successful campaign so far, #BloodNormal, is still today, four years later frequently referred to through hashtags on, for instance, Twitter. Smith stated that,

> "We have received a fantastic number of nice reactions to this and it's almost the campaign that's most searched for and that you still find hashtags on Twitter referring to the video. So, it has had an impression on many people."

What is not as discussed, however, is that behind every process of launching a new destigmatizing campaign, there are countless reviews involved, not least by TV broadcasting stations, as discussed above, but also by social media companies. Their Viva La Vulva campaign contains halved grapefruits that resemble vulvae singing along to the song in the background. These fruits were considered too offensive to be displayed by Instagram and Facebook. As a result, Essity were forced to remove those scenes from the advertisement and resubmit it for review. This same process is applied to every campaign launched by Essity. Hence, rules and regulations about what is considered appropriate by media companies who oversee the content that is posted in their channels can be regarded as barriers to destigmatization. Jenny Smith argued sarcastically,

> "What was another lovely thing was that we discovered that there are so many limitations as to what you can do on Facebook and Instagram. It has been blocked

> and a lot of this material has been forbidden. So, that's something that we have pushed really hard, and it seems to be – well, the amount of work we have put into it and still there's so much of the material and the campaign that we can't actually show on Facebook without it being stopped. That's how it is. That's the world we live in. We have sat every campaign, every time we release a campaign, we have to have acceptance in every country, but a lot of it is blocked. The fruits, for example, we can't show. But we work with breaking taboos. We carry on. So that's what we spend our time on."

Communication through social media also enables more accessible direct contact, than, for instance, telephone support, between manufacturers and users, which means that neither party needs to worry about their exchange reaching a stigmatizing audience. This further allows a more relaxed, to the point, and normalized conversation.

An imperative aspect of Perby and her MonthlyCup's success is their customer support, which provides consumers with knowledge, education and mental support. In fact, many times users of menstrual cups that are not produced by MonthlyCup contact them for help, which they are then provided. They see it as important to provide help where help is needed. Even though those asking for it may not be using their products currently, Perby argued that they might switch to MonthlyCup in the future, if they have a good experience.

Perby argued that it is important for menstrual cup manufacturers to be accessible and present to answer questions, but she recalled how communication with users sometimes implied first hand confrontation with those afraid of stigmatization. It is not always easy to deal with these types of conversations, according to Perby, but they try their best to convince these users of the normality and naturalness of whatever issue they have with menstruating. Perby stated that,

> "We try to be very present and answer any questions, but it is difficult to respond to people who think it's disgusting. There has been discussions about menstruation smelling badly when it's in tampons and pads, but menstruation doesn't smell more than iron and that's something you notice when you use a menstrual cup."

In summary, increased communication between manufacturers and consumers facilitates destigmatization in three ways. Firstly, it enables manufacturers to target consumers with their destigmatizing messages and advertisements for products without exposing consumers to potential stigmatizers when receiving those

messages. Secondly, social media enables the spread of destigmatizing efforts and messages to as many people as possible in an efficient and cost-effective way. A related barrier that needs to be overcome, however, is gatekeepers such as broadcasting stations and social media companies who might want to censor destigmatizing content because they deem it as being too provocative of current stigmatizing norms. Finally, manufacturers can provide consumers with customer support efficiently through social media. This likely provides a greater sense of comfort and support when trying new products or when experiencing difficulties or issues when doing so, knowing there is someone to contact that can and will help.

7.2.2. Visibilizing menstruation and menstrual products

Historically, actual menstruation and menstrual products have, to a great extent, been left out of public conversations about the very same matters. Advertisements, in particular, have largely represented menstruating women as romanticized worry-free and dressed in white, and when products are shown it has been in a "sterile" lab-like milieu using blue blood to demonstrate absorption. Currently, however, manufacturers are increasingly committing to visibilizing menstruation and a more realistic experience of menstruating and using menstrual products. This can be seen as a reaction to the culture of silence, which dictates that products and the condition of menstruating should be kept hidden and silent.

The fact that most of public discourse is represented by advertisements drives Essity in their communication strategy. This strategy is distinctly geared at destigmatization, as their consumer research, or insights, found that a large majority of the respondents in a study on attitudes about menstrual product communication found menstruation to be a normal matter that strangely enough was rarely portrayed in culture and media. In other words, menstrual product communication oftentimes has paid much respect to those who find it a matter not to be discussed openly through, for instance, romanticizing. It has catered limitedly, however, to those who see menstruation as something to be normalized, who, as it turns out, were a majority of the respondents in Essity's study. Jenny Smith stated that,

> "So, we looked at this, globally, and saw that 'oh God, almost 70 percent of everyone between 18 and 34 say that 'this is something completely normal, but

> why isn't it visible anywhere in culture or media?' So, you miss these characters who are positive that menstruate, instead of only those who talk about menstruation in a negative sense. So, this was something we also wanted to lift the lid on a little. So, we made this fantastic campaign called #BloodNormal."

It is noteworthy that those who choose to respond to a study about menstrual product communication are likely to be prone to thinking about, discussing, and reflecting over the types of messages that they signal, which might also imply that they are less likely to stigmatize menstruation and menstrual products. Such views are likely to skew the responses toward a destigmatization-seeking agenda, although the study is statistically significant. On the other hand, Essity frequently meet harsh critique against their advertisements, as discussed in the section on framing menstruation as normal or important. This was not seen as much of an issue at Essity, however. They consider their communication as controversial and challenging of dominant notions by visibilizing, which inevitably triggers strong reactions, in their case both negative and positive. They further argued along the lines of 'all PR is good PR,' signifying that getting people to talk about their campaigns implies that people are talking about not only their products, necessarily, but also about menstruation, which in a sense starts a conversation that might not have been had otherwise. Whether a stigmatizing conversation is better than silence can be discussed, but at least there is a possibility that someone might challenge stigmatizing statements if they are uttered out loud rather than internalized in silence. Jenny Smith at Essity stated that,

> "there are always a lot of people who react strongly against it and that is what signifies good communication. But that's what is so fun about working with this type of communication because you start something in society and there will always be people who don't think it's good. But, we believe that this is the right way – and to start talking about it and showing things, etc. […] It's just as fascinating every time how much people can get engaged. You think 'isn't there anything better you can get engaged in than this? For world peace?' I think. It's a bit patriarchal out there."

Furthermore, there are two main trends, or phases, identifiable in menstrual product marketing. The traditional advertisement has been thoroughly analyzed in previous research and often signifies the romanticizing of menstruation and menstrual products where the product is presented as a silver bullet to experiencing a carefree and happy period, and not be afraid of shameful leakage

by using the best and freshest products. There were a number of issues with such communication, including that the messages were often disconnected from the real-life experience of menstruating. For instance, regardless of how leak proof and comfortable any product is, menstruation often involves physical symptoms that can be difficult to ignore such as bloating, fatigue, and not least pain, whether in the uterus, back, legs, head, or breasts.

Such disconnect between reality and how advertisements portray menstruation is problematic, since the notion of naturalness is so elevated in society today, whereas the natural experience of menstruation has not been visibilized in that notion. Instead, the messages sent to menstruators through advertisements are that you should love menstruating because it is natural, and products will make you feel just as normal. When advertisements signal to menstruators that they should be happy and carefree during their menstruation, they simultaneously signal that it is wrong for them to feel negative emotions such as discomfort, fatigue, or have mood swings and pain, which are all natural and normal. Former product developer, Solgun Drevik, stated that,

> "Society builds on everything being so damn natural, so as soon as you feel that it's tough to menstruate, you're not natural."

This type of message tries to emphasize the naturalness of menstruation to a degree where it has crossed a line of what is really understood as natural. These messages signal that menstruation is natural and should be normalized in the sense that the symptoms and experience of menstruation are essentially ignored, instead of visibilizing, normalizing, and creating acceptance for the experience of menstruating. Drevik continued, stating that,

> "Something that is difficult for especially young women is when you see a commercial that says 'oh, you feel so unconstrained, and you feel just as normal as usual,' and that is the last thing a girl wants to hear because she wants an excuse to feel sorry for herself, crawl into a warm, cozy blanket and just cuddle because very many people feel their mood swings and cramps and so on, and it should be at least as normal that they are allowed to do that. […] Many people feel that 'no I do not feel like usual just because I am wearing that pad. I still think this is tough.' […] It has gone overboard, all commercials say that you feel so happy and beautiful and bla bla bla, and that's not how I feel. So then, that's wrong."

This further stigmatizes the experience of menstruating, and one way to rectify such communication is to listen to consumers about their actual experiences of menstruating. It is also important for society to learn to accept that even though menstruation is natural, it is also natural to feel negative emotions and pain in association with it. Drevik explained that there has been a large focus on customers' emotions, especially through advertisements, often through visibilizing the reality of menstruating. She stated that,

> "It should feel right when using our products. The solution should give a sense of safety. Menstruation is not the most enjoyable thing on earth, but it is important not to neglect that this is the case by speaking about it as though everything is as usual."

This type of message is the norm and was the norm when Drevik was working at SCA (now Essity) as well. What is interesting, however, is that she expresses values that seem to be much more progressive than those that were signaled to consumers through the company's advertisements during her time there. This may pertain to the notion that working with menstrual products requires complete destigmatization and openness, whereas society at large was still behind.

It was not until 2016 that Essity's communication started really challenging the stigma when they left the standard recipe for menstrual product marketing behind and opened up a whole new playing field of destigmatizing communication. This new kind of marketing, which visibilizes the real experiences of menstruating, is the second trend identifiable in menstrual product marketing. Jenny Smith at Essity stated that,

> "We are actually a taboo breaking brand in what we do, and when you look at where that journey began and what we've been doing the past four years because that was really when it all began, in 2016, with going from being a bit more, like all brands were before. It was cheerful girls who walked through the city in white jeans, swinging their handbags and all that, which we've all seen. But there was a huge breakthrough from us as a company somewhere around 2015 – 2016 where we wanted to take a new route."

Exactly what it was that triggered this change in the company is unclear, and respondents at Essity do not seem to place much importance on what that trigger was. Instead, they describe it as becoming more aware about the stigma on

menstrual products and that there are ways that they can help women and potentially increase gender equality through their marketing. Jenny Smith stated that,

> "I can't say exactly what triggered it, but of course it's that we became more aware that there are so many stigmas, so many taboos out there and that we can actually make a difference because there are so many other companies that do a lot for women's equality, but we have placed focus here [on the pelvic region of the body] and that's where we can do something because it's still very much uncharted territory, or at least it was at that point in time. Today, there are a lot of actors doing it too, but we have been one of the first who have contributed, globally, I think, to lifting some of the lids out there."

The reasons behind the shift in communications strategy toward destigmatization can be many but are only discussed among my respondents in terms of gender equality initiatives. From an outside perspective, however, it is likely that they have realized that they might benefit from destigmatization in their sales volume. Whether destigmatization on a wide societal scale implies that more menstrual products are sold is possible, but it is also likely that being a first mover in the industry to adjust communication toward a more feminist and destigmatizing agenda would lead to an upturn in sales numbers. Not least from consumers who would rather be associated with a destigmatizing and groundbreaking brand than one that adheres to traditional norms of freshness and romanticizing of menstruation. This is something that Jenny Smith at Essity pointed out as one of their selling points as to why consumers should choose their products rather than their competitors.' She stated that,

> "What should make you choose us as a brand, which really is the purpose of having a brand, is that we have something else, beyond that we have products we do something out there in society. And because we work with such an important question as menstruation and girls and genitals, we have sort of started this journey by being an actor out there, breaking the stigmas and taboos that are out there."

It might also be important to remember that at the time of launching Essity, there were strong political and social winds blowing feminist matters onto the agenda such as #MeToo and increased talk about menstruation in the public sphere in Sweden, as discussed in the section on social movements and activism, above. These matters likely also contributed to Essity, making the decision to go rogue

with their communication and more or less aggressively try to do what they can to break the menstrual stigma.

Whether or not it is something they discuss openly within Essity, the new communication strategy can also be intuitively connected to the structural change that SCA went through, as Essity was split from SCA in 2017. Before the split, in September of 2016, a new communications director for the Nordic region was hired to build a new company identity with a set of core values, communications strategy, and even establish a new name. This person is Sofia Hallberg, who described the experience fondly:

> "To be a part of a company splitting, a large, listed company splitting and you have to find a new name, set a whole new platform. What do we stand for? Who are we? How do we want to be interpreted? What type of employees do we want to attract? To have that opportunity to start from zero and go through everything, everything, everything, and build a whole new identity, because that's actually what we've done around this. We can just start with our name, Essity. It's short for essentials and necessities, which are exactly what we stand for: necessities for the everyday."

