

SYMPOSIUM: MENSTRUAL JUSTICE IN MOTION /
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THE BIOPOLITICS OF MENSTRUATION IN HUNGARY: THEN AND NOW

Abstract: *This article focuses on postwar Hungary, including the transition from state socialism to peripheral capitalism. This era is especially important as during the decades of cold war one of the main claims was that social and welfare rights – including the right to healthcare – were exemplary in state socialism and much more advanced than in the capitalisms of the West. This article argues, however, that even though social welfare rights were advanced in certain jurisdictions and fields, they did not eradicate patriarchal views. Neglecting women during their period also shows that protecting motherhood did not automatically increase women's rights. While women's welfare rights have been underdeveloped, there have been some significant achievements in the fields of maternal care and childcare.*

Key words: Menstruation, Stigma, Discrimination, Tampon, Clinical Trials, Cold War, Healthcare, State Socialism, Hungary.

1. INTRODUCTION

Menstruation has been a continual source of discrimination against women throughout the history of humankind – and even justification for misogyny across all cultures. For a long time, false beliefs and superstitions dominated the attitudes towards menstruating women and later it was ignored or misunderstood by science. Many believed that menstruation was a “curse”, and it took centuries for even scientists to understand the process of menstruation. It was often considered as a sign of female

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imperfection or an emotional sorrow for not being pregnant. The “weeping of a disappointed womb”¹ and its related “physiological emergencies” were used for justifying the exclusion of women from certain professions. In addition, dangerous myths and prejudices also interfered with science. Wrong ideas and biases about menstruation were often a major source of discrimination. All this resulted in the stigmatization of menstruating women, which also led to making menstruation a taboo. Menstruation still plays a very important element in estimating the start of the pregnancy. Menstruation always played an important role in the assessment of the duration of pregnancy. Furthermore, when genetic tests did not exist, even in paternity cases the time of the last menstruation served as evidence (the expected birth is usually 280 days from the first day of the preceding menstruation).

During the time of state socialism in Hungary an entirely different approach emerged. While women had jobs – they had to work – and were not excluded (at least de jure) from any profession, their healthcare needs were still often neglected. This also included access to menstrual products that were available to women in the West.

This article predominantly focusses on postwar Hungary, including the transition from state socialism to peripheral capitalism. During the Cold War, one of the main arguments for the self-claimed superiority of state socialism was based on the protection of social and welfare rights, including the right to healthcare.² This article argues that regardless of the development of social rights, the patriarchal views of the society remained dominant.³ The protection of mothers and children had significant results and was more important than promoting the rights of women, even in the field of healthcare. As a result, because of their role in social reproduction, as mothers, women were supported by a wide range of social welfare measures. Menstruation was regarded as a taboo, and this led to women being neglected during their period. Silencing women’s needs also shows the differentiation between mother and child protection and women’s rights.

The introduction of childcare allowance (with the Hungarian Acronym: GYES) in 1967, for example, was central to this view of women. It was adopted by Government Decree 3/1967. (I. 29.), and its implemen-

1 Yager, S., 2013, Weeping of a Disappointed Womb Themes in Mythology about the Female Reproductive System, *The Atlantic*, October 2, (<https://www.theatlantic.com/health/archive/2013/10/weeping-of-a-disappointed-womb/280166/>, 12. 5. 2025).

2 *Ibid.*

3 Varju, M., Sándor, J., 2024, Needs Over Rights: The Right to Health in State Socialist Hungary and Its Implementation, *Pravni zapisi*, Vol. 15, No. 1, pp. 191–218.

tation rules by Decree 3/1967. (II. 26.) of the Ministry of Education. This childcare allowance was paid for all children born on or after January 1, 1967. At the time of its introduction, the Hungarian GYES was new and most generous childcare allowance in the world. The favorable conditions of this allowance could be explained by the prevailing strong pronatalist views and the high abortion rate in Hungary. While childcare and maternity care were important issues, menstruation and women's needs were not even mentioned in public debates.

Access to menstrual products was not part of the recognized right to health. Issues related to menstruation were discussed in the context of sport and physical education.⁴ Sex education also included some basic information about menstruation, but since it was usually medical doctors who provided this information – the emphasis was on avoiding unwanted pregnancy.

2. THE SLOW SCIENCE OF THE FEMALE BODY AND HUMAN REPRODUCTION

The history of biomedical research is full of tragic and scandalous episodes for women. Research into women's biology, healthcare needs and anatomy has been plagued by several erroneous scientific paradigms over time. In almost every field, knowledge about women has come much later than similar scientific discoveries about men. Until the Age of Enlightenment, women were thought to exhibit the male genitals turned inside out. The scientific approach to women's reproductive role also followed the wrong path for a remarkably long time. While the sperm cell was seen through a microscope by Antonie van Leeuwenhoek as early as 1677,⁵ the egg cell was described and its role in human reproduction discovered only much later. Although Karl Ernst von Baer discovered the mammalian egg cell as early as 1826, the human egg cell was only first described in a scientific journal by Edgar Allen in 1928.⁶

Women were systematically underrepresented and even excluded from clinical trials until the last decades of the 20th century. The argument for this exclusionary position was often based on concerns about the

4 E. L., 1964, Lehet-e sportolni a menstruáció alatt? (Can one do sports during menstruation?), *Sport és tudomány*, Vol. 8, No. 1–12, pp. 392–394.

5 Howards, S. S., 1997, Antoine van Leeuwenhoek and the discovery of sperm, *Fertility and Sterility*, Vol. 67, No. 1, pp. 16–17.

