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**RITUALS REPRODUCING RACE: AFRICAN AMERICAN WOMEN'S FEMININE
HYGIENE PRACTICES, SHARED EXPERIENCES, AND POWER**

by

ANGELA KRISTINE GUY-LEE

DISSERTATION

Submitted to the Graduate School

of Wayne State University,

Detroit, Michigan

In partial fulfillment of the requirements

for the degree of

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2017

Major: ANTHROPOLOGY

Approved By:

Advisor

Date

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DEDICATION

To my parents, Joyce and Keith; my husband, Curt; and my daughters, Austin, Sydney, and Madison. To the women who participated in my dissertation research.

ACKNOWLEDGEMENTS

I am fortunate to have a dissertation committee of phenomenal scholars, and mentors who provided me with invaluable guidance and support throughout this process. I am especially grateful for Dr. Andrea Sankar, the chair of my dissertation committee. I met Dr. Sankar while I was a graduate student in sociology. Dr. Sankar team taught a medical anthropology course and I took the class to fulfill a cognate requirement for a PhD. in sociology. Soon after taking my first anthropology class with Dr. Sankar, I left sociology for anthropology. Thank you for encouraging me to conduct research that means something to me. Through Dr. Sankar, I learned to think anthropologically and challenge myself academically.

During the last year of my dissertation process, Dr. Sankar demonstrated her dedication to student success by meeting with me weekly and guiding me through until the end of this process. I would like to thank Dr. Andrew Newman for introducing me to anthropological scholarship that contributed to my dissertation. Dr. Newman encouraged me to claim my research as mine. His encouragement helped me make the mental transition from student to independent researcher.

I met Dr. Jessica Robbins-Ruszkowski when she applied for her current position at Wayne State University. Her job talk was flawless. She embodied a confidence and passion for her research that was contagious. I would like to thank Dr. Robbins-Ruszkowski for urging me to write about what interested me. I believe it is invaluable advice. I am grateful for Dr. Patti Meyer's positive energy and support. She has been supportive and encouraged me to move through this process. Dr. Meyer introduced me to anthropological scholarship that grounded my qualifying exams and dissertation.

I am thankful for my parents and Curt who always encouraged my academic endeavors. I am fortunate to have three wonderful daughters. Austin, Sydney, and Madison gave me the impetus to keep going even when I could not imagine the finish line. I would also like to thank Dr. Marsha Darling, my Africana Studies professor at Wellesley College. Dr. Darling introduced me critical race scholarship and I am forever grateful. Dr. Luborsky gave me my first opportunity to work on an anthropological research project. I appreciate all that I learned from Dr. Luborsky. I am thankful to Dr. Dawn Misra, for sparking my interest African American Women's douching practices and reproductive health. I have been fortunate enough to make lifelong friends in graduate school. I am thankful for Bonnie, Lari, Laura, and Monica. I am also thankful for the support provided by my friends/colleagues Daisy, Meral, and Rita. I am forever indebted to the women that participated in my dissertation research. You allowed me into your lives and shared your invaluable experiences with me.

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PREFACE

In 2010, I began working as a research assistant for Dawn Misra's, Life Influences on Fetal Environment (LIFE) study. The goal of the study is to discover factors that contribute to the high rates of African American infants born pre-term (before 37 weeks) and/or with low birth weight (less than 5lbs 8oz). My responsibilities are to recruit women, conduct interviews, and collect pertinent history from their medical charts. After the consent process is over, I ask the women questions that cover multiple topics about their medical history, relationship status, experiences with racism, socioeconomic status, neighborhood history, and vaginal douching history. I remember reading the survey instrument and being curious about the vaginal douching questions.

Prior to working for the LIFE study, I am unaware that women douche any longer. I remember my mother having what I thought is a hot water bottle hanging in the bathroom on a hook near the tub. In hindsight, I realize that it is a douche bag – because of the perforated nozzle attached to the bag but I never discuss it with her. I ask Dr. Misa if vaginal douching is common and how vaginal douching is related to pre-term birth and low birth weight rates in African American infants. She tells me about her preliminary study in Baltimore, research findings about the relationship between vaginal douching, bacterial vaginosis, and spontaneous pre-term birth; and that African American women are more likely to douche than any other women in the United States. My interest in examining why African American women are more likely to douche vaginally than any other group of women in the United States is born.

I have always been interested in race abstractly and specifically, what it means to be African American. These questions take a more concrete form when I realize that I

am African American or maybe it is when my (white) childhood friends realize that I'm not white. My oldest memory of race is being told that I cannot play "Little House on the Prairie" at recess because there aren't any African American characters on the show (Todd Bridges joins the cast later as a runaway slave). Either way, even as a child, I know that being African American and not being white means something important. We move to Ann Arbor, Michigan so that my father could attend graduate school. Between the ages of two and eleven, we live in neighborhood called "Burns Park". There is a group home nestled in my neighborhood and many of the boys that live there are African American. I remember walking to and from school with my friends (all white) being afraid of those boys.

I must have told my father about the group home and that I am afraid of the boys. He invites them over for dinner. I ask him why he invited the boys over. He tells me that I cannot be afraid of my own people. I remember those words because they convey the importance of reaching out to African American people wherever I happen to be; his words also leave me questioning what I have in common with African American people and why I need to create community with other African American people.