Essity have a wall they have decorated with paraphernalia associated with their various brands, campaigns, and partnerships that they associate with what they call the Essentials Initiative. It seemed as though Hallberg, describing the wall, was alluding to the symbolic heart of the organization. Whether successfully or not, its existence and placement aimed at reminding anyone who might pass what their core values are, in a visual and appealing display. Hallberg stated that,

> "When you came in, did you see this nice wall that we have here? It's dedicated to this Essentials Initiative; that's how important we feel it is. It's really a part of our identity. And what does it stand for and what is it we do? Well, it's very much about us working with increasing well-being by breaking taboos, or barriers that hinder well-being; and we work with insights about this, and we work with education."

What became clear when studying Essity's campaigns was that the company often act at the forefront of destigmatization and push the limits of what is socially acceptable, meaning they benefit from certain first mover advantages including an air of progressiveness in comparison to their competitors. There are, however, barriers associated with being such an early mover as well. For example, if they try

to release campaigns that are regarded as too controversial, for instance, by national broadcasting agencies, they will be prevented from airing.

The second trend or phase of marketing became noticeable a few years ago, when companies, with Essity taking the lead, started pursuing more feminist messages in their communication. For instance, Essity's #BloodNormal advertisement campaign can be seen as norm breaking, in the sense that it challenges the traditional practices of visibilizing menstruation and menstrual products in media. Essity signals through the campaign that they do not only promote the destigmatization of menstruation but also take the lead in doing so by displaying the alternate reality of what could be if destigmatization continues. This is represented by the slogan 'periods are normal, showing them should be too' (Bodyform, 2020). On their website, they elaborate by stating that,

> "We show true-to-life situations; we show blood; we show the world that the only way to kill stigma is to make the invisible visible. By bringing blood out of the dark, onto our screens and into the conversation we're paving a positive path for women of the future. After all, shouldn't period-talk be as normal as periods themselves?" (Bodyform, 2020)

It is noteworthy that without the destigmatization of menstruation and menstrual products underway, such an advertisement would not be aired on television anywhere in the world. In order to ensure that this would be possible, as mentioned above, Essity conducted an online market analysis that included 10,017 women and men in the UK, France, Netherlands, Sweden, Russia, Mexico, Argentina, South Africa, China, and Malaysia where 74% responded that they thought menstruation should be portrayed more realistically in media and advertisements. And while Essity probably stands for one of the main pivotal events of menstrual product destigmatization induced by manufacturers, globally the #BloodNormal campaign was launched at the same time as the #MeToo movement was charging ahead at full speed (Wolfe, 2017). The timing of the campaign and the #MeToo movement was rather fortunate for Essity, as the thematic overlap of feministic values most likely reinforced the traction of the campaign.

While they may seem proud in many respects over the destigmatizing communication initiatives that they take at Essity, they do not hesitate to give credit to other companies, which they consider forerunners in the business of

communication that promote gender equality messages. They point out for instance Dove's Campaign for Real Beauty, which they launched as early as 2004 where dominant beauty ideals of slim Western-looking women are challenged, and diversity is celebrated. Essity also refer to their largest competitor, Always, as another company that communicates in destigmatizing ways through, for instance, their campaign Always Like a Girl, which they rolled out in 2014 and challenges dominant notions of girls' capacity to perform in sports, especially post-puberty and thus post menarche. Smith stated that,

> "Then, there are a fantastic number of other brands that do good things for women's bodies, like Dove who raise other types of bodies in their communication and advertisements; Always, our own competitor, has done lots of good things with the Always Like a Girl – especially, this thing with giving girls confidence around not doing what is expected of you as a girl in that you should giggle and barely be able to run just because you've turned 11-12 years old. Instead, you should just continue being who you are, and you can run in the school yard and play soccer just like the boys. That campaign was fantastic a couple of years ago."

An important aspect of destigmatizing efforts is that they can be directly associated with the products or services that are offered by the given company. Consumers need to be able to easily identify the connection between the destigmatizing messages and the core business of the company in order for the efforts to be interpreted as legitimate. This further corresponds to the critique raised by Drevik earlier in this section, pointing out that traditional marketing efforts have lacked any real connection between how women experience menstruation. Jenny Smith at Essity stated that,

> "So, we have said that to get some sort of better gender equality and more focus on this society, we should act on that which relates to the genitals because that's where we make products and that's where we are some sort of, not experts, but people who work with those types of questions. […] So, there are many out there that do something, but we have said that we should stay connected down here to the genitals. So, the aim of this brand is to try to give more confidence around questions that relate to how women feel about their genitals, everything that is associated with that."

The three main campaigns that Essity have launched since adopting their new communication strategy are firstly, #BloodNormal, which was primarily discussed

in the section on changing attitudes and symbols under social movements and activism. Secondly, #MensUtmaningen (the menstrual challenge), which was aimed at breaking the silence around menstruation in sports, as discussed in the section on breaking the silence under education and knowledge. Thirdly, and most recently, Essity launched Viva La Vulva in 2018, which aims to visibilize and challenge the dominant notions about the perfect vulva, as mentioned in the section on myth busting also under education and knowledge. Jenny Smith describes the latter:

> "It's about a different taboo, which is about society's view on the perfect v-zone, what you're supposed to look like down there. And there is some type of ideal about everyone looking the same way but in real life we know that everyone looks different and that's the point; we are all different […]."

This message is clearly aimed at destigmatizing and challenging dominant notions about female genitals, but the products that were released in connection to this campaign have received some critique, not least by other respondents in my study. The products consist of a line of products for vulva hygiene called V-Care. Because the vagina is designed to clean itself through natural secretions called discharge (National Health Services, 2020), launching a product line to promote vaginal hygiene can be interpreted as insinuating that it is unclean, which is in line with traditional views stigmatizing female genitalia and menstruation. From a health point of view, however, using soap on the female genitals can result in a Ph imbalance and can cause infections, dryness, and irritation. Health experts instead recommend using oil and water (Friedmann, 2017b). Although Essity's V-Care website contains the same type of discourse as the rest of the website on menstrual product, promoting the destigmatization with anti-shame language, it also contains discourse mimicking the traditional type of wording such as 'freshness' and 'cleanliness' (Libresse, 2020).

While the communication is in line with values such as gender equality, which company representatives explicitly state that they hold within the company, one could see the sales of this type of product line as buying into the somewhat 'unfeministic' notion of the female genitals being dirty, needing to be cleaned and needing freshness. In other words, one could thus see the company as capitalizing on the feminist agenda with its communication, while selling a product that is incoherent with those values. This is something many brands have been accused

of when attempting a more feministic discourse in their communication. In 2016, H&M, for instance, were accused of making a shallow attempt to gain grounds with the feminists when launching a campaign called #ladylike with the Swedish feminist singer Little Jinder. The campaign was well received by many but was heavily criticized by others such as the strong feminist profile, Liv Strömqvist. She criticized the alleged double standard of suppliers in Cambodia and India having fired factory workers who got pregnant (Edwards, 2016; Nilson, 2016; TT, 2016).

Furthermore, respondents from companies outside of Essity criticized Essity's recent product line launch, stating that they are shooting themselves in the foot. One of the entrepreneurs interviewed stated,

> "how can you mistreat a brand the way Essity did when they released their intimate care line?"

The respondent implied that Essity have a very strong brand that stands for values related to gender equality, feminism, and progressiveness and several respondents have regarded their campaign #BloodNormal as a pivotal destigmatizing event. Nevertheless, with the launch of their V-Care line, Essity seem to have possibly put their own reputation of progressiveness at risk among other actors in the menstrual product field with a collection that insinuates that the vulva needs cleansing; hence, that it is unclean, in accordance with previous research (Barak-Brandes, 2011; Carvalho, 1997; Chrisler, 2011), due to their reapplication of traditional insinuations, at least among a certain segment of consumers and manufacturers.

A product line for cleaning the female genitals might insinuate that the vulva is dirty and that this can be seen as contradicting from a brand that is explicitly trying to destigmatize the vulva and menstruation. Michael Moscherosch at Johnson & Johnson also reacted to the notion stating that,

> "If you are trying to work against a stigma… why does a vagina have to be cleaned, by the way? What? Is it unclean? Is that what you're saying?"

At the same time, however, companies are very unlikely to develop products that are not based on a need or preference that is either expressed among their users or that they derive through observing or learning about consumer behavior. Essity

likely learned about consumers using regular soap to wash their genitals, which might be too strong for the sensitive skin and mucous membranes on the vulva. Instead of people carrying on with such potentially unhealthy behavior, they probably saw an opportunity at Essity to provide consumers with a milder alternative to regular soap and simultaneously profit off of it. Moscherosch stated that,

> "What are people generally speaking using to clean themselves, to clean their intimate areas, that's the question. If somebody is using bar soap, then you could tell them you have this special product that's especially designed for the intimate area. If you feel more comfortable with that, go for it. […] If they are positioning it like they have something particularly gentle... because women believe they need a gentler cleansing product for their intimate area – if they believe that and you give them something that's gentler, go for it, it could be baby shampoo, whatever. If people are saying they want something milder, you give them something milder. A lot of the products that are on the market are not there because companies think it's a great idea to give this to consumers, but because consumers ask them for them. If there are women out there saying they want a mild cleanser for my intimate area, and they are willing to spend money on it, you give them one. It's based on their consumer research; they're not just pulling this out of thin air."

Essity are unlikely to have any intention of trying to maintain the stigma on menstruation or the female genitals because all they are trying to do is place a product on the market that there is an existing demand for and marketing it in a destigmatizing way. Moscherosch cautioned from over-analyzing by stating that,

> "That doesn't mean that they are, sort of, trying to maintain the taboo in the area, no, they just want a mild cleanser for that area. So, I wouldn't put too much judgement on all those things, because in the end, all the new products that are out there are generally speaking based on what consumers want."

While taking consumers' needs and preferences into consideration, on the one hand, clearly benefits both manufacturers and consumers, on the other hand, by involving consumers in the development process and placing new or developed products that reflect their experiences, needs and wants, manufacturers also signal that they value their users' experiential knowledge. Drevik, who holds over 70 patents in her name together with SCA (now Essity), developed the technology behind the absorbent core, now widely applied across menstrual pad brands. She

used to speak to countless consumers about their opinions and issues with menstrual products and put her own skills to use by transferring those testimonies into technical solutions. She stated that,

> "Placing the customer at the center of the product development process is imperative to developing products that consumers want to buy and use. The greatest risk of not listening to customers is that you develop products that no one likes, wants, or buys."

This may seem like an obvious point, but it is not always the case that manufacturers listen to the experiences of their users. At least users have expressed feeling as though they are not being listened to. For example, P&G's menstrual pad brand, Always, gained harsh criticism from Kenyan users during the spring of 2019, when users took to Twitter to complain about rashes, burns, abrasions, amongst other symptoms, which they argued came from using Always pads under the hashtag #MyAlwaysExperience (Omondi, 2019). The minute users start sharing their experiences and knowledge spreads, demand conditions are changing. Consumers realize they are not alone in their negative experiences and when they see others brave enough to break the silence about it, they feel they can too. One user wrote,

Picture 3: Tweet by BaudoMedia (Omondi, 2019)

In summary, companies such as Essity and P&G can be interpreted as working both for and against the destigmatization of menstruation and menstrual products. And the use of social media can likewise be used to stigmatize or destigmatize accordingly. Their advertisements in general employ a rather destigmatizing and progressive discourse where they continuously visibilize that which has traditionally been hidden, although they can be criticized for excluding trans people, but the nature of the products themselves is not always seen as reflecting the values expressed in the marketing thereof. In terms of the case of #MyAlwaysExperience, it is likely that the brand Always became stigmatized as the 'big-corp.-bad-guy who does not listen to its consumers' complaints.'

7.3. Claiming agency on the institutional level: Reconstructing symbols and attitudes

7.3.1. Reconstructing symbols and attitudes associated with menstrual products

On the institutional level, symbols and attitudes surrounding menstruation and menstrual products are being reconstructed through claiming agency and control over their implications and meanings. This shift primarily consists of moving from notions and symbols that are either negatively charged, such as disgust or disconnected from the reality of the actual products or their use such as blue liquid to represent menstrual blood, toward normalization and positivity.

Because of traditional associations between menstruation and menstrual products with shame, dirt and disgust, people often express how impressed they are with those working with such matters. Innovating entrepreneur, Ingrid Odlén, discussed the impression she has gotten from the general public so far that people are often impressed with her work, as they understand the individual sacrifices that Odlén is making by breaking new ground and bravely daring to discuss that which may traditionally have deemed her shameful, silencing her. They are impressed because they recognize that claiming such agency is a lot of work and requires strength from the individual.