6 Cleghorn, E., 2021, *Unwell Women: A Journey Through Medicine and Myth in a Man-Made World*, London: Weidenfeld & Nicolson, pp. 250–251.

risk to pregnant women. Menstruation was a taboo or described by myths and as a result, scientific knowledge about menstruation developed very slowly. In 1912, Sir Almroth Wright, the immunologist who developed a typhoid vaccine, wrote a letter to *The Times* of London stating: “No doctor can ever lose sight of the fact that the mind of woman is always threatened with danger from the reverberations of her physiological emergencies.”⁷

Lack of menstrual products and secrecy were connected by shame. Mary Putnam Jacobi,⁸ who was the first woman allowed to study medicine at the University of Paris and the first woman to earn a degree from pharmacology in the United States, rightly pointed out that in the absence of proper sanitary items necessary for menstruation, women are forced to handle their periods secretly. Menstrual etiquette governed workplaces, schools and even family homes. Jacobi challenged the “overpathologized” view on menstruation.⁹ Jacobi sought proof, so she monitored women’s energy levels and vital signs throughout their whole cycle and found that women were not, in fact, incapacitated each month. This important discovery helped release women from the society-imposed prison of their own bodies.¹⁰ The complex code of secrecy and female behavior intended to spare others from inconvenience did not cultivate any discourse on periods. Research into women’s health has been delayed and underfunded for a long time. The delay was significant even in case of serious diseases, yet hesitancy can be observed even today in regard to issues related to wellbeing, sexual and reproductive health. Systematic dismissal of women’s pain and discomfort is based on “being seen as unreliable, irrational or exaggerating their pain.”¹¹

2.1. THE BIRTH OF THE MENSTRUATION TAMPONS

Before tampons were used for menstruation, they had other purposes, such as applying medication against gynecological infections. They were also used as contraception. Tampons with strings only became available

7 Wright, A., 1912, Militant Hysteria, Letter to the Editor, *The Times*, London.

8 Mary Putnam Jacobi (1842–1906) was a physician, teacher, scientist, writer, and suffragist.

9 Putnam Jacobi, M., 1878, *The Question of Rest for Women During Menstruation*, London: Smith, Elder and Co., cited in Cleghorn, E., 2021, p. 150.

10 Some rituals to isolate menstruating women from the rest of society remained even in the late 20th century. See Gagoshashvili, M., 2006, *Law and Tradition: Women’s Reproductive Decisions in Urban and Rural Georgia – Case Studies of Tbilisi and Svaneti*, MA thesis, Budapest, Central European University.

11 Ballantyne, A., Women in Research: Historical Exclusion, Current Challenges and Future Trends, in: Rogers, W. A. et al., (eds.), 2023, *The Routledge Handbook of Feminist Bioethics*, New York: Routledge, pp. 256–270.

in the 20th century. In 1931 Earle Haas (1888–1981), a physician, developed the cardboard applicator for tampons designed to absorb menstrual blood.¹² The tampon was made of a thick strip of cotton attached to a string for easy removal. In 1933, Haas patented his invention and sold it to Gertrude Tendrich, who later established her own tampon brand. In 1945, Judith Esser-Mittag, a German gynecologist, designed a tampon that did not require an applicator, known as the “digital tampon”.¹³ Such tampons later became very popular, because of their small size and easy use. They have also provided women more control over their own bodies. Tampons opened new possibilities to do work and sport and also helped overcoming some taboos related to understanding and touching¹⁴ the female body.

No wonder that the popularity of tampons began to increase in the 1960s and 1970s in the developed countries. This trend and the evolution of menstrual products show that while secrecy slows down technological progress, speaking openly about the needs enhances the technology and choices. In many countries special activism was needed to break through the menstrual taboo. In the Netherlands for instance, Elly Brink advocated breaking the menstrual secrecy.¹⁵

2.2. ACCESS TO SANITARY ITEMS IN THE STATE-SOCIALIST HUNGARY

Openness about menstruation was in sharp contrast with the life of many women during the state socialism period. Although in Hungary everyone was a financially slightly better off than in the 1960s, and in the 1970s many people had tiny holiday homes or cars and there were maternity benefits – what women hid in their underpants every month remained (literally) a closely guarded secret. Yet at that time this physical vulnerability was a burden for all women, because everyone went to work early in the morning; some to the factory, some behind a counter, some to teach children, but the state leaders did not even consider spending foreign currency on imports that would have eased the suffering of millions of women – because no one talked about it and on the outside everything seemed fine. In other words, all Hungarian women lived in

12 Weissfeld, A. S., 2010, The History of Tampons: From Ancient Times to an FDA-Regulated Medical Device, *Clinical Microbiology Newsletter*, Vol. 32, No. 10, pp. 73–76.

13 Only one finger (or digit) is needed to insert the tampon.

14 Needless to say, that masturbation and female pleasure were also taboos.

15 Knoop, D., 2024, Ode aan Elly Brink: Het menstruatietaboe doorbreken (in English: Ode to Elly Brink: Breaking the menstrual taboo), (<https://www.amsterdammuseum.nl/topic/vrouwen-van-amsterdam/bijdrage/108220-het-menstruatietaboe-doorbreken>, 28. 4. 2025).

enforced menstrual poverty and, because of our isolation from the West, we did not know what we were missing. The situation was not any better in other former socialist countries and others have written about it.¹⁶ Yet mass production of tampons and Tampax was already widespread in the West in the 1960s and 1970s.

A gynecology textbook for medical students published in Hungary in 1957 analyzed the physiological processes of menstruation at length. It also mentioned the hygienic aspects and recommended a good absorbent, soft, freshly boiled gauze pad or gauze. It also mentioned that in some countries, tampons were used for menstruation. All this shows that Hungarian gynecologists were already familiar with tampons, even if Hungarian women did not have access to them at the time.¹⁷

In the 1970s Hungary, similarly as in other state-socialist countries, the ruling party was very proud of the social and welfare rights, including also to the right to health. These rights were often contrasted with the situation in the West. Mother and childcare were given special attention partially because of pronatalist sentiments¹⁸ developed already after the First World War and reinforced by the socialist states after the Second World War. The quantitative nature of welfare rights and the ignorance of the qualitative needs of women could be well demonstrated by the story of the access to tampons. Non-reproductive issues, such as period, sexual health or pleasure, were not part of the established right framework. Hungarian women did not have access to sanitary pads and tampons until the 1980s. The Iron Curtain made it impossible to buy these products or even to have information about them. Women suffered silently and discreetly and there were no significant changes until the political transition.