Apart from eighth grade through high school, I have always been one of the few African American people in my environments. My family moves to Louisiana when I enter eighth grade. My father accepts a position at Grambling State University – a Historically Black College/University or HBCU. It is my first and only experience going to school with all African American people. It is also my first experience paying attention to the differences between African Americans. There are many people in my high school that have similar backgrounds; it is a college town and most of the professors are African

American. I attend the laboratory high school (affiliated with Grambling State University) and with some exceptions most of my school mates' parents either have Ph.Ds. or work at the university in some capacity. However, myriad differences not related to race become obvious. These differences range from religious beliefs to socioeconomic variability. It might seem odd but when you are always the only or one of the few African Americans in your environment you do not think about all the things you do not have in common with people that also identify as African American.

In many ways, the geneses of this dissertation occur during my childhood in Ann Arbor, Michigan, and adolescence in Grambling, Louisiana. I offer this history for several reasons (1) because it shapes my interest in understanding what race means in people's lives, (2) and it provides insight into how I make connections between the data I collect, theoretical frameworks that I utilize, and scholarship that grounds this dissertation project. My history with race also grounds my desire to understand why being African American and not being white always means something important.

TABLE OF CONTENTS

Dedication _____	ii
Acknowledgements _____	iii
Preface _____	vi
List of Tables _____	xi
Section I: Overview Background and Significance _____	1
Chapter 1 Introduction _____	2
Anthropological Contributions _____	3
Problem Statement _____	11
Study Aims and Scope _____	12
Chapter 2 Anthropology of Race _____	18
How I Conceptualized Race for this Dissertation _____	26
Chapter 3 How Stigmatization of African American Women became Naturalized _____	28
African American Women’s Sexuality is to White Women’s Sexuality as Nature is to Culture _____	32
African American Women’s Clubs _____	37
Chapter 4 Vaginas _____	47
Historic Representations and Ideas about Vaginas _____	48
African American Women’s Feminine Hygiene Practices _____	53
Epidemiology of Douching _____	61
Section II: Project Overview _____	67
Chapter 5 Integrated Theories and Data _____	68
Moral Personhood and Race as Stigma _____	69
Description of Codes Included in the Domain Moral Personhood _____	89

Description of Codes Included in the Domain Practices of Hygiene _____	98
Chapter 6 Design, Methods, and Sample _____	99
Part I: Design, Methods, Sample, and Analyses _____	99
Part II: Participant Recruitment and the Interview Process _____	105
Section III: Dissertation Findings _____	110
Chapter 7 Dissertation Findings _____	111
Section I: Salient Components of Care of the Self _____	112
Section II: Operationalizing Foucault’s Care of the Self _____	115
Section III: Findings of Technologies of the Self, Care of the Self, and Practice Theory _____	124
Chapter 8 Dissertation Findings Interpreting Practices of Hygiene _____	126
Part I: Finding Patterns that Support Technologies of the Self Framework ____	127
Part II: Finding Patterns that Support Care of the Self Framework _____	142
Chapter 9 Dissertation Findings for Integrating Practice Theory _____	162
Section IV: Discussion _____	170
Chapter 10 Discussion: Everything I was Taught, was Under the Umbrella of Us as Black Women _____	171
Applying Foucault’s Framework to Understand Collective Experiences ____	173
Examining How Race is Reproduced through African American Women’s Feminine Hygiene Practices _____	176
What is Race and How Should it be Defined in Health Research _____	179
Implications and Recommendations _____	180
Limitations _____	181
Future Directions _____	182

Final Thoughts: Being an African American Woman Researching African American Women	182
References	195
Abstract	217
Autobiographical Statement	220

LIST OF TABLES

Table 1: Inclusion and Exclusion Criteria for Codes Included in the Domain Moral Personhood.....	83
Table 2: Examples of Coded Data in Moral Personhood.....	85
Table 3: Inclusion & Exclusion Criteria for Practices of Hygiene	94
Table 4: Examples of Coded Data Included in Practices of Hygiene.....	95
Table 5: Research Participants Characteristics.....	101

SECTION I: OVERVIEW OF BACKGROUND AND SIGNIFICANCE

Section I provides the background and significance for research that focuses on understanding how African American women's feminine hygiene practices contribute to the reproduction of race in the United States. Section I is divided into four chapters. The first chapter is a general introduction of important concepts and an overview of the assertions presented in this dissertation research project. Chapter two provides an extensive history of how race has been conceptualized in anthropology. Chapter three examines the history of the stigmatization of African American women and forms of resistance that emerged to counteract the negative depictions of African American women. A lengthy discussion of the origins and foci of African American women's clubs is included in chapter three. Chapter four provides a historical overview of ideas about the vagina, menstruation, and vaginal hygiene. Western conceptualizations of the vagina are discussed in detail. The discussion provides an overview of the history of douching in the United States. This chapter includes a discussion of the epidemiology of vaginal douching (cross-culturally and in the United States) with a focus on African American women's douching practice.

CHAPTER 1 INTRODUCTION

I am suggesting that when rituals express anxiety about the body's orifices the sociological counterpart of this anxiety is a care to protect the political and cultural unity of a minority group. The Israelites were always in their history a hard-pressed minority group. In their beliefs, all the bodily issues were polluting, blood, pus, excreta, semen, etc. The threatened boundaries of their body politic would be well mirrored in their care for the integrity, unity and purity of the physical body (Douglas (1966:125).