> "People understand that there is such an enormous taboo on menstruation and that it is a huge step to go out and work with it and want to improve it and question the norms around it. So, I think that is why people view it so positively."

Furthermore, this quote indicates a shift in attitudes from stigmatizing toward being impressed by those individuals who are able to counter the norms in place, signifying that they should be proud of doing so. This is in contrast to attitudes associated with the taboo, or stigma, which would instead attach shame to Odlén and her work.

As discussed in the section on feminism, menstruation is a growing area of interest, and SIS, for instance, consider the menstrual product standardization project as associated with a 'hot topic.' Edmark commented that their communications department had expressed excitement in going public with the news of it,

> "the communications department are very excited to write a piece for their website about it."

Another aspect of reconstructing attitudes and symbols is represented in Essity's #BloodNormal campaign, which displays scenes that have been openly discussed and have caused the advertisement to be banned in several countries for being too offensive such as blood being shown on a pad inside a girl's underwear. These include blood running down the inside of someone's thigh in the shower. Essity is also the first menstrual product company to run advertisements with scenes where red liquid that looks similar to blood is used to demonstrate the absorption in pads, as opposed to blue or pink liquid (BBC, 2017). These aspects, hence, are in direct contradiction to the traditional ways in which menstrual products have been marketed in accordance with research by e.g., Carvalho (1997) and Johnston-Robledo and Chrisler (2013). In an interview for It's Nice That, the creators of the advertisement state that,

> "…[W]e were shocked, to say the least, when pretty much everything was banned, across the world, on all kinds of platforms. It's like we'd touched a third rail. It makes you outraged. We'd get feedback from media governing bodies saying: "We understand what you're doing… but can you cut out this, this, this, this and that." Even embroidered period lingerie was deemed offensive because of "blood." That's when you begin to appreciate the sheer weirdness of the taboo."

They had to fight for several months and for several scenes having to argue against convictions that the blood shown was not "normal" blood because it was menstrual blood, which inhabit completely different charges. Finally, almost every battle was won, except one: they were still not allowed to display menstrual blood on a pad in a pair of underwear of a young woman on the toilet. Instead, the blood had to be pixelated (Lossgott & Hulley, 2017). In the images below, you can see screen shots from the video where the blood on the pad is pixelated followed by a shot of Libresse's and their advertisement agency AMV's jab at the television broadcast authorities that had prevented the display of menstrual blood.

Picture 4: Pixelated blood in Libresse commercial (Wolfe, 2017)

Picture 5: The sight of period blood is unacceptable (Wolfe, 2017)

Another respondent who emphasized the importance of changing symbols to destigmatize menstruation and menstrual products is gynecologist, Christina Lloyd. She also indicated the blue liquid used in menstrual product advertisements as a symbol signifying the distinction between that which occurs in the laboratory and is clean, and the actual blood that ends up in a pad in one's underwear, which is dirty. Further, menstruation has the symbolic nature of being an indicator of fertility and creation of life and can be seen as a way to normalize the concept, rather than viewing it as something solely unpleasant, which she admitted, it can be. She stated that,

> "It's really important to start with education to get acceptance, when you do menstrual tests with blue liquid, it could be red – what's the problem? It is red in real life, but in those cases, it's supposed to be a laboratory and shouldn't be gross etc. because many people think 'EW! It's gross, menstruation is gross.' It isn't super pleasant, but it's a part of life; it's a part of fertility, it has a very symbolic role."

In summary, there are several indications that claiming agency of menstrual products through reconstructing associated attitudes and symbols contribute to their destigmatization. This is often done by pushing the limits to what is considered acceptable social behavior with regard to showing and talking about menstruation and seems to be associated with a will to be modern and brave, standing up for what is seen as right. Such behavior is often seen as impressive for daring to break the silence and show willingness to talk to others about menstrual products and experiences with them. Additionally, changing the symbols that are connected to menstrual products is another important aspect of destigmatizing, the most apparent example being the use of red liquid rather than the conventional blue liquid to demonstrate the absorption of menstrual products in advertisements.

7.4. Concluding remarks on claiming agency

As pointed out in previous research, the largest portion of the ongoing conversation about menstruation and menstrual products has for a long time consisted of either male philosophers and doctors or advertisements by menstrual product manufacturers. What is made clear in my findings is that on all three

levels of society, actors are claiming agency of menstruation and menstrual products and are thus taking greater control in determining both the development of the field, as well as how associated matters are discussed, and the symbols and attitudes surrounding them.

While I have not measured the amount of discourse in terms of how large portions of the whole conversation that different actors make up, which is likely an impossible task, it is clear that an increasing portion is occurring on social media. The main difference being that an increasing portion of that conversation is between users and often discusses matters that would previously not have been discussed in any medium anywhere because of their explicit nature.

The most significant aspect that social media contributes with, is thus the availability of a sense of community among users and an agreement to allowing for previously silenced voices and topics to be heard and discussed openly without judgement and stigmatization. What is noteworthy is also the way in which these communities often make sure to self-regulate either through moderators or peer-to-peer if anyone were to break the no-stigmatizing rule.

Furthermore, on a broader scale, an important aspect of communication is also the global effort to destigmatize menstruation and menstrual products that is undertaken, for instance, by manufacturers. Oftentimes, communication departments who are trying to push the limits of what is acceptable public discourse are forced to discuss the matters with numerous countries and broadcasting stations as well as social network companies worldwide. Hence, they are initiating conversations about destigmatizing menstruation and menstrual products on several different levels simultaneously, which is having proven effects such as menstruation being visibilized in new ways on social media and on television.

7.5. Summary of key findings

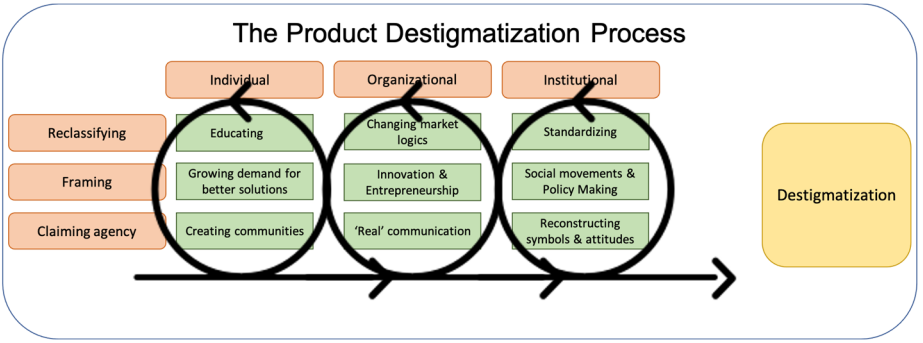

Figure 5: Final framework of product destigmatization

To summarize, the key findings consist of the three mechanisms and their three respective sub-categories on each of the levels of society: individual, organizational, and institutional. These three mechanisms and nine sub-categories have been identified as the main driving forces behind the destigmatization of menstrual products.

Firstly, reclassification is occurring as a redefinition of menstruation and menstrual product from a notion commonly seen as disgusting, dirty, and something to be hidden toward a natural biological process that should be common knowledge to all, including men and boys. This is reached through educating on the individual level, through changing market logics, and responding to new consumption patterns triggered by increased informed choice among users, and by standardizing menstrual products in order to ensure their safety and access to all those who need them. Standardizing menstrual products is likely to further destigmatization, in the sense that it signals that the matter is taken seriously by power holders on an institutional level. This is in contradiction to the historical silence and neglect surrounding menstruation and menstrual products institutionally.

Together, these factors contribute to destigmatization where menstrual products have traditionally been considered consumer commodities, whereas there seems to be an ongoing shift toward menstrual products being increasingly considered a matter of public health. Reclassifying in legislative terms has yet to be done in

Sweden, however, as is the case in many other places around the world where supply and demand prevail as the determining market logics.

Secondly, framing opens up the notion of menstrual products to contain a number of other aspects to consider. Framing menstrual products in terms of sustainability, for instance, opens up for discussion points such as the social equity considerations of access to safe menstrual products for people with different cultural practices, access, specific needs, or genders, etc. Sustainability also opens up a discussion about the economics of menstrual products, increasing the number and variation of menstrual products on the market to suit different consumer segments that have previously been unmet for reasons such as being unable to afford existing products or having to spend more than the average amount due to a heavy flow or shorter cycle. Finally, sustainability opens up a discussion about the environmental considerations of menstrual products including the chemical- and raw material inputs, disposability, reusability, and how they affect nature and the human body.

Framing menstrual products as a matter of sustainability and the discussions that the three pillars open up on all three levels of society further serve as a source of innovation driven by consumer interests on the organizational level as well as policy making on the institutional level. Policy making is further one of the most fundamental requirements for institutional reform toward taking menstruation and menstrual products seriously on a societal level. While being able to frame menstrual matters against the SDGs, policy making that explicitly addresses menstruation and menstrual products, would drive destigmatization more forcefully.

Third and finally, the way actors are claiming agency of menstrual products whether it be between individuals, between users and manufacturers and in society on the institutional level is increasingly contributing to destigmatization. Such communication on the different levels are iterative and thus, one heavily influences the others. An interesting aspect about menstruation and the experience thereof is the difficulty in knowing one's own menstruation without knowing that of others. Claiming agency and taking greater control of the communication about it on all levels further increases the knowledge and education not only about menstruation and menstrual products, but also about *how* to communicate about these matters in a way that is not stigmatizing, shaming, or having negative connotations. It seems a previous lack of

understanding for how to do so has implied that people have avoided conversations entirely, out of fear of offending those menstruating.

8. Discussion and Conclusions

In this chapter, I discuss how my findings contribute to previous knowledge through a deeper understanding of the factors that contribute to destigmatization processes. With this short prefix to the chapter, I introduce the three main areas where my findings show originality regarding perspectives in previous research. Under each section, I speak to the limitations of our existing knowledge, including my study, in explaining each concept fully and ways in which future research can be developed to do so.

I have found three key findings, each of which develops our knowledge about one of the corresponding theoretical domains on which this study is grounded. One key finding corresponds to product stigma research, one to destigmatization, and one to institutional change. The forthcoming sections of this chapter will thus be divided into three sections. Each key finding will be discussed as the main contribution corresponding to the theoretical domain in each of these sections.

My first and principal contribution is represented by the comprehensive nature of the study itself. Few, if any, prior studies have been so comprehensive in terms of discussing different dynamics and levels of society in understanding a product stigma or a destigmatization process. In particular, my study is unique in having researched the destigmatization of menstrual products, a product group, which has been largely overlooked within business research, other than in terms of advertisement. Studying the destigmatization of products, in a field setting i.e., driven by organizations and the market together with the individual and institutional levels, further underbuilds a comprehensiveness, which has not previously been attained. In particular, a field perspective enables a frame that includes social problematizations of the issue at hand rather than only market considerations. This has been possible due to the case study methodology. Where previous research has been much broader in scope, I have been able to gain deeper insights into the details of the destigmatization process by focusing on only one product category.

Secondly, as we can see in my theoretical frame of reference, stigma and destigmatization research are generally focused on governmental interventions in order to trigger top-down change. In contrast to this research, I have found that destigmatization is occurring through bottom-up approaches where a number of factors are salient: the spread of social movements such as sustainability and feminism on the individual level as well as to the organizational level can trigger destigmatization. As actors on these levels, including consumers, organizations, innovators and entrepreneurs, collaborate and frame their work according to these movements, they gain momentum in a social climate that propels their cause, thus facilitating change on the institutional level. This change is facilitated by aspects such as claiming agency, destigmatizing communication as well as standardization.

Third, I contribute with an increased understanding of the role of organizations in destigmatization processes, which has only been discussed in detail by a few scholars to date, including, for instance, Mirabito et al. (2016). These scholars place focus on the role of companies in the retail function, however. I argue that the role of corporations is much more multifaceted than in only the retail function, and through my findings demonstrate a role of the firm including innovation and entrepreneurship, claiming agency of stigmatized products in their communication with consumers and changing market logics in contributing to destigmatization. This has not been discussed to date and thus represents one of my key contributions.

8.1. Contributions

8.1.1. Product stigma – a comprehensive study of menstrual product destigmatization

First and foremost, my main theoretical contribution is that I have conducted a more comprehensive study of a specific product destigmatization process than can be found among previous studies. My study includes all three levels of society, and many different dynamics that are in play on these three levels. Further, the perspective I employ is broader than in most studies and thus takes a field perspective, as opposed to a market perspective. This way, my study can increase

the understanding of the social or humanitarian aspects of the destigmatization process, rather than only market aspects.