The idea of producing menstrual tampons for women in Hungary appeared already in the 1970s. However, the process of developing production indicated hesitation: clinical trials and tests were slow, the start of production was delayed, and this can be explained by the prevalent medical paternalism and some patriarchal fears that women could gain more control of their bodies. Paternalism at the levels of the state and the medical profession suggested that the state and the doctors know best. Women's needs were also often trivialized or neglected in other relevant areas.¹⁹

16 See Sitar, P., 2018, Female Trouble: Menstrual Hygiene, Shame, and Socialism, *Journal of Gender Studies*, Vol. 27, No. 7, pp. 771–787.

17 Árvay, S. et al., *Nőgyógyászat*, 1957, Budapest, Medicina, p. 45.

18 Sándor, J., Demographic Influences on the Regulation of the Female Body in Hungary, in: Feuillet-Liger, B., Orfali, K., Callus, T., (eds.), 2013, *The Female Body: A Journey Through Law, Culture and Medicine*, Brussels, Bruylant, pp. 115–131.

19 Sándor, J., Lászlófi, V., 2023, Women Facing the Committee: Decision-Making on Abortion in Postwar Hungary, *Hungarian Historical Review*, Vol. 12, No. 3, pp. 493–523.

2.3. THE HISTORY OF THE HUNGARIAN TAMPON

The company that produced the first tampons in Hungary had a long history. It was the RICO Wound Dressing Company which was founded in 1908 as a Budapest subsidiary of the Czech cotton company Richter & Co. (this is where the name of the factory RICO comes from). From 1919 RICO, as a state-owned company, was under the jurisdiction of the then Ministry of Public Welfare. Until 1948 it operated as the National Health Materials Warehouse – RICO Hungarian Wound Dressing Company Ltd. From 1950, it continued its activities under the name RICO Wound Dressing Company. As the country's only bandage factory, its main task was to supply the country's population, hospitals, and dispensaries with cotton wool, bandages, wound suture materials, and various equipment.²⁰

Until the 1990s, Hungarian women used household cotton wool, which they also applied for other cleaning purposes in the home. It could be bought in large nylon bags, which they then tore into suitable pieces and made small packages that they covered with paper and carried around in their purses. Since the cotton balls were not secured with anything, they often slipped and blood would seep through their clothes, and it was difficult to walk with the cotton balls, so the women went to work with small steps, walking like penguins – of course, not telling even their family members about these difficulties. Because of the Iron Curtain, women were unaware of other options for managing their periods: there were no advertisements, no foreign TV channels, not even magazines to inform them about their options.

A gradual change began when the head of the RICO company initiated a change in this miserable situation. In October 1975, László Kántor, the CEO of the RICO Company sent a letter to the Ministry for Health in which he stated that RICO agrees to introduce the production of menstruation tampons in Hungary.²¹ He stated that the company had conducted preliminary market research, and the chief engineer and chief technical manager had been on a study tour to Switzerland and West Germany. The production, however, required investment in machinery, for which the company needed a loan. Kántor requested financial assistance so that RICO could start this project.

The Ministry responded that it had no objection to the production of tampons in Hungary, however it referred to the population policy goals

20 RICO, *Kötszerművek 60 éve az egészségügy szolgálatában*, 1973, *Egészségügyi Dolgozó*, Vol. 17, No. 1–12, p. 10.

21 Hungarian National Archives (Magyar Nemzeti Levéltár) HU-MNL-OL-XIX-C-2-d Anya-, csecsemő-és gyermekvédelmi főosztály, 1952–1983.

where there were more important goals than producing tampons, stating that those goals should have priority.²²

In 1977, 1,000 tampons were produced for testing. The Ministry of Health requested the expert opinion from the National Institute for Obstetrics and Gynecology.²³ The subsequent clinical trial had many different elements. Mucosal irritation was tested in albino rabbits. Tests were also conducted for toxicological and hemolytic effects. On December 20, 1977, the Ministry of Health sent a letter to RICO stating that “[g]iven that the menstrual tampon represents a significant improvement in the personal hygiene of the female population, our department does not raise any objections regarding its marketing.”²⁴

Scientific discourse about women’s health, body, and especially sexual and reproductive functions are often distorted, delayed, or challenged by the masculine and paternalistic norms within society. This is partly due to the fact that there are significantly less women in the field of science, and until the mid-20th century women scientists were so rare that their views and research interests could not be adequately represented.

During the 1980s one of the biggest challenges in the use of menstrual products was the occurrence of toxic shock syndrome. The US Centers for Disease Control (CDC) released shocking figures regarding the number of menstrual-related cases of toxic shock syndrome.²⁵

The worldwide fear of the toxic shock syndrome fell at the time as the conclusion of the clinical trials of the menstrual tampons.²⁶ These cases, occurring during the Hungarian clinical trials of the menstruation tampons, led to the Ministry and doctors developing cautious attitudes towards tampons.

In 1977, the Hungarian tests were conducted on tampons made from 100% cotton.²⁷ However, in 1981, further research was necessary because the plan changed to containing up to 50% viscose.²⁸ In 1982, it was finally time to create detailed instructions for use. The instructions also described in detail the signs of toxic syndrome and stated that one should

22 *Ibid.*, Ministry for Health, 14 October 1976.