This dissertation research project is an examination of the mutually informing cycles of hegemony and resistance that create African American women's focused attention on cleanliness. Resistance cannot be enacted until hegemony is embodied. Ultimately, this dissertation project is an example of how structural/historical stigmatization informs practices that are associated with negative health outcomes and the biology of racism (paradigm that examines the effects of racism on marginalized populations with special attention to historical stigmatization). I focus on African American women's vaginal douching practices because of the historical stigmatization of African, and subsequently, African American women as universally (e.g. morally/hygienically) unclean. I argue that the function of the historical stigmatization of African American women is to reinforce scientific and popular notions of their unequal humanity.

Historical depictions of Black/African American women's bodies, sexuality, and coping strategies are utilized to illustrate multifaceted stigmatization that survived for hundreds of years. I define multifaceted stigmatization as stigma that permeates all aspects of African American women's personhood (e.g. intellectual, moral, sexual, character, and basic humanity). Throughout this dissertation project, I argue that multifaceted stigma is what women who self-identify as African American have in common. I conclude that race is a synonym for multifaceted stigmatization. African

American women's feminine hygiene practices contribute to the creation and reproduction of race through internalized hegemony and resistance to perceptions of unequal humanity.

Anthropological Contributions

This dissertation research project contributes to anthropological conversations in four significant ways. First, by entering the debate about whether anthropologists should study race or racism. On one side of the debate are anthropologists who focus on people grouped into populations based on phenotypical characteristics or what is often referred to as race; versus anthropologists who focus on the processes and experiences of being marginalized and/or excluded from accessing resources and power based upon phenotypical characteristics or what is referred to as racism.

Race is a hierarchical system that relies on phenotypical differences to stratify human beings. Race relies on racism – on differences that indicate superiority or inferiority. Using a system of classification imbued with inequality as a benign description of phenotypical characteristics is akin to colorblindness. Conceptualizing race as a neutral system of classification ignores the meanings that humans have attributed to whiteness and non-whiteness. I argue that research focused on the biology of racism - rather than race or racism - provides avenues to explore differential health in populations by centering racism rather than populations grouped by phenotypical characteristics. Phenotypical differences do not create unequal health – meanings ascribed to phenotypical characteristics create unequal health. Additionally, centering the processes of exclusion rather than the people being excluded decreases opportunities for stigmatizing groups of people. Associating health disparities with African Americans or Mexican Americans

rather than racism directed at African Americans or Mexican Americans ignores racism and its myriad adverse effects on/in people's lives. Centering the effects of racism on human populations or the biology of racism creates an impetus to alleviate systemic inequality. Utilizing race as a benign description permits assumptions about biological determinism. I discuss this in greater detail in chapter four. Chapter four focuses on vaginas as sites of stigma and the epidemiology of vaginal douching. The assumed traits (physical and intellectual) and abilities attributed to phenotypical characteristics are used as justification for allocation of power and resources; disparate access to power and resources is responsible for unequal health. Biology of racism or the internalization of being marginalized/stigmatized via unequal access to power and resources creates unequal health. This leads to my second engagement with anthropological scholarship. The relationship between temporality and change.

History is critical to this dissertation research. The relationship between conceptualizations of race via stigma and African American women are connected by examining the history of race in anthropology, historical depictions of African American women's sexuality as hyper/deviant, theoretical paradigms that center internalization of historical domination, and African American women's focused attention on hygiene practices as performances of moral personhood.

Chapter two is dedicated to exploring the history of race and anthropology. I included this chapter to call attention to historical significance of race as a system of classifying human beings. Without understanding how meanings are/were attributed to different races it is easy to forget how Blackness has been associated with unequal humanity. Chapter three provides a history of the stigmatization African American

women's sexuality as hyper/deviant. Additionally, chapter three pays specific attention to African American women's clubs as sites of mutually informing cycles of hegemony and resistance to stigmatization surrounding sexuality and cleanliness.

Sexuality, and historical depictions of African American women's sexuality as indicative of unequal humanity are explored further in chapter three. I use Sherry Ortner's (Ortner) analogy of nature and culture to develop my argument that African American women's sexuality is/was stigmatized and aligned with nature; and white women's sexuality is aligned with culture. African American women's sexuality is depicted as hyper and deviant. Their hyper/deviant sexuality is viewed as proof of African American women's unequal humanity. The historical stigmatization of African American women's sexuality is explored and documented as a means for understanding societal level truths (Foucault 1987) and doxa (Bourdieu 1977). History is utilized as a conduit of meanings. By this I mean that history provides context even after the original meaning or intent is forgotten. For example, African American women's special attention to hygiene practices begins when popular and scientific notions denied their humanity. Current attention to hygiene practices are not attributed to historical depictions of African American women's unequal humanity. Feminine hygiene practices as sites hegemony and resistance simply become ways of feeling clean. I assert that African American women's feminine practices function as performances or displays of moral personhood.