One previous study has to date included all levels of society, as well as a field perspective, namely Mirabito et al.'s (2016). The main reason why my study adds comprehensiveness in relation to this study, is because the Mirabito et al. study includes both the stigmatization and the destigmatization processes, rather than solely focusing on the latter, as mine does. Although it provides an intriguing endeavor, by discussing both the stigmatization and destigmatization processes simultaneously, the authors sacrifice a deeper understanding of the latter.

By studying one destigmatization process in particular, my findings contribute to deeper knowledge in terms of going into greater detail of the destigmatizing mechanisms and factors that stakeholders engage in on the different levels of society. An example of such a detail is that one way that reconstructing symbols and attitudes is done is by shifting blame from stigmatized to stigmatizers and how this is done. Another example is that social movements and framing destigmatizing initiatives in association with them plays a much greater role than what Mirabito et al. discuss rather vaguely as contextual currents. To date, I have not seen a detailed framework describing the product destigmatization process – a gap this study fills. For the purpose of this discussion chapter, I will thus focus on the destigmatization aspect of the stigma turbine.

My theoretical frame of reference, or literature review, commenced with a discussion on stigmatization including Link and Phelan's (2001) four components of the stigmatization process. This model, as discussed, has been addressed by prominent destigmatization researchers including Clair, Daniel, and Lamont (2016) as well as Mirabito et al. (2016). In order to avoid repetition and to clarify, I have created a synthesis between these scholars' perspectives and developed their insights with those from my findings. Thus, Link and Phelan's model will be addressed in terms of counteracting the stigmatization process under a forthcoming section on destigmatization.

8.1.1.1. The Stigma Turbine

The stigma turbine, as presented by Mirabito et al., (2016), provides a mapping of the different types of actors, influences, and pressures that exacerbate or drive both stigmatization and destigmatization. This mapping is one of the first to acknowledge the complex and dynamic nature of the workings of stigma and

destigmatization, and especially with inclusion of organizations and the marketplace, or field, as a unit of research. Focusing on the destigmatization process, I find that certain factors are more important than others, which does not come through as clearly in the Stigma Turbine framework. As mentioned, the concept of "contextual currents" is rather vague and could include almost anything without specificity regarding what aspects in the context are most important in accommodating a destigmatization process. I address this notion by categorizing the most important factors driving a destigmatization process according to three mechanisms. Reclassifying, framing, and claiming agency have all been discussed to some extent in previous literature, but they have not been emphasized as playing a salient role in the way my study demonstrates.

In relation to my findings, the stigma turbine can be seen as something of a skeleton outlining many aspects that contribute to destigmatization. Confirming many of the notions brought forth by Mirabito et al. (2016), my findings provide some more meat on these bones, demonstrating in greater depth, details of how the process works and moves forward. For example, my findings support the notion that the institutional level is important in terms of reconstructing symbols and attitudes and advance this concept by demonstrating that this is done, for instance, by shifting shame from those stigmatized to stigmatizers as well as pushing the limits regarding what is acceptable to visibilize in public. The former is done by highlighting the blamelessness of the stigmatized and the negligence and lack of knowledge on the stigmatizers' part. It is important not to do so maliciously but rather have an open conversation about the matter, as Louise Berg explained about fathers starting a conversation with their daughters about menstruation.

The latter, pushing the limits as to what is regarded acceptable to visibilize publicly, is supported by aspects such as advertisements that employ vivid language and imagery regarding the stigmatized product or experience reflected, and can also be regarded as a deeper insight into Mirabito et al.'s (2016) commercial winds. An example thereof is Essity's use of a singing grapefruit, which resembles a vulva in their Viva La Vulva campaign. Moving stigmatized matters from the private to public spaces will be discussed further in subsequent sections including the one on 'changing group compositions and uniting 'us' and 'them'' under the process of destigmatization. Likewise, institutional winds are

addressed in the process of destigmatization, in the section on 'addressing status loss and discrimination by developing laws, policies and standards.'

In terms of what Mirabito et al. (2016) refer to as contextual currents, I thus find that the most important factor is framing with regard to social movements and in the case of menstrual products, in particular, sustainability and feminism. Because the concept of sustainability and sustainable development incorporates social, economic, and environmental aspects, it has great potential for transferability to other destigmatization processes. This is in the sense that most issues can be framed in a sustainability light, as discussed under both the sections on framing menstruation as normal or important, growing demand for better solutions, innovating and entrepreneurship as well as feminism and policy making. An example is Louise Berg who discusses the importance of businesses thinking holistically about product development and potential effects on all three pillars of sustainability because considering only one of these is outdated and will not last long on the market.

Sustainability not only incorporates many aspects, but also permeates through society on a growing scale. An example of a different product category that is being destigmatized through framing according to sustainability is second-hand clothing where connotations are shifting from having a lower-income status toward coolness, uniqueness and bravery in taking an active stance against humanitarian issues such as child labor and environmental aspects such as 'fast fashion' (Bick, Halsey & Ekenga, 2018). Through this dissemination, destigmatizing ideas are spreading among individuals and organizations, affecting the ways they communicate both within and between actor groups. Examples include expressing demand for better, more sustainable solutions, which is something Essity has noticed, for instance, in interviews with their consumers.

With growing demand for better, more sustainable solutions, a climate is fostered where organizations including entrepreneurs come up with new innovations. Examples include business models with more direct distribution and customized subscription period packages, resulting in healthier habits with more environmentally friendly products such as Yoppie's. Innovation and entrepreneurship as a driver of destigmatization further signify one of the three key ways that I broaden our understanding of how companies can contribute to destigmatization and will be discussed more thoroughly in the section on my contributions to institutional change. Nonetheless, this aspect has only been

addressed to a limited extent in the Stigma Turbine, where the focus is placed primarily on companies' roles in terms of retail.

Furthermore, Mirabito et al. (2016) argue that within cultures, the experience of stigma can be shaped by physical spaces including public spaces. In a different discussion, they simultaneously argue that one way in which meanings around that which is stigmatized are (re)produced is through institutions such as art. Their article does not go into great detail on to how this works, but my findings indicate that this cannot only be confirmed and developed further but also shows that displaying art in public spaces can be an effective combination of these two notions. In particular, with observations of one of the most pivotal events for destigmatizing menstruation and menstrual products between the years 2013 and 2020. This was the feminist action of moving menstruation into public spaces when Liv Strömquist painted red blood in the crotch of an ice skater on the walls of one of Sweden's most crowded subway stations. This exposed the public to images where menstruation was depicted realistically, in the sense that it was shown between the legs in red. By seeing stigmatized concepts portrayed in a more public and vivid way, it creates an identification between those stigmatized and can thus aid in destigmatization.

The remaining two mechanisms according to which I categorize the main contributing factors to driving destigmatization, reclassifying and claiming agency will be further discussed in the forthcoming sections on how my findings contribute to destigmatization and institutional change, respectively. To avoid repetition, I will not go into greater depth on these matters here, but rather urge the reader to bear in mind how the discussion in forthcoming sections also contribute to the comprehensiveness of my findings.

8.1.1.4. Limitations to our understanding of and suggestions for future research on stigmatization

The Stigma Turbine outlines a number of aspects that affect the destigmatization and stigmatization of products simultaneously. I have found that while most of the aspects discussed by Mirabito et al. (2016) are relevant, certain factors are more important than others. I show, for instance, that social movements, in particular sustainability and feminism, have destigmatizing effects throughout society, and help drive change through the individual and organizational levels toward the institutional level by framing destigmatizing initiatives in relation to

these movements. The Stigma Turbine provides limited prioritization among the factors and would benefit from further analysis, in terms of more cases that could provide greater depth and accuracy to the framework. For example, future research could focus on the different contextual currents including, for instance, the destigmatizing effects that moving stigmatized matters into public spaces have and which manners of doing so might be most effective, where, and when.

Stigma theory has primarily been geared toward understanding the process of stigmatization and has overlooked certain aspects of the process by which stigmatization can be reversed, namely through destigmatization. Specifically, both these processes have been limitedly discussed, in terms of products. Furthermore, while previous research outlines the steps of product destigmatization, it rarely addresses the notion of time in a destigmatization process. My findings illustrate that depending on the social context and field, the destigmatization process will have developed more or less. Aspects affecting that status include regulative factors such as legal classification of products, laws, regulations, policies, and standards, where I add the latter through this study. Additional social factors that affect how far a destigmatization process has developed include how prevalent the social movements are, and the type of education given to the public. An aspect that has been addressed in previous research but that has only been limitedly discussed in this study, although mentioned by a few respondents including Louise Berg and Michael Moscherosch, includes for instance religiosity (Kusuma, 2014), which likely also has a bearing on the progression of a destigmatization process. Future research should look further into the phases of destigmatization processes, both pertaining to products and other matters, to shed light on what mechanisms might be important in different settings.

Finally, stigma theory only briefly touches upon the effects of product stigma on fields including marketing difficulties, reduced demand, lack of consumer research and innovation, and so on (Ellen & Bone, 2008; Katsanis, 1994; Wilson & West, 1981). Although this study has not addressed a product stigma's effects on fields specifically, they are viewed as a prerequisite, based on the limited body of previous research and not least as an empirical observation. In order to further research on stigmatization and destigmatization, especially pertaining to products, future research needs to include marketing difficulties, reduced demand, lack of consumer research and innovation, and advance this further to shed more light

on these and other potential effects that stigma can have on fields, as this would be an implication of the destigmatization process.

8.1.2. Product destigmatization through a bottom-up approach

Theory on stigma, destigmatization as well as institutional change all focus primarily on top-down approaches where social change is initiated on an institutional level through regulative measures (Clair & Daniel, 2016; Mirabito et al., 2016; Oliver, 1992; Scott, 2013). On the contrary, I have found that such change also occurs from the bottom-up. As discussed in the previous section, social movements have an important role in disseminating the values across society to create a sort of consensus that change is positive, progressive, and needed. What more I add is that key actors including consumers, incumbent manufacturers, and entrepreneurs acting on the side of social movements aiming at destigmatization drive the process forward, not least through framing their initiatives in accordance with social movements. When collaborating, they gain momentum on a broader scale and are able to affect regulative change on the institutional level through, for instance, standardization.

This section is structured as follows. First, I discuss the ways in which I develop our understanding of Link and Phelan's (2001) four components of destigmatization. In particular, I develop their framework by placing focus on how each component can consist of bottom-up destigmatization with examples from my findings. Second, I present my advancements of Clair, Daniel, and Lamont's framework for destigmatization. These authors have primarily focused on the destigmatization of individuals and groups. I advance their framework with insights about destigmatization of products, and how such a process occurs from a bottom-up approach rather than only top-down approaches, as discussed by the authors. Finally, I consider our limitations to understanding the destigmatization process and how future research might address them.

8.1.2.1. Addressing Link and Phelan's four components of stigmatization countered by destigmatizing mechanisms

While previous research discusses destigmatization in, as well as of, organizations, less attention has been paid to the role of organizations in destigmatization processes on a broader level. Stigma scholars such as Clair, Daniel, and Lamont (2016), Ellen and Bone (2008), as well as Mirabito et al. (2016) are some of the

few researchers who discuss how organizations can aid in destigmatization, particularly in communication with their customers. As discussed in my theoretical frame of reference, Clair, Daniel, and Lamont (2016) as well as Mirabito et al. (2016) address Link and Phelan's (2001) four components of stigmatization. Their findings vary slightly from each other, as do mine. Clair, Daniel, and Lamont's (2016) response is primarily geared toward explaining the destigmatization of individuals, Mirabito et al.'s (2016) as well as my findings primarily seek to understand destigmatization of products. In order to avoid repetition, and to facilitate a synthesis of previous research with insights from my findings, I will discuss Clair, Daniel, and Lamont's (2016), Mirabito et al.'s (2016) as well as my understanding of how Link and Phelan's process of stigmatization can be countered through destigmatizing factors and how I advance our understanding of them. The four components will be discussed in an order corresponding to the importance of my contributions with those most significant first.

Addressing status loss and discrimination by developing laws, policies and standards from the bottom-up

When government is unwilling to take the initiative toward developing laws and policies, a top-down approach, as suggested by previous research, is impossible. As an alternative, I demonstrate that a bottom-up approach through individuals and organizations who pressure the institutional level, for instance, by initiating standardization is a different way to increase product control, which by extension contributes to destigmatization. Through standardization, stakeholders who lack legislative power can coordinate their efforts and put forth standards that take into account interests that have not been taken seriously by the government.