23 *Supra* fn. 14.

24 Translated by author.

25 Up to 100 cases were reported in a single year, with significant outbreaks in Denver, Colorado. Wroblewski, S. S., 1981, Toxic Shock Syndrome, *The American Journal of Nursing*, Vol. 81, No. 1, pp. 82–85.

26 Although the 1980s was a chaotic time for the tampon industry, in 1983 tampons went to space for the first time, with American astronaut Sally Ride.

27 Hungarian National Archives (Magyar Nemzeti Levéltár) HU-MNL-OL-XIX-C-2-d Anya-, csecsemő-és gyermekvédelmi főosztály, 1952–1983.

28 *Ibid.*

immediately consult a doctor in the event of fever, weakness, dizziness, vomiting, or rashes.²⁹ In January 1983 the standards for the RICO tampon were finally approved, and the decision came into force in July.³⁰

2.4. MEDICATION FOR MENSTRUAL CRAMPS

While menstrual needs were not met during the state-socialist period, because of the lack of adequate hygiene products, pain management nevertheless was available in the form of cheap and available medication. From the late 1960s almost all girls and women carried No-Spa tablets in their purses. This Hungarian medication, with drotaverine as the active ingredient, was developed by two Hungarian chemical engineers, Zoltán Mészáros and Péter Szentmiklósi.³¹ Their innovation immediately drew widespread attention in the scientific and social life of Hungary because of its unique mechanism. Drotaverine acts in a different way than the active ingredients in traditional painkillers. Its special feature is that it directly eliminates smooth muscle spasms that cause pain, while painkillers typically only relieve the sensation of pain.

Drotaverine was introduced in Hungary in 1962 under the brand name No-Spa. In the 1970s it became increasingly successful even in the international markets. It remains a significant export item produced by the Hungarian pharmaceutical industry. No-Spa became Chinoin's most widely sold original drug as it was also used for various pains, in addition to menstrual cramps. No-Spa production increased from an initial 1 ton in 1964, to 110 tons in 1981 and 160 tons in 1987, due to significant exports to the Soviet Union.³²

In 1981 the *Hungarian Journal of Gynecology* published an article on the treatment of dysmenorrhea. According to the authors "painful, crampy menstrual bleeding occurs in approximately 30–50% of women of childbearing age, a significant number of whom also require treatment. According to literature data, one in ten women becomes partially or completely unable to work for one or two days per month due to the symptoms accompanying menstruation. (A significant proportion of teenage

29 Safety is a main concern in the laws of different countries that regulate this field, e.g., the Tampon Safety and Research Act of 1999, H. R. 890, U.S.A.

30 *Supra* fn. 14.

31 Zoltán Mészáros (1930–1986) was a chemical engineer, medicinal chemist, university professor. He won the state prize in 1970 and held a doctorate in chemistry. Péter Szentmiklósi (1926–2010) was a pharmacist and chemical engineer and held several patents for his inventions.

32 Sipos, A. *et al.*, 1996, *Egy mindig megújuló vállalat: A Chinoin története (1910–1995)*, Budapest, Chinoin, p. 50.

girls' school absences are also caused by dysmenorrhea). In addition to the subjective complaints, the economic significance of the issue cannot be neglected.”³³ As a result, No-Spa became the main medication for menstrual pain. While menstrual products were still absent, No-Spa was relatively cheap and available.

Menstruation was described in school materials as the result of an incomplete or “failed” reproductive cycle. Sex education was usually offered in gender segregation, meaning that girls and boys received information separately, which further enhanced the secrecy surrounding menstrual problems. While menstruation is often considered as a hygienic issue, the emotional elements and the change in body image were almost totally neglected.³⁴

Hungarian newspapers and journals sometimes published short answers to letters from female readers concerned mainly with irregularities in their cycle, such as in 1968 where a short response was given to a woman (from Komárom) who was worried about her perimenopause symptoms. The short response was only to reassure her that her health condition was normal.³⁵

The silence surrounding menstruation can be traced back by checking the archives on daily newspapers and magazines. While in Hungary professional journals usually mention the issue of menstruation, often in the context of sport, in Vojvodina,³⁶ for instance, the Hungarian language newspaper *Magyar Szó* had several articles on menstruation in Hungarian language already in the 1970s. For example, a doctor, Sándor Varga wrote several articles on menstruation,³⁷ even including teenage dysmenorrhea.³⁸

Based on a search of Arcanum,³⁹ Hungarian daily newspapers and magazines that are available for the large public, not only to professionals, hardly even mentioned menstruation in the 1980s. The topic appeared

33 Gardó, S., Orosz, A., 1981, A naproxen (Naprosyn) szerepe a primer dysmenorrhea terápiájában, *Magyar Nőorvosok Lapja* (The role of naproxen (Naprosyn) in the treatment of primary dysmenorrhea), Vol. 44, pp. 541–543. The title translated by Judit Sándor.

34 Brown, L. M., Gilligan, C., 1992, *Meeting at the Crossroads: Women's Psychology and Girls' Development*, Cambridge MA, Harvard University Press.

35 *Nő*, 1968, Vol. 17, No. 1–52, 1968-08-02 / 31. p. 527. Answer to a letter from a reader.

36 At the time Vojvodina was part of Serbia and Yugoslavia, now it is part of Serbia.

37 Varga, S., 1973, Az iskolai oktatás szerepe a nemi nevelésben, *Magyar Szó*, Vol. 30, No. 89–103. p. 8.

38 Varga, S., 1973, *supra*.

39 Arcanum is an online publisher that provides structured databases of digitized newspapers and magazines.

mainly in the context of sport and health education, dealing with the questions whether girls can do sport during their menstruation.