This dissertation uses history to trace cultural meanings from the past to the present. I am not asserting that the path from the past to the present is linear. I am arguing that understanding the historical context of African American women's hygiene practices explains how and why special attention to hygiene practices continues. Examining

temporality illustrates how perceptions about African American women's humanity have both changed and remained the same. Chapters six, seven, eight, and nine connect the importance of property, home ownership, to cleanliness both personal and moral, and to historical and current ideas about race and gender in the United States. Home ownership becomes a performance of moral personhood connected to cleanliness. Participants compare the cleanliness of home owners to renters; asserting that home owners take better care of and clean their homes more than renters. One participant argues that the 1967 Detroit Uprising had less to do with the downfall of her childhood neighborhood than the new influx of renters. Despite connections between the 1967 Uprisings in Detroit, and white flight, the participant attributed negative changes in her childhood neighborhood to renters. Home ownership becomes symbolic of overcoming economic and racial struggle. Given the disparate rates of African American home ownership compared to European Americans home ownership, for the participants, owning property becomes symbolic of achieving the American Dream and responsible adulthood.

Without historical knowledge, connections between unequal humanity and moral personhood are not clear. Centering temporality and change contribute to anthropological scholarship by highlighting how conduits of meaning inform practice. Practice, specifically, hygiene practices are predominant in this research. Chapter three centers on other peoples' perceptions about African American women's humanity. Chapters five, seven, eight, and nine explore how research participants intellectualize their humanity by extending Mark Luborsky's (1994) conceptualization of moral personhood. Moral personhood is used to discuss the women's perceptions of what it means to be a good African American woman.

The extension of Luborsky's (1994) conceptualization of moral personhood is this dissertation's third contribution to anthropological conversations. Chapter five explores Luborsky's (1994) discussion of how adult onset disability alters the socially bestowed status of moral personhood. I extend Luborsky's (1994) discussion by examining how the socially bestowed status of moral personhood is altered by race. I examine how stigmatization of African American women is socially legitimated and reinforced. Given that both moral personhood and multifaceted stigmatization are socially bestowed, I examine how African American women navigate performances of responsible adulthood in an environment that legitimizes their unequal humanity. By exploring, hygiene practices enacted in the body (vaginal douching) and within the women's general environments (home), I highlight the women's agency. I use moral personhood to examine how special attention to hygiene practices are examples of performances employed by African American women (who participated in this research) to signify equal humanity.

I repeatedly discuss special attention to hygiene practices as examples of mutually informing cycles of hegemony and resistance to reinforce the connection between acceptance of societal truths and transformative practices. Michele Foucault's (1987) theories care of the self and technologies of the self are utilized to frame African American women's hygiene practices as mutually informing cycles of hegemony and resistance. Foucault's (1987) paradigms are well-suited to explore relationships of power and domination; even though Foucault (1987) never explicitly discusses race or gender, he theorizes about how power influences aspects of social interactions. Technologies of the self are the practices the women engage in to display their care of the self – self-care is the basis for good citizenship. Foucault (1987) discusses how internalization of society's

truths or beliefs create impetus to transform one's self into what society thinks you should be. I argue that perceived unequal humanity of African American women is reinforced by multifaceted stigma, and that special attention to cleanliness is an act of resistance. Foucault's (1987) theoretical paradigm provides a foundation for this dissertation project but Foucault's (1987) conceptualization of the self does not include agency.

This dissertation's fourth contribution to anthropological conversations is centering the perspectives of African American women's historic and current experiences. This dissertation research focuses attention on the processes that inform unequal health as opposed to examining health disparities as ahistorical phenomenon. This strategy allows me examine individual threads that woven together create a detailed illustration of why African American women pay special attention to cleanliness. Understanding cause and effect creates opportunities for understanding the biology of racism by illustrating the function of practices in people's lives.

Mary Douglas' (1966) book *Purity and Danger*, provides the initial analysis to examine why African American women are the group most likely to douche vaginally in the United States. The significance of African American women's feminine hygiene practices is explored extensively in chapter four. The epidemiology of vaginal douching explains how the practice is related to poor birth outcomes and vaginal infections. Although not writing about the United States or race per se, Douglas (1966) discusses the relationship between power and practice/behaviors/rituals. The universality of stratified societies – whether they are stratified by race, kinship, sex, occupation, or other factors - make Douglas' (1966) ideas an appropriate starting point for this dissertation research project.

The goal of this dissertation project is to discover whether African American women's feminine hygiene practices are constructed and enacted similarly enough to create race. Biological determinism has permeated discussions about race for hundreds of years. More recently, genetic knowledge renewed old conversations about the importance of race - especially as it related to health. Race is often used to imply biological differences or similarities in human populations and these implications were/are used in medical research without question. This dissertation project expands the conversation about race in two ways.

First, it examines how Mary Douglas' (1966) ideas about purity and marginalized people provides a critical lens to theorize about race in the United States. Second, it examines how race is created and reproduced through practice. Specifically, this dissertation focuses on feminine hygiene practices (any means of cleansing the interior and/or exterior of the vagina and reproductive tract) in the creation and reproduction of race.

This is accomplished by using Foucault's (1987) care of the self and technologies of the self to explore African American women's feminine hygiene practices, cultural beliefs, and values regarding cleanliness. Care of the self and technologies of the self, provide the theoretical framework to understand the mutually informing relationship between hegemonic thought and acts of resistance. Foucault's (1987) theoretical constructs explore how people initiated practices that are meant to transform them into what they think is good or moral. The crux is that to engage in transformative practices one must internalize that they need transforming. Foucault (1987) states that

transformative practice rarely achieves its goal of completely changing people into what they think is good or moral.