On this topic, without explicitly discussing standardization, Mirabito et al. (2016) mention that other types of efforts than the top-down approach may require collaboration between different types of stakeholders including businesses, community groups, and government. Clair, Daniel, and Lamont (2016) similarly list a number of social actors as important for the destigmatization process, which includes medical experts, legal experts, media/journalists, firms, advocates, and activists. I would like to develop this list to include consumer organizations, standardization organizations, and researchers as well as specify firms in terms of entrepreneurs as well as incumbents. These represent stakeholders that have been

actively driving the standardization process and/or the destigmatization process in the case of the menstrual products.

Furthermore, in order for legislation to take place, Clair, Daniel, and Lamont (2016, p.224) state that the dominant public is required to have empathy and a "sense of connectedness with the stigmatized group." This makes them more likely to see the group's plight as problematic and thus work toward changing those circumstances. In supplement to this argument, I put forth that support from the general public is not always sufficient. For example, around half of the world's population menstruates and should thus theoretically support the development of laws, policies, and standards to further their menstrual health and well-being, according to Clair, Daniel, and Lamont (2016) because they have empathy and a sense of connectedness with the stigmatized group, i.e., themselves.

However, the general lack of laws, policies, and standards on menstrual products indicates that it is not only a matter of numbers when it comes to support for their development, but rather a matter of who is in power and to what extent do they empathize and have a sense of connectedness to those stigmatized (Waylen, 2014). Because those in power are predominantly cisgender (someone who identifies with the gender they are assigned at birth (Schilt & Westbrook, 2009) males, who have never experienced menstruation, and who have been separated from conversations about menstruation and menstrual products, are less likely to drive the development of laws, policies, and standards pertaining to menstruation and menstrual products.

I would thus like to propose a development of Clair, Daniel, and Lamont's (2016) statement, "When the dominant public lacks empathy and a sense of connectedness with a stigmatized group, they are less likely to see its plight as problematic – and when people fail to see another group's circumstances as problematic, they are unlikely to seek out or support social change" to "When the dominant public, **or those in power of decision-making**, lack empathy and a sense of connectedness with a stigmatized group, they are less likely to see its plight as problematic – and when people fail to see another group's circumstances as problematic, they are unlikely to seek out or support social change." This is supported, for instance, by Scott (2013) who argues that political pressures such as shifts in either interests or the distribution of power that support existing institutional arrangements can trigger institutional change such as new legislation, policy, or standardizing.

The notion of power as a contributing factor in political decision-making about stigmatized matters further corresponds to Dudová's (2010, pp.947–948) argument that "all people define situations as real, but when powerful people define situations as real, then they are real for everybody involved in their consequences" and that this is especially true when power relations are gendered, since "gender change is likely to face opposition." Furthermore, what is key here is not necessarily the lack of empathy but also the lack of education and understanding about the stigmatized condition or products that uphold and are upheld by the culture of silence. This demonstrates why institutional level change is secondary, or even tertiary, to individual and organizational level change (Scott, 2013).

Addressing the association of differences with negative attributes through defusing stereotypes

According to Mirabito et al. (2016, p.179), "stereotypes are difficult to disrupt because contradictory evidence is often uncertain, ambiguous, and easily dismissed," but it can be done by communicating "counterfactual information vividly." My findings correspond to this, in terms of providing 'real' information both in education, as well as in communication between manufacturers and users. By communicating in visibilizing, tangible and relatable ways with one's consumers, manufacturers signal that they attach no shame or embarrassment to the products and thus that by not avoiding association themselves, nor should consumers need to engage in disassociating behaviors. In this way, manufacturers claim agency of their products and how they communicate about them, rather than adhering to cultural norms that dictate how they should do so. Consequently, this signals to consumers that they can do the same, namely claim agency of how they communicate about menstruation and menstrual products, as well as their own experience of menstruating. This contributes to greater confidence and in time normalization of such destigmatized and destigmatizing conversations.

I further deepen our understanding of this notion through my findings, where we can see that such communication efficiently destigmatizes by visibilizing menstruation and menstrual products, for instance, in advertisements that are specifically geared at normalization and by supporting customers. An example of counterfactual communication includes visibilizing the experience of menstruating in a realistic way, with all the associated emotions as opposed to in

a romanticizing way, as has been the case traditionally, which causes a lack of identification in consumers and possibly an unrealistic illusion of what menstruation implies among non-menstruators. An example of a way that customers are supported is through interaction between manufacturers and consumers on various social media platforms, which have, since their establishment increasingly simplified and personalized communication such as in the case of MonthlyCup's customer support.

Furthermore, Clair, Daniel, and Lamont's (2016) discussion is primarily geared toward displaying positive constructions of that or those which is/are stigmatized. What can be seen in this study, however, is that the matter need not necessarily be positive. In fact, overly romanticized images of menstruation and menstrual products have been heavily criticized in recent years for diminishing the experience of menstruation into an unrealistic construction. Instead, in order to destigmatize menstruation and menstrual products, images, ideas, communication and knowledge should reflect the reality and many different peoples' experiences of menstruation. I urge the reader to bear in mind that displaying positive constructions is not necessarily the same as framing matters positively. The latter is namely more concerned with employing frames that are already seen as positive and associating that which is stigmatized accordingly, rather than directly claiming that that which is stigmatized is positive, which, if exaggerated, can cause the opposite effect than intended.

Changing group compositions and uniting 'us' and 'them' from the bottom-up
Negative stereotyping portrays stigmatized groups as "homogenous and different" from the mainstream and justifies stigmatizers' disassociating behavior, according to Mirabito et al. (2016, p.179). They go on to argue that negative stereotyping can be counteracted by reducing the distance between stigmatized and stigmatizers by building bridges between them. This can be done in various ways, for instance, by supporting customers, portraying stigmatized matters contrary to stereotypes, and by eliminating visible stigmatizing attributes. The first two of these three are confirmed in my findings, whereas the last is not. Instead, my findings demonstrate that the more visible stigmatizing attributes are made, the more destigmatized they become, much as the same scholars argued in terms of providing 'real' information. This contradiction of sorts can be seen as an indication of different factors playing into the destigmatization in different phases of the process. In the beginning phases, displaying stigmatizing attributes vividly

may be received as offensive and tasteless, and more subtly suggestive approaches are warranted. Later in the process, however, when people have become more accustomed to the destigmatizing ideas, displaying vivid images is regarded as bold and courageous. This is exemplified in Essity's Viva La Vulva campaign, which was heavily censored in certain parts of the world, such as Australia, and much less so, for instance, in Sweden.

Moving stigmatized products into public spaces can further be seen as an extension of Clair, Daniel, and Lamont's (2016) concept of changing group compositions, which primarily addresses the breaking up of stigmatizing individuals in groups with non-stigmatizers. When Rupi Kaur posted her image of menstruation on Instagram and when Liv Strömquist's menstrual art was painted on the walls of Slussen, the groups exposed to destigmatizing messages and art changed from homogenous groups of non-stigmatizing and perhaps stigmatized individuals into a group that includes stigmatizers. As Clair, Daniel, and Lamont (2016, p.224) argue, this type of action does not necessarily cause direct or immediate change, but rather reinforces "positive implicit associations over time, thus reducing discrimination in the long run."

What my findings also show is the instant effect of these actions, as individuals incited public conversations about menstruation and menstrual products. Regardless of whether positive or negative, these conversations broke the culture of silence surrounding menstruation, thus indicating that changing group compositions also contributes to destigmatization by starting a public conversation. Again, this aspect should be related to the phase that the destigmatization process is in, since the cultural and political context affects the conversation. For example, in Swedish media, the art was primarily presented as a positive feminist action that challenged outdated ideas about gender. The way media frames issues is crucial for how the public interprets it, and in a culture where destigmatization has not come as far, there is a risk that such a conversation would instead exacerbate the stigma. On a broader and, more ground-breaking scale, Rupi Kaur's continued fight toward being able to post about menstruation on Instagram ended up changing the social media giant's policies allowing for menstrual blood to be shown. This is tangible evidence of bottom-up destigmatization.

Addressing previously distinguished and labelled differences through reclassifying stigmatized products as common and normal from the bottom-up

Redefining, as discussed by Clair, Daniel, and Lamont (2016) as the first step in their model of the destigmatization process, can be related to the concept of reclassifying. The authors discuss redefining in terms of normalizing that which is stigmatized among potential stigmatizers, for instance, by increasing the interaction and between those stigmatized and those who potentially stigmatize them. This notion can be developed by understanding it in terms of potential stigmatizers interacting more with products and not least with the underlying stigmatizing concept, in this case, menstruation and menstrual products. This is represented in my findings as breaking silences about the stigmatized, 'myth busting' and providing 'real' information about it in a conversation that includes everyone, not only those exposed to the stigmatizing matter. My findings also advance this with the notion that increasing the interaction among those stigmatized through creating communities also contributes to destigmatization by encouraging individuals to claim agency over their stigmatized condition.

Educating is mentioned frequently in previous research as a factor that can affect the degree of stigmatization by Taute, Lukosius, and Stratemeyer (2008, p.16) as well as LeBel (2008), Wilson and West (1981). Details regarding what type of education and how to go about destigmatizing through educating are discussed less, however, which my findings provide some insights on. My findings show that educating is one of the most fundamental factors of product destigmatization and can be used in order to reclassify the social conception of products from being dirty, discreditable, and embarrassing to being seen as normal or even positively associated with, for instance, health. In order to do so, it is imperative to include potential stigmatizers in the conversation, to encourage them to take part and provide them with a vocabulary and social tools to do so. An example of such a successful initiative is Essity's menstrual challenge in sports teams where coaches were educated on how to talk to their athletes about menstruation.

8.1.2.2. Advancing Clair, Daniel, and Lamont's framework for destigmatization

In Clair, Daniel, and Lamont's (2016, p.229) framework for destigmatization, they attempt to identify "the social conditions that contribute to destigmatization over time and across stigmatized groups." The model is illustrated as a linear process where preconditions trigger social actors to engage in destigmatizing actions, which subsequently lead to destigmatizing outcomes. While this framework provides much clarification to a complicated social process, my main analysis is that it may be too simplified, and I would argue that an element of

process repetition and dynamicity could make it a more accurate reflection of reality. Their model is further primarily geared toward individuals and groups that are stigmatized but can be developed with insights from my findings toward increasing its applicability to product destigmatization as well.

In terms of cultural resources, the authors recognize advocates and activists as social actors who can conduct destigmatizing actions. What the framework does not specify, however, is which actors possess mandate to conduct which types of actions, nor in any particular order that destigmatization might occur such as bottom-up or top-down. I demonstrate that social movements, or ideologies, play a much larger role than discussed in Clair, Daniel, and Lamont's framework (2016) and that, although unspecified in their article, destigmatization of products occurs from the bottom-up, in contradiction to what other previous research on the matter states.

When movements that promote values such as equality, multiculturalism, and rights are disseminated on a wider scale, it is no longer only advocates and activists who drive destigmatization, but individuals and organizations. In my findings, I refer to this as growing demand for better products among consumers and the creation of communities where consumers share information and knowledge about stigmatized matters that are silenced elsewhere. As consumers' education and awareness increases, their needs and wants shift and place pressure on other actors in society, including companies and on the institutional level such as legislators, standardizers, and policy makers. Social movements further contribute to destigmatization by encouraging actors to claim agency and moving stigmatized matters from private to the public spaces as well as raising stigmatized matters on the agenda, in particular by framing them in relation to notions established as positive such as policies, social movements, and policies including the SDGs.

Clair, Daniel, and Lamont (2016, p.230) also discuss the construction of stigmatized conditions in terms of, for instance, "etiology, mutability and controllability, responsibility/blame, perceived consequences of condition, perceived consequences of blame and shame, [and] background assumptions about attributes of 'normal' individuals." This matter has already been discussed to some extent as a development of our understanding of historical winds affecting destigmatization as part of the Stigma Turbine. My findings illustrate that what can further be added is the importance of claiming agency of stigmatized conditions, which contributes to redefining their construction consisting of

symbols and attitudes toward destigmatization. Claiming agency is supported by factors such as educating everyone in society; busting the myths around the stigmatized and substituting misinformation with 'real' information; visibilizing stigmatized matters; creating communities that enable information sharing; and valuing experiences. These factors help to increase the understanding and acceptance of those stigmatized, including in stigmatized individuals themselves. What is often undervalued in such instances is the understanding of people's experiences with that which is stigmatized. This was illuminated in my findings by the knowledge sharing in Facebook groups such as Fittlife where menstruating people learned more about their own experience by learning about others' experiences.