2.5. THE ROLE OF ADVERTISEMENT

The repressive burden of mandatory secrecy was lifted from the shoulders of women by the first commercial advertisements. The first advertisement showed the image of the Teddy bear splashing in a blue liquid, yet the napkins led to many families asking questions. Of course, blood could only be represented as a blue liquid, but even so, it was such a surprise that we blushed and felt relieved at the same time. Today, female initiation is a ceremony supported by commerce, as teenage girls are greeted with a special small menstrual box. Although the first commercials, which appeared just prior to the regime change, helped greatly to attract more attention to these women's problems, the commercials still only focused on the product and did not show that the person who applies them every month was actually feels unwell.

Before the 1980s advertisements conveyed only very simple messages, like "Toys from the Toyshop".⁴⁰ Since tampons were not previously available, the first commercials also contributed to a more open discussion on menstruation. Western companies appeared in the market and tried to find access to the consumers. To advertise Tampax, "in the Soviet Union Femtech decided to rely on celebrities".⁴¹ The commercial team first considered "asking a Soviet female astronaut (likely Valentina Tereshkova, whose 1963 mission captured international attention) [but when] the astronaut proved uninterested, the team discussed alternatives, including British Prime Minister Margaret Thatcher."⁴²

One of the first commercial advertisements in Hungary was for tampons and watching these advertisements on the television was often a shock or at least a surprise to many. Still, the gradually appearing menstrual devices have helped to understand the health needs of women. The situation is still not resolved; for example, there is a lack of social security support for menstrual products and the VAT is high. Furthermore, menstruation related pain and discomfort are not recognized at schools and in workplaces. In the case of menstrual irregularities, such as in the

40 Advertisement from 1957. Translated by author.

41 Røstvik, C. M., Tambrands Incorporated: Femtech and the Development of Soviet Tampax, in: Røstvik, C. M., 2022, *Cash Flow: The Businesses of Menstruation*, London, UCL Press, pp. 81–103.

42 Even though she did not formally participate in an advertisement, she was interested in the issue and she inquired about what Soviet women used. *Ibid.*, p. 87; *Supra* 31.

perimenopausal phase, the discourse has only just started. Although menstrual devices are becoming more and more sophisticated, and they include also discreet and environmentally friendly ones, commercial advertisements often assume that girls and women would be inclined to ride a motorcycle or skydive in the midst of feeling lightheaded, judging by the suggestions of advertisements.⁴³

The sense of shame attached to menstruation is reflected in advertisements that emphasized discretion: girls have to learn how to hide their cramps, and their health needs, and they must keep menstruation invisible. Segregated sex education also serves the purposes to teach girls certain activities during their periods, to spare others the inconvenience. While there were no tampons and pads available until the 1980s, by the end of the decade, different types of products were available as foreign products appeared on the market. Menstrual pads were called “pads with the wings” and were the subject of jokes.⁴⁴ Later the term health pads was adopted.

2.6. AVAILABLE BUT NOT AFFORDABLE?

In state-socialist Hungary the menstrual products market was for a long-time dominated by scarcity, and then after the political transition – by variety and high prices. In the meantime, Hungary has become an exporter of menstrual products. For example, women in South Africa often buy sanitary pads and tampons manufactured in Hungary.⁴⁵ Hungary is also significant in worldwide as an exporter of sanitary pads and products.⁴⁶ The factory, which exports to five continents, produces many different versions of menstrual products. Tampax products are produced exclusively in Csömör⁴⁷ for Europe and are shipped around the globe.

Women face “widespread social, cultural, political, and structural threats to their sexual health and well-being. Women’s sexual health is often controlled by patriarchal societies. Without the option to make critical

43 Winkler, T. I., Bobel, C., 2021, “Bizarre” and “Backward”: Saviorism and Modernity in Representations of Menstrual Beliefs and Practices in the Popular Media, *Feminist Formations*, Vol. 33, No. 2, p. 313.

44 Testing Health Pads, 2000, *Teszt Magazin*, Vol. 9, No. 2, pp. 63–64.

45 Asmaljee, S. S., 2019, *An Examination of Tampon Tax and How It Affects the Social, Health and Economical Aspects of Countries, including a Comparative Analysis of How Some Countries Have Dealt with Tampon Tax*, MA thesis, Master of Commerce specializing in taxation, University of the Witwatersrand, Johannesburg.

46 World Integrated Trade Solutions, 2024, Sanitary towels and tampons, napkins and napkin exports by country in 2023, <https://wits.worldbank.org/trade/comtrade/en/country/ALL/year/2023/tradeflow/Exports/partner/WLD/product/481840>, 16 5. 2025).

47 Csömör is a suburb to the northeast of Budapest.

choices about their bodies, women's prosperity, well-being, and potential in society are restricted and gender inequality is therefore perpetuated."⁴⁸ Feminist economist Heidi I. Hartmann argued a society according to Hartmann could undergo transition from capitalism to socialism, but still remain patriarchal.⁴⁹

The situation of the Hungarian women was not unique. In the other Central and Eastern European countries women faced the same problems. Even in Yugoslavia for a long time proper menstrual products were not available and when they were later accessible, still in many countries, such as in Bulgaria and in Poland, women were lacking these basic hygienic products. About this Slavenka Drakulić states "I sprinkled Eastern Europe with tampons on my travels: I had already left one package of tampons and some napkins, ironically called 'New Freedom', in Warsaw (plus Bayer aspirin and antibiotics), another package in Prague (plus Anaïs perfume), and now here in Sofia [...] After all these years, communism has not been able to produce a simple sanitary napkin, a bare necessity for women. So much for its economy and its so-called emancipation, too."⁵⁰