This research centers African American women's perspectives and history. It is not a comparison of White women's douching practices and African American women's douching practices. Previous comparative research provides the basis for centering African American women's vaginal douching practices because African American women douche more frequently than other groups of women in the United States. In no way is this dissertation research project an indictment of African American women's practices; it is an example of how macro level structures (racism) inform micro level practices (special attention to cleanliness) that effect a population's health. This dissertation research project explores macro/micro level integration; or the biology of racism (illness and disease directly associated with the processes of historical stigmatization and exclusion based on phenotypical characteristics).

At its core, this dissertation project examines African American women's feminine hygiene practices as a conduit of the biology of racism. I argue that people trying to prove their equal humanity (via performances of moral personhood) provides a unique opportunity to examine one pathway of the biology of racism, and ultimately to addressing racialized health disparities. I assert that consistent and historical stigmatization of African and subsequently, African American women, as sub-human, is the foundation for special attention that many African American women pay to all forms of cleanliness (hygienically and morally). Many of the transformative practices, regarding cleanliness are not harmful. However, vaginal douching is associated with the disruption of healthy vaginal microbiomes or with disturbing the balance of healthy organisms in the reproductive tract

(Brown, et al. 2016; Fettweis, et al. 2014; Gonzalez, et al. 2016 ; Wen, et al. 2014). I develop this assertion in the chapters two, three, and four; these chapters focus on the history of race, African American women’s clubs, and epidemiology of vaginal douching practices.

By cleanliness, I refer to physical hygiene, household hygiene, and moral/responsible behavior. In addition to Foucault’s (1987) care of the self and technologies of the self, I utilize practice theory (Bourdieu 1977) to discover and describe whether race is reproduced as a social structure “through a system of lasting, transposable dispositions which integrating past experiences, functions at every moment as a *matrix of perceptions, appreciations, and actions* (Bourdieu 1977)”. The preceding quote is about the power of institutions. I define race as multifaceted stigma that is socially and historically legitimated. This dissertation research is based on targeted self-care narratives, and response from in-depth interviews obtained from thirteen African American women between the ages of 19 and 69. Using a snowball sample, I recruited African American from various communities in Michigan. My goal is to learn about myriad African American women’s experiences. Interviews and targeted self-care narratives concentrate on the women’s hygiene practices and personal meanings about cleanliness – both feminine and general. The following sections provide an overview of the problem, goal, research question, and specific aims.

Problem Statement

The naturalness of racial categories masks nuanced differences that shape people’s lived experiences preventing us from understanding the importance of macro level phenomena (e.g. poverty and/or discrimination). This dissertation project addresses

several issues about what it means to be an African American woman. Understanding whether race is created through practice provides information that contributes to our knowledge of the biology of racism, if we can determine the impetus of the practice. By this I mean that, if detrimental practices/behaviors are disproportionately found in specific populations then determining the origins of the practices/behaviors provides insight about the function of the practices/behaviors. Interventions can promote non-detrimental behaviors/practices that serve the same function as the detrimental practices/behaviors. First, understanding whether hygiene practices transcend resources (e.g. education, income, safe living environments, etc....) will illustrate whether/how being an African American relies on access to resources. David R. Williams (Williams and Collins 1995) article about effects of racism, discrimination, and socioeconomic status on health provided interesting insight about the nuances of health disparities. Williams and Collins (1999) analyze environmental factors (e.g. neighborhoods, access to healthcare, etc....) to determine whether living in highly segregated environments effects African American's health. Williams and Collins (1999) find that living in highly segregated neighborhoods has a positive effect on infant and adult mortality. This positive relationship is present even when controlling for socioeconomic status (1995). Thus, environmental variation and access to resources are important variables to consider when analyzing people's lived experiences. Central to this research is understanding whether African American women's hygiene practices communicate an integrated racialized experience or if the beliefs/values/practices are informed by the women's racial identity or being African American.

STUDY AIMS AND SCOPE

Purpose and Research Questions

The purpose of this dissertation research is to discover whether African American women's feminine hygiene practices are constructed and enacted similarly enough to create race. The primary research question addressed is: What is the role of African American women's feminine hygiene practices in the creation and reproduction of race? African American women's feminine hygiene practices are performances of moral personhood. Race is reproduced through socially legitimated performances. Research participants' primary agents of socialization are their mothers and other female family/community members. Performances of cleanliness are transmitted from one generation to the next. This research utilizes an anthropological focus on personal meanings and historical contexts; with the goal of locating cultural practices that help to illustrate how stigma informs practice. Specifically, understanding the historical characterization of African American women's sexuality as hyper/deviant provides a critical foundation for understanding how resistance becomes practice.

I concentrate on the feminine hygiene practices women engage in, the products or tools that women use when feminine hygiene practices are enacted, and general cleanliness practices – both personal and household. The specific practices I focus on are domestically or home-related and include discussions with the women about products/tools that they use to achieve cleanliness (both feminine and household). Specifically, I concentrate on hygiene practices of African American women and the products/tools that African American women use to achieve feminine hygiene and household cleanliness. This dissertation contributes to understanding whether race is

produced through similar experiences and addresses the following research question and specific aims.

Specific Aims

The specific aims for this dissertation are to:

- (1) Identify and describe African American women's feminine hygiene practices.
- (2) Identify which practices, cultural values, and beliefs contribute to the creation of race.
- (3) Discover and describe whether race is created through African American women's feminine hygiene practices.