Relative to the final point under Clair, Daniel, and Lamont's (2016) cultural resources, expert knowledge, I have found that in the absence of abundant bodies of research about stigmatized matters, expert knowledge comes to play a smaller role in destigmatization. Basic knowledge about that which is stigmatized is rarely enough to bust all myths, nor is it enough for legal and policy experts to drive legislative or policy work to address matters on an institutional level. Instead, personal experiences of those who are stigmatized or with stigmatized conditions play a greater role in the destigmatization process, as they claim agency over the matter and take hold of the construction thereof.

Destigmatizing in the institutional field from the bottom-up

Previous research outlines a number of difficulties implied with the business of stigmatized products (Ellen & Bone, 2008). Emphasis has been placed on marketing challenges such as managing advertising campaigns that are informative yet do not offend, encouraging word of mouth marketing (Ellen & Bone, 2008) among consumers, reaching out to customers with information about products (Katsanis, 1994; Wilson & West, 1981) as well as a lack of consumer research and user centered innovation. My findings indicate that while these aspects all hold true, they are alleviated through destigmatizing mechanisms. In these mechanisms, individuals and organizations play a large part in changing the conversation surrounding menstrual products, which subsequently contributes to destigmatization on an institutional scale.

The most important way that my findings advance our understanding of product stigma's effects on fields is how word of mouth marketing is being facilitated by creating communities. In these communities, products and related matters are

increasingly being discussed in an open and destigmatized way. When it comes to menstrual products this is occurring in groups such as Fittlife on Facebook. Creating communities enables consumers to learn more about their experiences of that which is stigmatized, including the use of stigmatized products by understanding the experiences of others, allowing them the comfort of feeling less alone and thus more comfortable with those matters. Creating communities also helps consumers learn about new or alternative types of products that are not necessarily those used most commonly. With knowledge about and access to products, as well as a supporting community to ask about advice, consumers become more comfortable with their stigmatized state, which contributes to destigmatization both on the individual level and subsequently on the organizational and institutional levels.

Communities, and social media at large, further provide new ways for innovators, entrepreneurs as well as incumbent manufacturers to reach consumers and in this way learn more efficiently about their needs, wants, and preferences. Louise Berg is one of the innovative entrepreneurs who does much of her market research on social media to pick up on needs and trends among consumers, which incumbents like Essity do as well. This contributes to destigmatization by stimulating the market to produce more and better products to cater to the comfort of consumers.

Furthermore, previous research by Katsanis (1994), Vaes (2014), and Wilson and West (1981) states that consumers tend to search for information about stigmatized products in advertisements. As discussed, my findings demonstrate that consumers are increasingly creating, and looking to, communities to find information rather than advertisements. My analysis regarding these two diverging points is that the increased creation of communities that are niched towards a certain discussion topic on social media is a recent phenomenon and thus has not been paid attention in previous research. However, I do argue that where the stigma is stronger and when consumers lack access to or knowledge about communities where they can find information, they look to advertisements. This is exemplified by Michael Moscherosch who discussed observations from rural Northern India where consumers have difficulties understanding how menstrual products work due to the vagueness of commercials. This was further confirmed by Tanya Dargan Maharajan who works with development solutions at the Menstrual Health Alliance, India (MHAI).

This provides a dilemma, since when the stigma is stronger, the advertisers adhere more to social norms about how stigmatized matters are displayed in public for fear of offending potential stigmatizers. Hence, advertisements are less informative and clear, and instead vaguer through, for instance, the use euphemisms. In other words, where information is sought the most, it is the least supplied. This further provides insight into the different stages of destigmatization. In the early stages when the stigma is stronger, marketing is more difficult than in later phases, where boundaries can be more acceptably challenged through more destigmatizing messages, as discourse about the stigmatized matter intensifies. In cultures where products are less stigmatized, however, it is possible for companies to elicit more explicit content about the use of the products, which drives the destigmatization process further.

Moreover, my findings indicate that due to broadcasting stations acting as gatekeepers between consumers and companies with regard to the advertisements that reach the public, many messages, whether they be informative or norm breaking, never reach their intended audience. Thus, it is not only up to manufacturers to initiate more 'real' communication with their potential users and other consumers. This is because for visibilizing advertisements that further destigmatization to reach the public requires that broadcasting agencies and the governments under which they act share the values and opinions that such information should indeed reach the public. Getting more and the right actors on board the destigmatization agenda is a complicated process and likely takes a greater number of cycles through the mechanisms for institutional level change to occur, specifically in cultures where the stigma is stronger.

In cases where 'real' communication does reach the public, the potential for symbols and attitudes about the stigmatized products to be reconstructed into matters considered normal, necessary, natural, or perhaps even positive, but at the least less negative, increases substantially. For each such step in the destigmatization process to gain traction, the more likely that the mechanisms will grow in fortitude the next iteration around. Pushing the boundaries that determine what kind of communication is acceptable and what is too controversial regarding the stigma is further aided by movements such as sustainability and feminism whose values frame and unpack menstrual matters in a different light, which gives them greater pertinence than the products do on their own.

8.1.2.3. Limitations to our knowledge of and suggestions for future research on destigmatization

Previous research on destigmatization acknowledges that organizations have a role in destigmatization processes but does not recognize their full potential in driving it. Destigmatization theory further mentions education as an aspect that can aid in destigmatization, but again does not go into much depth regarding what kind of education, how such education should be conducted, who should be educated and so forth. Through my findings, I demonstrate that organizations and education play important roles in the destigmatization process studied and our understanding thereof can be developed much further. One way, for example, would be cross disciplinary research between the disciplines of education, psychology, and organization research, which could potentially shed light on how educational programs can be developed and implemented to further destigmatization. Subsequently, the potential destigmatizing effects thereof would serve an interesting phenomenon to further this area of research.

Furthermore, while it emphasizes the importance of regulatory measures to support stigmatized groups, destigmatization research has overlooked the importance of legislative classification of stigmatized products. I demonstrate that in order to establish laws and regulations to further destigmatization, proper classification of products need to be in place and if they are not, then other measures need to be taken. For example, if proper classification and laws are not in place, a bottom-up approach to ensuring product regulation is warranted. One such approach is through standardization. As the standardization process that I have studied has yet to be finalized, however, it is difficult to say more how standardization will affect the field and the destigmatization process at large. Therefore, future research needs to include standardization, which can potentially shed light on how change initiatives toward destigmatization take form, are developed, executed as well as their potential destigmatizing effects.

Finally, one aspect where previous research and my findings differed somewhat is regarding how stigmatized matters should be portrayed in public such as in advertisements. This difference is likely related to how far along the process of destigmatization has developed. This is because most of my respondents are from and living in Sweden, where the destigmatization process has come quite far in comparison to many other places, especially in the Global South. Furthermore, being of a case study nature, my research only pertains to one product category,

meaning that the process could look somewhat different to other product categories.

8.1.3. Institutionalization, deinstitutionalization, and institutional change –the role of organizations in product destigmatization

In any given field, there are certain norms and expectations that are institutionalized (Scott, 2013). During my pilot study, I found that in the menstrual product field one of the most institutionalized aspects that guide ideas and behaviors within and surrounding it is the stigma. In order to shift these taken for granted ideas and behaviors, a fundamental institutional change needs to take place. While neo-institutional theory is generally broad and encompasses many aspects of society, destigmatization has been limitedly addressed in the literature on institutional change, in particular regarding product destigmatization (Lyons, Pek & Wessel, 2017). This section outlines how the deinstitutionalization and institutional change literature can be developed to include insights about destigmatization as a representation of one type of institutional change. My main contribution to this body of literature consists of increasing our understanding of how organizations contribute to institutional change processes, such as destigmatization of products, in particular through innovation and entrepreneurship.

Research on institutional change has discussed institutional entrepreneurship to this effect. Critique has been directed toward this research for being overly deterministic, arguing that in reality, peripheral actors such as entrepreneurs possess limited power to affect the direction of a field's progression, not least because doing so is already difficult for incumbents (Hardy & Maguire, 2008). In my literature review, I posed the question, "how is an actor in the periphery with limited resources and power over the field able to transform it?" Having carried out the study, I can now develop our understanding of it by arguing that entrepreneurs as well as incumbents affect the destigmatization of a product group through the innovation they produce and how they communicate, not least about those innovations, with their consumers. In this context, incumbents and entrepreneurs alike take an active part in driving destigmatization of products by framing the stigmatized matter as positive, normal, or important, often in relation to social movements or other popular concepts such as innovation, whether it be of communication strategies, products, or business models. For example, Essity

shake up the industry with their innovative communication by visibilizing everyday situations where menstruation would commonly be stigmatized, but instead show them in a light where they are completely destigmatized and normalized.

8.1.3.1. Corporations framing stigmatized matters in relation to social movements

To address the relatively limited previous research on the triadic interaction between social movements, institutions, and corporations, I advance our understanding of the role of organizations by demonstrating that companies are increasingly taking an active part in driving destigmatization. In particular, my findings provide an alternative view on previous research, which generally has seen corporations and social movements on opposing sides. This is done, for instance, by creating innovative products and business models like Louise Berg and Yoppie, challenging the social norms regarding what is appropriately shown in advertisements like Essity and by providing mental support to consumers like MonthlyCup. Until now, organizations have been limitedly discussed as an important level on which such change can be driven.

Scott (2013) discusses how shifting consumer preferences, political interests, and/or underlying power distributions can contribute to institutional change through changing parties in power, new legislation, changing enforcement practices, pressure toward more innovativeness, etc. To develop this knowledge, my findings go into greater depth in understanding the roots of those shifting interests and the ways in which they affect organizations and institutions, for instance, through consumers' specific concern for their health and the environment. These are matters that have been addressed to a limited extent by government but that relate to social movements. In other words, institutional theory generally holds that organizations will change as a consequence of institutional change, rather than drive that change themselves. The greater traction a social movement has in society, however, the more likely a given corporation will be to align their business with that social movements' values in order to continue to be seen as legitimate. This further explains why Essity is the strongest driver of destigmatization in comparison to its largest competitors, since they are based in Sweden, a country where feminism has one of its most forceful strongholds.

The notion that institutional change may need more momentum than individual entrepreneurs' transformative business is in line with Briscoe and Safford's (2018, p.117) as well as Schneiberg and Lounsbury's (1986, p.295) reasoning. I find that while affecting the field may still prove challenging for entrepreneurs, the potential momentum gained by actors working toward the same cause, such as destigmatization, their potency in changing the status quo increases. In other words, the simultaneous effects increase when both social movements and corporations work toward institutional change, such as in a destigmatization process – a combination that has been limitedly addressed in previous research. Scholars such as Dudová (2010) argue that it is only when stakeholders' frames are aligned with social movements that institutional change can occur but to what degree does this requirement have to be true? Thus far the destigmatization of menstrual products has occurred primarily on the individual and organizational levels, and it remains to be determined whether it will occur on the institutional level through regulative measures as well and how far this momentum of change will take the destigmatization. With the influence of the other mechanisms and factors driving menstrual product destigmatization including standardization, education, community creation, and not least a growing demand for better solutions and the social movements at their back and spreading increasingly across society, entrepreneurs have a greater ability to influence transformation in the field.

Furthermore, by not only acting toward the same goal simultaneously but independently, I find that by collaborating, actors can gain even more traction in driving destigmatization. This is, for instance, done through standardization. By aligning interests with social movements as well as other stakeholders, who have limited power in relation to, for instance, large incumbent manufacturers and governments, innovators, and entrepreneurs are creating bottom-up institutional change. Furthermore, whether other mechanisms support such an institutional change has much to do with the timing of the process. The farther the process has progressed and the more cycles of the destigmatization framework have iterated, the more traction institutional entrepreneurship is able to gain and propel.

As discussed in the literature review, previous research tends to assume that social movements and corporations, regardless of whether entrepreneurs or incumbents, are on opposing sides of the institutional change. What can be seen in this study is that, although incumbents are slower moving when it comes to developing truly

innovative products, which is understandable from the perspective of not wanting to creatively disrupt a field in which they are succeeding, they still contribute to institutional change in other ways. For instance, incumbent corporations are innovative in their communication strategies geared toward destigmatization, aiding in reconstructing symbols and attitudes by communicating in a 'real' way with their users such as Essity's different campaigns that aim not only at thought-provoking, but also at educating, visibilizing and starting a conversation with groups that have previously been excluded.