Looking at Western countries, New York City was one of the first to pass a law mandating that every school offer free period products, in 2016. Although this law paved the way for other legislators to pass similar laws, there were many complaints about the implementation.⁵¹ Now 28 states in the USA and the District of Columbia have laws regarding free period products at schools.⁵² Scotland has become the first in the world to make period products free for all. There is even an expressed legal duty for local authorities to provide free items such as tampons and sanitary pads to "anyone who needs them".⁵³ On 28 May 2023, the Minister for Women and Gender Equality and Youth and Parliamentary Secretary in Canada issued the following statement: "Period poverty is a worldwide sad reality,

48 Mlambo-Ngcuka, P., 2017, Sexual health and women's rights, *Harvard International Review*, Vol. 38, No. 3, pp. 48–53.

49 Hartmann, H., 1979, The Unhappy Marriage of Marxism and Feminism, *Capital and Class*, Vol. 3, No. 2, pp. 1–33.

50 Drakulić, S., 1992, *How We Survived Communism and Even Laughed*, New York: W.W. Norton & Company, p. 30.

51 Elsen-Rooney, M., 2025, Almost 10 years later, NYC remains in 'flagrant' violation of school menstrual products law: lawsuit, (<https://www.chalkbeat.org/newyork/2025/03/17/menstrual-products-missing-school-bathrooms-lawsuit-alleges/>, 5. 5. 2025).

52 Gupta, A. L., 2025, The Fight for Free Tampons in Schools Lands in Court, *The New York Times*, 24 March, (<https://www.nytimes.com/2025/03/19/well/live/pads-tampons-free-schools.html>, 4. 5. 2025).

53 The Period Products (Free Provision) (Scotland) Bill passed by a vote of 121 for, 0 against and 0 abstentions. The Bill became an Act on 12 January 2021.

where many women, girls, non-binary individuals, and transgender people struggle with the financial burden to afford menstrual supplies. Menstrual equity aims to provide fair and inclusive access to menstrual products and education on reproductive health, but there is still a long way to go.”⁵⁴

Today there are many different products available in Hungary and there are no shortages in the shops; menstrual cups (HUF 4,000 or about EUR 10), tampons, pads, period slips (HUF 5,000 or EUR 12.50) are available in all drugstores. According to the Hungarian Central Statistical Office, in 2024 the average net salary in Hungary was HUF 430,120 (or a bit less than EUR 1,100).⁵⁵ The current price of a box of normal o.b. tampons (32 pieces) is HUF 2,500 Forints or EUR 6.20. Interestingly, the Polish 100% cotton tampon is much cheaper, with a similar packaging at around HUF 2,000 or EUR 5. While women with an average income can easily afford menstrual products, there is no systemic support for students, the poor, or the homeless. Workplaces are also not required to provide menstrual products. So, while there is no secrecy anymore, there is still no menstrual justice. Vulnerable groups receive only sporadic help and mainly from the civil society. The Red Cross has also launched a program, called Girl-to-Woman.⁵⁶ “In 2021 alone, about 24,000 students in 500 schools received free period products through the project.”⁵⁷ One of the initiatives by social workers was called “Not a Luxury Bag”. It was a nationwide campaign that collected donations from women every December, consisting of bags filled with hygiene products like soap, toilet paper and pads. In 2019, they collected 12,000 bags in just a few weeks. Within this project the collected bags are distributed to schools, homeless institutions and poverty-stricken villages.⁵⁸

Some studies also indicate that menstrual poverty is an issue for students and in rural areas. While menstruation is no longer a taboo in Hungary, menstrual poverty still is.⁵⁹ It is an invisible poverty as shame and stigma still prevent the adequate treatment of this problem.

54 Statement by Minister Marci Ien and Parliamentary Secretary Jenna Sudds on Menstrual Hygiene Day, (<https://www.canada.ca/en/women-gender-equality/news/2023/05/statement-by-minister-marci-ien-and-parliamentary-secretary-jenna-sudds-on-menstrual-hygiene-day.html>, 28. 4. 2025).

55 Központi Statisztikai Hivatal (Hungarian Central Statistical Office, 2025, Development of real wages, (https://www.ksh.hu/stadat_files/mun/hu/mun0191.html, 11. 5. 2025).

56 Red Cross EU Office, n.d., Activities: Girl-to-Woman, (<https://redcross.eu/projects/girl-to-woman>, 16. 5. 2025).

57 *Ibid.*

58 Makeshift products and missing school: period poverty in Hungary, (<https://lazy-women.com/desk/missing-school-period-poverty-in-hungary>, 11. 5. 2025).

59 Rucska, A., Perge, A., 2021, Old-New Challenges? Poverty and Menstruation: Young Girls and Women in the Mirror of Disadvantaged Situation, *European Journal of Marketing and Economics*, Vol. 4, No. 2, pp. 113–126.

3. INTERNATIONAL INITIATIVES AND THE RELEVANCE OF THE LANGUAGE OF RIGHTS

In the biopolitics of menstruation, duties and secrecy were for a long time the key terms that described what women were supposed to do during their period. Using the language of rights is therefore a crucial step in shaping policies on menstruation. The human rights framing, however, is not evident. The status of sexual and reproductive rights is still contested in many places around the world, and it is even being questioned again in places where it had once been accepted. Moreover, rights related to menstruation are often not recognized as strictly speaking reproductive or sexual rights. The biopolitics of menstruation are inherently connected to several other basic rights: from respect to human dignity, to the right not to be discriminated, to the right to health, etc. According to the United Nations Population Fund (UNFPA), the concept of menstrual rights encompasses sociocultural, economic, political, environmental and health aspects, as well⁶⁰. Menstruation is related to several human rights, including human dignity of women, as well as to their sexual and reproductive rights, the right to make informed and autonomous decisions, the right not be discriminated, etc.