Rationales

Stereotypes about African American women's sexuality distort our understanding of African American women's reproductive health. These distortions fail to examine the historical context that shape African American women's reproductive health practices and belief systems. This dissertation aims to provide clarity to previous distortions by locating African American women's hygiene practices within historical frames and illustrating how stigma – historical and ongoing – informs practice. The goal of this dissertation is to provide a specific example of how inequality becomes embodied; with the hope that future health interventions incorporate knowledge about historical contexts to increase the efficacy of interventions. There are several rationales from anthropology, epidemiology, and critical race theory for conducting this research.

Disciplinary Rationales

Anthropological Rationales

The anthropological rationales are (1) to illustrate the significance of employing biocultural analyses to address embodied inequality (e.g. studying how feminine hygiene practices are influenced by historical and ongoing stigma (e.g. African American women being especially "dirty", African American women's being hyper sexual, and African

American women being prudish) to understand pathways to the biology of racism, (2) to understand how African American women negotiate moral personhood within a highly stigmatized socio-cultural environment, (3) to identify how African American women make sense of and incorporate hygiene practices into their everyday lives, (4) to illustrate the efficacy of Foucault's (1987) care of the self and technologies of the self to explore race, and (5) to illustrate the significance of Boasian theories about human plasticity, race, and environment.

Epidemiological Rationales

The epidemiological rationales include (1) identifying specific research foci that are dedicated to improving the “reproductive health of women from menarche through menopause” (Division of Reproductive Health 2013), (2) to contribute to a reproductive health research agenda that is intent upon unraveling the multiple social, historical, environmental, economic, and biological factors that contribute to the nearly 500,000 premature babies born in the United States every year (Division of Reproductive Health 2013), and (3) examining how the relationship between vaginal douching (especially with over-the-counter solutions), bacterial vaginosis, and African American pre-term birth rates provides an example of how race is utilized as factor in health research; and how problematic it is that health researchers don't explain what race is supposed to explain/mean in their studies.

Critical Race Theory Rationales

The critical race theory rationales for this dissertation include (1) an integration of health and socio-cultural factors that extend current research about effects of racism on the body, (2) connecting historical stigma to ongoing stigma in order to re-center

conversations from deviant practices to structural racism and unequal power, and (3) the awareness that “the experiential knowledge of people of color was appropriate, legitimate, and an integral part to analyzing and understanding racial inequality (Crenshaw 1995).”

Dissertation Overview

The following chapters (one through four) in Section I of this dissertation present the background and significance of this dissertation project by discussing and examining relevant anthropology and race literature, historical characterizations of African American women, the epidemiology of vaginal douching with a focus on African American women, and an overview of the epidemiology of cross-cultural douching practices.

Section II (chapters five and six) provide a detailed examination of theories and methodologies that ground this research project. Chapter five explores how practice theory (Bourdieu 1977), care of the self and technologies of the self (Foucault) 1987, and stigma (Goffman 1968; Link and Phelan 2001) are utilized to examine African Americans hygiene practices and beliefs about cleanliness. Additionally, Mark Luborsky’s (1994) conceptualization of moral personhood is extended to explore African American women’s performances of responsible adulthood. Chapter six focuses on research methods employed to recruit participants, conduct interviews, and code data from targeted self-care narratives and open-ended interviews.

Chapters seven, eight, and nine (section III) are each devoted to findings. Chapter seven examines data that provides evidence for Foucault’s (1987) care of the self. Chapter eight describes findings that demonstrate Foucault’s (1987) technologies of the self. Chapter nine presents findings for Bourdieu’s (1977) practice theory.

Section IV (chapter ten) provides a discussion of the findings. Additionally, chapter ten examines implications for future research and limitations of this research project. Included is an ethnographic vignette and an autoethnographic conclusion that focuses on being an African American woman studying African American women.

CHAPTER 2 ANTHROPOLOGY OF RACE

I am invisible; understand, simply because people refuse to see me. Like the bodiless heads you see sometimes in circus shows, it is as though I have been surrounded by mirrors of hard distorting glass. When they approach, me they see only my surroundings, themselves, or figments of their imagination – indeed, everything and anything except me (Ellison 1952).

Chapter two provides a history of how race is conceptualized in anthropology. This history is vital to understanding how science reinforced popular notions of the unequal humanity of people of African descent. Anthropologists continue to debate about the meanings of race and how it is utilized in the discipline. Knowledge of early stigmatization of people of African descent supplies information about the ability for stigma to mutate and become doxa.

In the 16th century England, race is used as a categorizing concept (e.g. breed, species, kind, etc....). As Europeans begin to explore the world, the definition of race changed. By the late 17th century, the concept of race is often employed to distinguish between populations living in North America (Smedley and Smedley 2005). Over the next two hundred years, race becomes a popular topic whose relevance is solidified with African slavery. During the late 19th century, anthropologists are very active participants in national discussions about race.

Evolutionary Theories of Race

Evolutionary theorists, Morgan, Tylor, and Spencer, assert that human beings are “homogenous in nature” but can be ranked by assessing how civilized they are by comparing different populations to “the white race” (Risjord 2007). This argument is critical in two important respects, first by affirming a monogenist hypothesis; Tylor (1871) supports the theory of evolution. Second, Tylor’s (1871) assertion that despite a common

origin some humans advanced or evolved, while others are stuck on the evolutionary ladder; supports the popular opinion that “the white race is superior to non-white race’s (Risjord 2007). Physical anthropologist Jonathan Marks (2010) writes that 19th century Darwinists doomed people of color for hundreds of years to sell evolution to people who had to be convinced that they shared a common ancestor with apes; by using non-white people as buffers between white people and apes.