8.1.3.2. Institutional entrepreneurship in destigmatization

What has been less discussed in stigma theory and more developed in neo-institutional theory is the role of entrepreneurship in institutional change processes. Neo-institutional scholars such as Eriksson-Zetterquist (2009) and Scott (2013) have laid the groundwork for understanding how entrepreneurship can contribute to institutional change including aspects such as combining resources in new ways to create novel types of products, processes, or forms of organizing and gaining acceptance from a wider audience (Scott, 2013). I develop this body of knowledge with further insight into requirements for both entrepreneurship and innovation, where for instance openness and a fundamental understanding of consumers' needs and experience are of vital importance, as indicated, for instance, by Solgun Drevik. Innovation has been discussed briefly by stigma scholars such as Mirabito et al. (2016) in terms of product development and neo-institutional scholar Oliver (1992) in terms of technical developments that render institutionalized practices or resources obsolete and that pressure government and organizations into institutional change.

Furthermore, when discussing innovation as a factor that can contribute to destigmatization, this coincides with the role of products in and of themselves as contributors to destigmatization. While scholars such as Mirabito et al. (2016) have briefly touched upon the destigmatizing ability of developing products for stigmatized groups, I contribute with greater detail regarding how and what kinds of products that are developed contributes to destigmatization. For example, I argue that increasing the heterogeneity of menstrual product types on the market implies that a greater number of consumers are able to find kinds that suit them and their different needs throughout their cycle and life. By satisfying such needs, user comfort and confidence increases, which contributes to destigmatization.

An important aspect of innovating new types of products and solutions that contribute to destigmatization, by focusing on consumers' needs and wants, is the incorporation of market segmentation. In terms of segmentation in markets where products are stigmatized, Mirabito et al. (2016) have primarily focused on the downside thereof. On the contrary, I find that a lack of segmentation also contributes to stigmatization, as it leaves consumer groups with unmet needs such as menstruators with heavy flows who require many more products rather than products developed specifically for their needs. As with stigmatized products in general, I argue that it is more important to communicate in a destigmatizing way about the products, regardless of the segment they pertain to, rather than avoiding segmentation all together and risk stigmatization of segments because they cannot access the products, they need to feel comfortable and carry on with their lives in an as regular way as possible when menstruating.

While entrepreneurs in the menstrual product field have yet to earn the title field-level institutional entrepreneurs who "significantly transform institutional frameworks of rules, norms and/or belief systems," it can be argued that they are on the way to becoming technical and organization population-level entrepreneurs (Scott, 2013, p.117). In order to qualify as such, however, their innovativeness needs to spread to and gain acceptance from a wider audience. The increased traction among entrepreneurs who focus on new ways to develop products that pertain to either a certain market segment with particular needs or preferences, or even who generally aim to make life more practical for menstruators contributes to changing the menstrual product field drastically where little product development has existed since tampons and pads were first invented. In accordance with Eriksson-Zetterquist's (2009) line of arguing, however, these entrepreneurs' ability to influence companies "who occupy the central positions" to abandon institutional practices and participate in transformation on their own is limited (Djelic & Sahlin-Andersson, 2006, p.27). As discussed above, I argue that entrepreneurs' power to affect destigmatization increases when working together with, even if only through framing in accordance with, social movements to gain traction for their cause through the movement's momentum.

8.1.3.3. Deinstitutionalization and institutional change as destigmatization

As discussed in the literature review, the three components of an institution continuously move "from the conscious to the unconscious, from the legally

enforced to the taken for granted" (Scott, 2013, p.59). Accordingly, I have shown ways that the institutionalized menstrual stigma has affected the menstrual product field on all three levels of society. What else can be observed in my findings is that once institutional change starts to occur on one level, the other levels follow suit because of this iterative cycle of conscious to unconscious thoughts and behaviors among and between stakeholders and legal entities. For example, in accordance with the principles of the cultural-cognitive pillar of institutions, human actions consist of reactions to that which occurs in our social environments, which are based on interpretations of meanings consisting of symbols such as gestures, signs and words. These meanings evoke for instance emotions, ideas, and intentions in individuals (Scott, 2013).

In a similar sense, my findings indicate that individuals and organizations take an active part in reconstructing symbols and attitudes about stigmatized matters, which has a defining effect on the shifting shared conceptions in society and contributing to changing the institutional environment. This is exemplified in my findings by, for instance, Essity's move from using blue to red liquid to illustrate the absorption in pads. This signals to consumers openly and publicly that Essity do not consider the sight of red liquid, representing menstrual blood, as anything shameful or dirty that should be hidden as much as possible. By extension, the more such actions are taken throughout society, the more consumers will feel that they, too, can be confident, not needing to hide their stigmatized status. The less consumers feel they need to keep their stigma quiet, the more they open up about their needs, wants and experiences of menstruation, further showing others around them that doing so is okay and that they will not be shamed for it.

While a stigma, being a social and psychological concept can primarily be connected to the cultural-cognitive pillar of institutions, it has become clear through my findings that including all three pillars, in accordance with all three levels of society, is imperative in order to understand the nature of a destigmatization, or deinstitutionalization, process in a field context. Therefore, all three pressures toward deinstitutionalization are relevant and can be developed with new understandings from this study.

Functional pressures

Functional pressures are commonly associated with for instance changed consumer preferences (Oliver, 1992). Through my findings, I demonstrate that this includes aspects such as growing demand among consumers for better

solutions, but also changing market logics, more generally, on the market, or organizational, level. An illustrative example from my findings is when innovator and entrepreneur, Louise Berg, was told there was no market for new types of menstrual products although the current market remains largely unsegmented, and a number of large market segments are unfulfilled, lacking access to suitable and affordable products that cater to their needs.

Political pressures

Political power shifts can, according to for instance Scott (2013), trigger changes in legislation. One of my key findings is that political pressures can lead not only to meaningful legislative change. Two other important forms of regulation that should be included in political pressures is policy making and standardizing, which likewise can facilitate institutional change such as destigmatization. In other words, as discussed in the section on bottom-up destigmatization, it does not necessarily need to be government or regional legislators who take charge of rule changing for institutional change; such shifts can also originate in consumer initiatives, industrial initiatives, or NGO initiatives. Policy making as a destigmatizing force has further been acknowledged previously regarding, for instance, destigmatization of homosexuality as a consequence of pro-HBTQ rulings in the US Supreme Court (Mirabito et al., 2016).

Furthermore, it could even be argued that policies like the SDGs are a way that government and international governance call on new ways to organize when organizations are encouraged to adapt to and incorporate the SDGs into their corporate strategies and daily practices. In this way, sustainability becomes increasingly embedded in business as well as the breakdowns of both the pillars and of the 17 different goals. The explicit mentioning of menstrual health as a matter of global importance and interest in order to fulfil several of the goals, including health and well-being and gender equality, would likely have contributed to the destigmatization of menstruation and menstrual products in a more direct and driven way.

Social pressures

While I expected feminism to be a primarily individual level driver at the instigation of this project, it turned out to have already reached the institutional level. To some extent, albeit limitedly, feminism is affecting the public sphere and policy making toward destigmatization within the scope of what is regarded as a sustainable direction to develop society in. The dissemination of both feminism

and sustainability can be seen as social pressures that are challenging the previously taken for granted beliefs and meanings attributed to practices that were previously aligned within dominant groups in society and thus contributing to institutional change in the form of destigmatization of issues that can be related to feminism and/or sustainability such as menstrual products (Oliver, 1992).

8.1.3.4. Limitations to this study and suggestions for future research on deinstitutionalization and institutional change

Theory on institutional change and deinstitutionalization overlooks destigmatization as an example of an institutional change process. Through my findings, I demonstrate that destigmatization can indeed be seen as a form of institutional change, where previously taken for granted notions, values, norms, and behaviors are increasingly questioned, and, over time, changed. Future research should include destigmatization processes in studies on institutional change and advance this further to shed more light on the institutional aspects of such change processes and how destigmatizing ideas are disseminated from an institutional level to society at large in a top-down manner.

Furthermore, in the absence of top-down initiatives toward institutional change or destigmatization, research on deinstitutionalization and institutional entrepreneurship outlines that such change can be triggered from the bottom-up. Through my findings, I demonstrate that innovation and entrepreneurship have the ability to drive destigmatization, for instance, by pushing for standardization. This allows for peripheral actors to gain more influence of the field and create change, in particular through allying with social movements and other actors with limited power to affect the field. Another limitation to my study is that the standardization process has yet to commence officially and has thus been difficult to study, aside from the many discussions and meetings throughout my years writing this thesis. Thus, a suggestion for future research entails looking into the relationship between formal and informal aspects of the institution that uphold the menstrual stigma and subsequently, the potential effects that standardization might arguably have on destigmatization, according to my findings. Future research needs to include innovation and entrepreneurship in combination with standardization to shed light on the ability of these factors to create institutional change and destigmatization together.

8.2. Practical implications of this study

When it comes to the empirical implications, this study can have a number of effects. Firstly, it can aid companies in understanding the ways that a stigma in their field, especially when dealing with stigmatized products, can affect their business and how they might deal with that. In this study, they can find ways to act in order to drive destigmatization of the product, or at least to act in order to avoid stigmatizing, which can increase their perceived legitimacy among their potential users.

Secondly, this study points out that companies and social movements can gain by working together or at least benefitting off each other's efforts to further destigmatization. What becomes important is particularly that the company in question does not act in ways that contradict the values of the social movement, however, as that can counteract the legitimacy of their positive efforts as well.

Third, this study can benefit social movements such as feminism, menstruating people, and society in a broader sense by indicating ways in which public health can be furthered by decreasing stigmatization of menstruating people, increasing the offerings on the menstrual product market to address the needs and preferences of more user segments, gearing future product development toward a more sustainable agenda, and not least increasing the control and transparency regarding product safety for people and the planet.

Finally, research such as this study that is conducted on stigmatized matters, particularly research pertaining to the destigmatization of stigmatized matters, has potential to further the destigmatization in and of itself. This occurs, for instance, by adding to the discourse, which tends to be lacking when it comes to stigmatized matters, and by emphasizing and shedding light on such processes and the key mechanisms driving them.

8.3. Conclusions: Normalizing the Natural

When something is stigmatized it causes people to want to disassociate themselves from it. This teaches us to develop defense mechanisms even in our inevitable relationships with matters that are stigmatized, regardless of whether it is an inherent part of us, something we have gone through, something we experience regularly or something that we need in order to live our lives (Ashforth & Kreiner, 2014b). Many stigmas pertain to matters that are natural in a purely biological sense including feces, scars, stretchmarks, wrinkles, and so on, with various fortitudes in their social implications. When a matter that is biologically natural is viewed as something that should not be discussed openly, which should be hidden, silenced, and preferably not there at all, it is not seen as something normal. When natural matters are not seen as normal, this can have negative consequences for peoples' well-being, not least mentally. In order to reverse taken for granted notions and behaviors from maintaining negative connotations with natural matters, all levels of society need to be involved in driving such a process. Because social norms hold that we should act in line with culturally taken for granted beliefs since going against them can make us socially vulnerable to shame and discrediting.

Nonetheless, because society is becoming increasingly accepting of human differences and yet, equal worth, people and organizations are breaking those norms for the good of the people who risk stigmatization, and the very way to normalize the natural is by acknowledging its true nature. In the case of menstruation and menstrual products, this implies displaying red blood where menstruation is natural: between the legs. It entails displaying red blood inside a pad, on a tampon or in a menstrual cup in advertisements – we are not there yet, but the boundaries keeping companies from doing so are being challenged continuously. It means acknowledging the pain and impracticability of menstruation openly; that it is a natural and healthy process but that you should not be expected to wear white, tight jeans and do cartwheels in a meadow, because that is an example of the total fiction that has been displayed in menstrual product ads for too long. It means that a man, boy, girl, woman or anyone else should be able to buy menstrual products without feeling ashamed or embarrassment at the cash register. In order to change these symbols and attitudes associated with menstruation, everyone should know what menstruation entails not only from a

biological perspective, but also the experience, in order to create an understanding and break the myths upholding the stigma.

On an organizational level, more types of products are needed to meet the real demands of different consumer segments and not only those which are most efficient and profitable to produce and sell in bulk. While the menstrual stigma is widespread and affects individuals across all of society, it is individuals, organizations and social movements that are driving the destigmatization or the institutional change. This is rather unusual; in most cases, it is arguably government that drives formal change including rule-making. In the case of menstrual products, however, rule-making is driven by individuals and organizations prescribing to social movements such as sustainability and feminist values that are working toward standardizing. One of the arguments behind the work is that the products need to be reclassified in order to become destigmatized. In other words, menstrual products should be seen as a matter of public health rather than consumer goods in order to be destigmatized.