In 2021, the European Parliament's Resolution on the situation of sexual and reproductive health and rights in the EU "calls on Member States to ensure comprehensive and scientifically accurate education about menstruation, to raise awareness and to launch major information campaigns on endometriosis targeting the public, healthcare professionals and legislators; calls on the Member States to ensure access to period education programmes for all children, so that menstruators can make informed choices about their periods and bodies; calls on the Member States to urgently tackle menstrual poverty by ensuring that free period products are available to anyone who needs them."⁶¹ The resolution also urged Member States "to encourage the widespread availability of toxin-free and reusable menstrual products."⁶²

Initiatives to also improve the care for women on the international level started very late. The World Health Organization (WHO) admitted

60 UNFPA, 2024, 5 reasons why menstruation support is critical in a humanitarian crisis, *UNFPA*, 28 May, (<https://www.unfpa.org/news/5-reasons-why-menstruation-support-critical-humanitarian-crisis>, 12. 5. 2025).

61 European Parliament Resolution on the situation of sexual and reproductive health and rights in the EU, *Texts Adopted – Sexual and Reproductive Health and Rights in the EU, in the Frame of Women's Health*, (2020/2215(INI)), 24 June 2021, OJ C 81, 18. 2. 2022, pp. 43–62.

62 *Ibid.*, Arts. 24–25.

this delay during the 50th session of the Human Rights Council Panel discussion on menstrual hygiene management, human rights and gender equality. As a result, in 2022, the WHO called for menstrual health to be recognized, framed and addressed as a health and human rights issue, not a hygiene issue.⁶³ In 2024, the WHO stated that “menstrual health is a fundamental human right.”⁶⁴

Secrecy and pathologization of menstruation may lead also to the violations of basic rights or at least does not help to recognize its human rights aspects. The human rights language revealed that menstruation is inherently connected to several human rights, such as human dignity, right to privacy, right to health, right to work etc. Menstruation-related exclusion and shame also violate the principle of human dignity. The person is dehumanized and excluded from certain activities based on menstruation.

The right to health is one the most important rights related to menstruation. Women and girls may experience serious health consequences if they do not have access to facilities to manage their menstrual health. The right to health includes not only access to medical care, medication and adequate pain management, but also access to the health information that is necessary to protect health. Menstrual etiquette often leaves no choice for how to manage menstrual issues, therefore menstruating people should have the choice of how they wish to manage their periods and may be able to decide other aspects related to menstruation. As we have seen, menstrual taboos and secrecy can be traced back to the 1980s⁶⁵ by looking at the daily newspapers and magazines that were available to the general public and which only sporadically mentioned menstruation.

The stigma associated with menstruation can also prevent women and girls from seeking medical treatment for menstruation-related disorders. The lack of adequate pain management may also adversely affect the enjoyment of the “highest attainable standard of health and well-being.”⁶⁶ The right to privacy and the right to control information are also

63 Winkler, T. I., 2021, Menstruation and Human Rights: Can We Move Beyond Instrumentalization, Tokenism, and Reductionism?, *Columbia Journal of Gender and Law*, Vol. 41, No. 1, pp. 244–251.

64 WHO, 2024, Menstrual health is a fundamental human right, *WHO*, (<https://www.who.int/europe/news/item/15-08-2024-menstrual-health-is-a-fundamental-human-right>, 12. 5. 2025).

65 Kádár era in Hungary refers to the period between 1957 and 1989.

66 Committee on Economic, Social and Cultural Rights, General Comment No. 14. The Right to the Highest Attainable Standard of Health, UN Doc. No. E/C.12/2000/4 (2000).

important elements of menstrual rights. Safe places are as important as the access to information about menstrual hygiene and health. As shows by the Hungarian example of state socialism, due to the lack of information women could not stand up for their rights to demand access to proper hygienic products. When schoolgirls are unable to adequately manage menstruation at school, their academic performance suffer.

When menstruation was pathologized, women's capacity to work during menstruation was also brought into question. The right to work therefore also needs to be assessed in the context of menstruation, because the lack of access to safe means of managing menstrual hygiene and pain also limits job opportunities.

Discrimination can occur based on gender, but women may also face workplace discrimination related to menstruation taboos. The right to nondiscrimination and gender equality constitute the core elements of menstrual justice. Stigmas and expectations related to menstruation may also contribute to discrimination. Discrimination may occur also in the field of sport. The right to water and sanitation, access to water and sanitation facilities, such as bathing facilities, that are private, safe and culturally acceptable, along with a sufficient, safe and affordable water supply, are basic prerequisites for managing menstrual health management.

Needless to say, focusing exclusively on the hygienic needs would not be a satisfactory approach. Menstrual movement requires a much broader approach and menstrual justice in general that accesses various aspects of gender equality.

Today menstruation is still a source of stigma in different societies and even in different phases of women's lives.⁶⁷ Menarche menstruation is shrouded in silence and many girls are unprepared for the difficulties. And even if physical changes and the use of hygienic products are explained to them by someone, almost nothing is said about the emotional changes that they have to deal with. The bodily changes also affect the girls' body image. Strangely, the stigma remains even in the peri- and postmenopausal phases.⁶⁸ Social attitudes to menstruation are full of contradictions. Privacy and learning to control over body is generally progressive but in

67 International Women's Day – 8 March 2019: Women's Menstrual Health Should No Longer Be a Taboo, United Nations Human Rights Office of the High Commissioner (March 5, 2019), (<https://www.ohchr.org/en/news/2019/03/international-womens-day-8-march-2019?LangID=E&NewsID=24256>, 12. 5. 2025).