Franz Boas and Race

In response to Tylor (Tylor), Franz Boas (Boas) directs reader’s attention to the “subjective valuation” of characteristics attributed to “civilization”. In 1896, Boas declares that it is impossible to objectively assess non-European people’s characteristics when you decide that European peoples’ characteristics are the most civilized. After Rudolph Virchow trains Boas to be a physical anthropologist; Boas conducts research supporting his theory that human biology is plastic (Caspari 2003). Boas (Boas) finds that the “American” environment is the significant factor to consider when accounting for physical differences between recent immigrants and their American born children. Boas’ (1912) concept of human plasticity is applied to modern anthropological understandings of human diversity or race. Over the next sixty odd years, race - from an anthropological perspective became a social/cultural construction.

In more recent history, race proves to be problematic for anthropology (Caspari 2003; Gravlee and Sweet 2008; Harrison 1998a; Harrison 1998b; Visweswaran 1998). As a discipline anthropology, is credited with informing racist science (e.g. (Coon 1962; Hooton 1939)) and debunking racist science (Board 1998; Boas 1896; Huxley, et al. 1938), American Anthropological Association’s race project, etc.... (Caspari 2003). This

conundrum leaves some anthropologists in a curious place. Within the discipline race is not a biological construct but a social/cultural construct; a biological illusion of sorts.

Race in Anthropological Research

The idea that race as just a social construct - negates the importance of race as a phenomenon worthy of study is at the crux of several anthropologists' arguments (Baker 1998b; Caspari 2003; Harrison 1995; Hartigan 2005; Mukhopadhyay and Moses 1997; Smedley and Smedley 2005; Visweswaran 1998). Understanding that race is not a biological marker of subspecies of human beings does not erase racism. Instead of stressing the effects of creating a world based on racial hierarchies or racism, some anthropologists take the stance that if race is no longer important than they will no longer discuss race (Gravlee and Sweet 2008; Harrison 1995; Mullings 2005; Smedley and Smedley 2005). Several anthropologists discuss the no - race stance that seems to dominate anthropology after the 1960s (Baker 1998b; Harrison 1995; Harrison 1998b; Harrison 2000; Mukhopadhyay and Moses 1997). Per Baker (Baker 1998b), population geneticists (in the 1970s) begin to recognize that stratifying human beings based on phenotypical differences is not scientifically sound. To decouple race and biology other terms like ethnicity or culture become popular in anthropological research (Baker 1998a) (Mukhopadhyay and Moses 1997) (Visweswaran 1998).

The shift from race to ethnicity and/or culture seems benign or harmless but often ignores structural realities of people's lives. Physical anthropologist Alan Goodman and geneticist Richard Lewontin (1996), publicly acknowledge that there is more genetic variability within so-called races of human beings than between races of human beings (Baker 1998; Caspari 2003; Smedley and Smedley 2005) However Lewontin's (1996)

book *Biology as Ideology*, is challenged by some genetic researchers. The no-race stance opens a space for in anthropology for colorblindness that per Harrison (2000) “ignores socially constructed notions and experiences of race that have been a part of the systems of oppression and domination with its sentiments, ideologies, practices, and material relationships (p.47)”.

Richard Herrnstein and Charles Murray’s (1994) book *The Bell Curve* is critical to any discussion about race and science. Herrnstein and Murray’s (1994) book, provides (contested) opinions about the intellectual inferiority of people of African descent, when compared to Europeans, and Asians. Much of the anthropological focus on the lack of racial analysis references *The Bell Curve (1994)* as evidence of backward rather than forward movement with respect to North American perspectives about race in the 20th century (Baker 1998; Harrison 1998a; Harrison 1995; Harrison 2000; Mukhopadhyay and Moses 1997; Smedley and Smedley 2005). Many anthropologists see *The Bell Curve (1994)* as impetus to engage in academic conversations about race and dispel notions of biological determinism perpetuated by Herrnstein and Murray’s book. Harrison (2000) and Baker (1998a) assert that Herrnstein and Murray’s appearances on popular news shows helps to perpetuate the intellectual inferiority of Blacks and Latinos; and are detrimental to federally funded programs whose mission is to increase equity for people of color. Despite scientists’ understanding that popular ideas about race are “intellectually bankrupt (Harrison 1995)” the public is not convinced – and continues to use phenotypical differences as evidence for stratified humanity (Baker 1998).

Many anthropologists argue that even though historical ideas about racial hierarchies can be refuted by science - the biological illusion of race has become a part

of North American culture. Not centering race in anthropological research creates opportunities for opinions rather than empirical evidence to dominate discussions about human variability (Baker 1998; Caspari 2003; Harrison 1998a; Harrison 1992; Harrison 1998b; Harrison 2000; Mullings 2005; Smedley and Smedley 2005). Increasing anthropological inquiry that focuses on race is necessary for a discipline that is holistic (Baker 1998; Caspari 2003; Harrison 1998a; Harrison 1992; Harrison 1998b; Harrison 2000; Mullings 2005; Smedley and Smedley 2005).