Those individuals and organizations who endure social questioning, ridicule and so on, but are nonetheless fighting for the destigmatization of menstruation and menstrual products, are increasingly viewed as brave, daring and standing up for what is right. Simultaneously, shame is starting to shift from those who menstruate and talk openly about it toward those who are unknowledgeable or ignorant with regard to such matters. It is, hence, becoming disgraceful not to know about the experience of menstruation, rather than going through it. This can be seen as a sign of a fundamental institutional change taking place.

To conclude, the primary result of this study is, as the purpose states, an increased understanding of the mechanisms that contribute to the destigmatization of menstrual products. In addressing this purpose, I have developed a framework that takes into consideration previous research on destigmatization processes and advanced it to apply more accurately to the destigmatization of products, more specifically than previous research, yet more generally than menstrual products in particular.

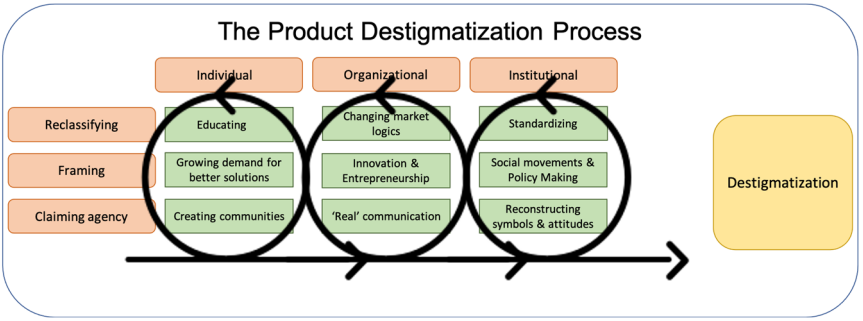

Figure 5: Final framework of product destigmatization

I have identified three mechanisms that drive the destigmatization of menstrual products on all three levels of society. Reclassification is driven through education on the individual level, changing market logics on the organizational level and standardizing on the institutional level. By reclassifying stigmatized products as normal, natural or even positive, they become destigmatized. As consumers become more educated, they place new demands on organizations and the marketplace, resulting in changing market logics. These logics are also affected by the institutional level where legal classification and other regulative functions play important parts. For instance, by classifying the products as public health goods, which disseminates the view that a product category is seen as important for the public to remain or achieve healthiness, as opposed to something strange, dirty and abnormal. An example of a factor that has not been studied explicitly but that is likely to have a bearing on the reclassifying products is the religiosity of a given social context. Stigma fortitude often correlates with religiosity, where greater religiosity correlates with stronger stigmatization and vice versa. In order to destigmatize in a religious setting, greater emphasis is likely needed on reclassifying products from being seen as indecent or obscene toward being associated with for instance health and individual choice such as birth control, condoms, and so on.

Framing stigmatized products as positive occurs among individuals and organizations through the institutional level, resulting in a growing demand for better and more sustainable solutions, met by increased innovation and entrepreneurship on the organizational level. An example of a product group that is not menstrual products where destigmatization is driven largely through framing in terms of, for instance, sustainability and associated education,

communication, changing market logics, etc. is that of second-hand clothing. In that market, symbols and attitudes are being redefined where pieces of clothing are increasingly seen as unique, and trendy, as opposed to dirty and passé.

Finally, claiming agency of stigmatized products on all three levels of society represents one of the least tangible mechanisms, although it has great impact on destigmatization. Claiming agency changes the way we communicate about them and is thus not only a result of destigmatization but drives destigmatization in and of itself, signaling power and control of one's body and oneself. On the individual level, creating communities enables open discourse about stigmatized matters, mental support, and learning among those involved. This contributes to greater comfort about that which is stigmatized, leading to destigmatization. On the organizational level, communicating in a 'real' way about that which is stigmatized, for instance, by visibilizing them indicates to individuals and on a broader societal level the normality of everyday experiences, thus counteracting pressures toward hiding, silencing and making them invisible. Depending on how far the destigmatization process has come in a given context, the degree to which visibilizing between manufacturers and users varies.

The framework includes the three identified driving mechanisms, with factors through which destigmatization is driven on each level of society: the individual, organizational, and institutional. I see the process as iterative, where each mechanism is driven through every level in a looping way, where destigmatization is the end goal. The process requires many repetitions in order to fully destigmatize the product in question, but for every fulfilled cycle, education about the target of destigmatization is slightly broader and deeper, communication is somewhat more open, and more innovation is happening, and symbols and attitudes become reconstructed and so on. Once the process has gone through enough cycles, the product will be destigmatized.

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10. Appendices

10.1. Appendix 1. List of interviews in order of occurrence

Last Name	First Name	Position	Organization	Type of data	Duration
Persson	Anna-Lisa	Textile expert	the Swedish Consumers' Association	Phone Interview	2 hours
Rosen	Amanda	Engineer and inspector	The Swedish Chemicals Agency	Phone Interview	1:40 hours
Lloyd	Christina	Director of Clinical Medical Regulatory, former gynaecologist	Novo Nordisk	Interview	1 hour
Beskow	Cecilia	Head of standardization	SIS	Personal Interview	45 mins
Nilsson	Dan	Head of standardization healthcare	SIS	Joined Meeting and interview	2 hours
Lyckman	Pontus	Head of standardization consumer products	SIS	Joined Meeting and interview	2hours
Antoni	Alexandra	Project leader of mechanical contraceptives standardization	SIS	Joined Meeting and interview	2 hours
Hoffman	Nova	Co-Founder	Yoppie	Interview	1.5 hour
Loboda	Kristina	Internal Market Trade Advisor	National Board of Trade	Interview	1 hour
Drevik	Solgun	Product developer	fd. SCA	Phone Interview	2 hours
Cammersand	Tuula	Project leader	SIS	Phone Interview	15 mins
Stein	Yvonne	Product safety and standardization at the consumer department	The Financial Department	Email contact	5 mins
Drevik	Solgun	Product developer	Formerly SCA	Phone Interview	1 hour
Edmark	Helene	Business Area Manager	SIS	Phone Interview	1 hour
Johansson	Anna	Project leader	SIS	Interview	30 mins
Edmark	Helene	Business Area Manager	SIS	Interview	30 mins

Jonsson	Anna	Projektledare	SIS	Joined Meeting and interview	3 hours
Edmark	Helene	Business Area Manager	SIS	Joined Meeting and interview	3 hours
Berg	Louise	Founder and CEO	Sibship	Joined Meeting and interview	3 hours
Berg	Louise	Founder and CEO	Sibship	Interview	30 mins
Rosen	Amanda	Inspector	The Chemicals Agency	Interview	1:15 hours
Persson	Anna-Lisa	Textile expert	the Swedish Consumers' Association	Phone Interview	30 mins
Odlén	Ingrid	Masterstudent, Produktutvecklare	LU	Interview	45 mins
Sjögren	Anna	Project leader TC Sex toys	SIS	Phone Interview	10 mins
Berg	Louise	Founder and CEO	Sibship	Phone Interview	15 mins
Berg	Louise	Founder and CEO	Sibship	Phone Meeting	30 mins
Perby	Lisa	Founder and CEO	MonthlyCup	Phone Interview	2.5 hours
Perby	Lisa	Founder and CEO	MonthlyCup	Meeting and interview	2 hours
Boström	Erika	Vice CEO and quality manager	MonthlyCup	Meeting and interview	2 hours
Lindblad	Susanne	Regulatory Affairs Manager/Product safety director	Essity	Phone Interview	2 hours
Perby	Lisa	Founder and CEO	MonthlyCup	Round table meeting - Almedalen	2 hours
Lindström	Therese	CEO	ImseVimse	Round table meeting - Almedalen	2 hours
Larsson	Gerda	Director and co-funder	the Case for Her	Round table meeting - Almedalen	2 hours
Berg	Louise	Founder and CEO	Sibship	Round table meeting - Almedalen	2 hours
Davidsson	Magnus	Standardization manager	SIS	Round table meeting - Almedalen	2 hours
Fransson	Magnus	Business Development	Wargön Innovation	Round table meeting - Almedalen	2 hours
Winzell	Claes	Research and business developer	Rise	Round table meeting - Almedalen	2 hours
Edmark	Helene	Business Area Manager	SIS	Round table meeting - Almedalen	2 hours
Wågman	Ruben	Policy and impact administrator	SIDA	Round table meeting - Almedalen	2 hours
Lindblad	Catrin	Engineer	Rise	Presentation and meeting at SIS	10 mins

Larsson	Gerda	Director and co-funder	the Case for Her	Presentation and meeting at SIS	10 mins
Quint	Chella	Founder and researcher	Period Positive	Presentation and meeting at SIS	11 mins
Stevens	Gil	External Relations and sustainability director	Edana	Presentation and meeting at SIS	1 hour
Edmark	Helene	Affärsområdeschef/Business Area Manager	SIS	Meeting at SIS	10 mins
Perby	Lisa	Founder and CEO	MonthlyCup	Meeting at SIS	10 mins
Lindström	Therese	CEO	ImseVimse	Meeting at SIS	10 mins
Fransson	Magnus	Business Development	Wargön Innovation	Meeting at SIS	10 mins
Henriksson	Jens	EU questions	the Swedish Consumers' Association	Meeting at SIS	10 mins
Rosen	Amanda	Inspector	The Swedish Chemicals Agency	Meeting at SIS	10 mins
Davidsson	Magnus	Standardization manager	SIS	Meeting at SIS	10 mins
Lindblad	Susanne	Regulatory Affairs Manager/Product safety director	Essity	Informal interview and meeting at SIS	15 mins
Peri	Daniella	CEO and co-founder	Yoppie	Phone interview	1.5 hours
Moscherosch	Michael	Director R&D, External Innovation & Alliances	Johnson & Johnson	Webinar	15 mins
Jalota	Suhani	CEO and Founder	Myna Mahila Foundation	Webinar	15 mins
Dargan Mahajan	Tanya	Development solutions	Menstrual Health Alliance India	Webinar	16 mins
Mandal	Jaydeep	Foundar and MD	Aakar Innovations	Webinar	17 mins
Moscherosch	Michael	Director R&D, External Innovation & Alliances	Johnson & Johnson	Skype interview	1.5 hours
Lindblad	Susanne	Regulatory Affairs Manager/Product safety director	Essity	Interview	1 hour
	Anders	Regulatory affairs	Essity	Interview	10 mins
Ekstedt	Sofia	Lead Product Developer	Essity	Interview and presentation	1 hour
Anebreid	Lena	Product Assortment Director Feminine	Essity	Interview	30 mins
Hallberg	Sofia	Nordics Communications Director	Essity	Interview and presentation	45 mins
Smith	Jenny	Regional Marketing Manager, Nordics	Essity	Interview and presentation	1 hour
Riise	Ellen	Senior Environmental Specialist and Sustainablity Product & Services	Essity	Interview and presentation	1 hour
Wormbs	Gunilla	Global Laboratory Director	Essity	Lab tour	1 hour
Jensen	Ida	Laboratory Engineer	Essity	Lab tour	1 hour
Mastorp	Oda	Brand Manager Libresse	Essity	Meeting	10 mins

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Normalizing the Natural

A study of menstrual product destigmatization

In this thesis, I develop our understanding of the destigmatization process to include product destigmatization. Previous research on destigmatization has primarily focused on that of individuals, groups, organizations, and industries. However, there is an abundance of empirical evidence showing that a product stigma has a significant bearing on market logics, including legal classification of products, marketing challenges, as well as a lack of innovation and entrepreneurship.

Around 300 million people menstruate on any given day around the world, yet the market for menstrual products consists predominantly of homogeneous products that have been around since the late 1800s or early 1900s. Simultaneously, there is a surprising lack of regulations and standards, in particular on a global level, ensuring a widespread safety for so many users around the world. Other products used on or intimately with the body are generally heavily regulated and/or standardized. In a pilot study investigating these seemingly contradicting notions, I found that one of the most fundamental reasons for the status quo is grounded in the stigma on menstruation and menstrual products.

Through a multi-method approach, combining aspects of case research, action research, and document studies, I examined the menstrual product field from a synthesis of theory including stigma, destigmatization, and neo-institutional. I developed a framework through which product destigmatization can be understood. Therein, I emphasize three primary mechanisms driving product destigmatization, and how they act on all three levels of society. The mechanisms comprise reclassifying, framing, and claiming agency.

My main contributions are threefold. First, I deliver a comprehensive study on destigmatization that includes different dynamics and levels, which has not been done previously, in particular regarding menstrual products. Secondly, I find that in contrast to what previous research demonstrates, destigmatization processes do not only occur from the top-down, but also through bottom-up initiatives. Finally, I advance our understanding of the role of organizations, including entrepreneurs, and their innovative capacities to affect institutional change.

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