68 Premenopause, Perimenopause, and Menopause, (<https://www.healthline.com/health/menopause/difference-perimenopause#premenopause-vs-perimenopause>, 12. 5. 2025).

relation to menstruation it reinforces secrecy and even shame.⁶⁹ Keeping menstruation private is often burdensome when pain and suffering must be hidden at school or in the workplace. When women enter the menopausal phase, one may logically assume that the stigma related to menstruation will be stopped and women can fully enjoy their presence in public life. But this is not the case, in this phase women are often considered no longer desirable, no longer sexual, and even no longer in demand in the labor market. Menstruation stigma is simply replaced by the stigma of missing reproductive capacity. The symptoms and treatment of menopause are also understudied. The physical burden of reproductive capacity and the lack of reproductive capacity are still largely ignored and therefore constitute the basis of various kinds of discrimination (gender-, sex-, ethnicity-, age-based, etc.)

While patients with milder symptoms are eligible for sick leave, since menstruation is regarded as natural, in most countries it is not being regarded as a lawful basis for short-term menstruation leave. Nevertheless, there are good examples: Japan introduced menstrual leave in its labor law as early as in 1947. Under Article 68, the law prescribed that “the employer must not make her work on a day of her menstrual period.”⁷⁰ A similar policy was introduced in Indonesia in 1948, and subsequently modified in 2003.⁷¹ According to this, female workers experiencing menstrual pain are not obliged to work on the first two days of their cycle. South Korea,⁷² Taiwan, and Vietnam have also introduced menstrual leave. Europe has only recently started to move in this direction. For instance, Spain introduced menstrual leave from three up to five days.⁷³ In Hungary there is no national law on this matter, but some local municipalities, such as Teréz-

69 Nussbaum, M. C., 2004, *Hiding from Humanity*, Princeton, Princeton University Press.

70 Article 68 of Japan's Labor Standards Act, which remains in force, states: “If a woman who finds it to be extremely difficult to work on a day of her menstrual period requests leave, the employer must not make her work on a day of her menstrual period.” Japanese Labor Standards Act, 1947, Act No. 49 of April 7, translation by Japanese Law Translation, Article 68, (<https://www.japaneselawtranslation.go.jp/en/laws/view/3567/en>, 17. 5. 2025).

71 In the Indonesian labor law, two days of paid leave are given to women every month (Law Number 13 of 2003 concerning Manpower and Law Number 36 of 2009 on Health).

72 In 2001, South Korea ratified Article 73 of the Labor Standards Act, which provides for one day of unpaid leave per month, awarded at the employee's request. All female employees are entitled to the benefit, irrespective of their job status or how long they have worked for the company. Employers who violate the law could face up to two years in prison or a fine of up to 10 million won (around EUR 7,500).

73 From 1 June 2023, when the policy came into effect, to 24 April 2023, the average leave taken spanned 3.03 days.

város in Budapest, allow one day per month for women who suffer from dysmenorrhea, but these are infrequent cases.⁷⁴

4. CONCLUSIONS

The rights to menstrual health and wellbeing are a telling example of how women's rights were and are still neglected when their wellbeing does not directly serve reproductive purposes. Even international organizations were silent on this issue for a long time. Inequality still persists in many forms, but I that believe the Cold war era was a special example in Europe. While state-socialist countries – and especially Hungary – emphasized their commitment to welfare rights, including mother's rights and family care, girls' and women's monthly difficulties were not addressed properly. Sanitary pads and tampons were not available, and even information about alternative means were missing. Discomfort and pain were discussed mainly in the context of sport, while the secrecy surrounding menstruation made it impossible for women to demand better care. The story of socialist women's silent suffering because of the lack of sources shows the superficiality and patriarchal nature of social welfare rights.

Biopolitical control over women's bodies has not diminished significantly in the transition from state socialism to peripheral capitalism; it has only changed its form in the aftermath of the political and economic transition in the early 1990s.

Perhaps the legacy of this past is that while a huge variety of sanitary means are available, the VAT policy does not take into account the high prices women have to pay every month. NGOs and local initiatives attempt to help women who cannot afford to buy menstrual products. For a long time, the shame surrounding the issue made it difficult for women to assert their rights. Paternalistic medical practices focused primarily on medical considerations.

The case of Hungarian women's menstrual needs during state socialism shows that the development of social welfare rights does not necessarily involve the development of women's rights. Social welfare regimes often focus on reproduction while disregarding the overall welfare and wellbeing of the individual. This indicates a reductionist vision of human rights, the consequences of which can still be seen in menstrual injustice. Despite the significant development of reproductive rights, the emancipation process was disrupted, and the current conservative turn is once again setting different priorities.

74 <https://www.egeszseghkalauz.hu/betegsegek/menstruacios-szabadsag-igy-lehet-igenybe-venni-szeptembertol/fnrz0j7>, 5. 5. 2025.

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BIOPOLITIKA MENSTRUACIJE U MAĐARSKOJ: NEKAD I SAD

Judit Sándor

APSTRAKT

Ovaj članak se fokusira na posleratnu Mađarsku, uključujući prelazak iz državnog socijalizma u rani kapitalizam. Ovo je posebno važna era jer je tokom decenija hladnog rata jedna od glavnih tvrdnji bila da su socijalna prava i blagostanje, uključujući pravo na zdravstvenu zaštitu, bili primereni u državnom socijalizmu i mnogo napredniji nego u državama zapadnog sveta. Međutim, ovaj članak tvrdi da iako su u određenim jurisdikcijama i oblastima prava na socijalnu zaštitu bila unapređena, ona nisu iskorenila patrijarhalne stavove. Zanemarivanje žena tokom njihovog ciklusa takođe pokazuje da zaštita majčinstva nije automatski uticala na adekvatnu zaštitu prava žena. Ipak, iako su prava žena na socijalnu i ekonomsku zaštitu bila nerazvijena, postignuta su neka značajna dostignuća u oblastima zaštite materinstva i brige o deci.

Ključne reči: menstruacija, stigma, diskriminacija, tampon, klinička ispitivanja, hladni rat, zdravstvena zaštita, državni socijalizam, Mađarska.

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