Race in Medical Anthropological Research

Clarence Gravlee and Elizabeth Sweet (2008) examine the use of terms race, racism, and ethnicity in the premiere journals dedicated to medical anthropological research, *Medical Anthropology Quarterly (MAQ)* and *Medical Anthropology (MA)*. In a content analysis of articles published in MAQ and MA from 1977-2002, Gravlee and Sweet (2008) find that both journals publish articles that referenced race, ethnicity, and racism at a similar rate. MAQ is more than twice as likely as MA to publish articles that include the term African American. MAQ and MA increased the number of articles that reference race, racism, and ethnicity as the years progressed (Gravlee and Sweet 2008). There are two findings of critical importance to this research project, first compared to premiere journals from “neighboring disciplines (e. g. public health, nursing, epidemiology, etc....)” MAQ and MA publish 25-45 % fewer articles that include the concepts race, racism, and ethnicity (Gravlee and Sweet 2008). Second, articles in MAQ and MA that include the terms race, racism, and ethnicity rarely define the concepts. Failing to define how or why racial terms are used conceals the authors intended meaning.

Current Debates in Anthropology: Race or Racism?

John Hartigan's (2013) edited volume titled *Anthropology of Race: Genes, Biology, and Culture* enters current debates about race in anthropological research. The edited volume includes anthropologists who argued that race matters, race is complex, and race is best studied "in biosocial terms - as generated out of dynamic processes that span multiple domains (Hartigan 2013a:5)". The tension or debate in anthropology focuses on whether the concept of race (as a biocultural phenomenon) or racism (as a system of exclusion based on a social construction) will be the primary concern of anthropologists (Harrison 1998a; Harrison 2000; Hartigan 2005; Hartigan 2006; Hartigan 2013a; Hartigan Jr 2008; Mullings 2005).

Genetic knowledge is evolving rapidly and includes research that challenges ideas that race is only a social construction (Hartigan Jr 2008) (Hartigan 2013) (Edwards 2003). Health research and more specifically, health disparity research focuses on the incidence and prevalence of disease in different populations or races of people. The focus of health disparity research is biological differences based on race. Although many researchers write about race as though it is a concept with a single definition - race remains a highly ambiguous often culturally defined variable (Hartigan 2013b; Hartigan Jr 2008). Pamela Sankar (2013), Linda Hunt and Nicole Truesdell (2013), discuss their findings that race as a variable is rarely defined and utilized in myriad ways in current genetic research. Hartigan (2013b) emphasizes that race is cross culturally variable so global analyses of race are encouraged to expand our understanding.

Mullings (2005) and Harrison 's (1998a; 2000), assert that anthropological focus on racism is critically important; and that disciplinary attention on race reinforces

biological determinism. As a discipline, anthropology has a history of reinforcing and dismantling, biological and cultural inferiority based on race (Caspari 2003; Harrison 1998a; Harrison 1995; Mullings 2005; Smedley and Smedley 2005). For scientists, empirical evidence is the required standard of proof, and it is difficult to prove that racism exists; without understanding all the paths that racism takes to negatively affect people's lives. You cannot understand racism without understanding race and how people use race to further political/economic/social agendas (Koenig, et al. 2008; Whitmarsh and David 2010; Hartigan 2013).

Surprisingly, both sides of this debate about theorizing and analyzing race in anthropology agree that race should be a primary focus of anthropologists (Caspari 2003; Harrison 1998a; Harrison 1994; Harrison 1995; Harrison 1998b; Harrison 2000; Hartigan 2013a; Mukhopadhyay and Moses 1997; Smedley and Smedley 2005; Visweswaran 1998). As a holistic, four-field discipline with a biocultural foundation there are bound to be differences in opinion about the best way to understand the human condition. Debate fuels academic knowledge. The absence of discussions about race leads to perpetuating the colorblind ideology that dominates popular culture. Colorblindness suggests that we (as a nation) have achieved Martin Luther King's dream and judge people based on the content of their character rather than the color of their skin; while ignoring that we are a nation stratified by skin color (Bonilla-Silva 2013).

Contributors to *Anthropology of Race: Genes, Biology, and Culture* (Hartigan 2013), offer suggestions about ways to theorize race. Thinking bioculturally informs research by exploring micro/macro level factors that affect human beings (Hartigan 2013a). Striving to construct working definitions of race helps to standardize analyses,

and challenges research that does not operationalize race (Sankar 2003; Sankar 2006; Sankar and Cho 2002; Sankar, et al. 2004; Sankar and Kahn 2005). Health disparity research is necessary to understand myriad pathways of racism, and well suited for ethnographic studies that explore personal meanings and experiences (Dressler, et al. 2005; Gravlee 2009; Gravlee and Sweet 2008; Hartigan 2013; Hartigan 2013). Additionally, locating race in studies of environmental justice aids in understanding the agendas of “market forces (Hartigan 2013)” with the regard to consumption patterns. Finally, it is critical that ideas about race and racism are culturally informed and culturally variable (Hartigan 2013). Employing reflective analyses insures that researchers get out their own way by forcing them to acknowledge how their own issues surrounding race are clouding their research.

Health disparities research is dedicated to understanding varying incidence and prevalence of illness and disease among people. Former Surgeon General David Satcher (2004) finds that more than 83,000 African Americans deaths are attributed to health inequality every year. National Institutes of Health (NIH) earmarks millions of dollars for health disparity research every year. There is a resurgence in the debate about race – is race a “natural, biological concept (Krieger 2012)” or are the effects of racism responsible for health inequalities (Bamshad 2005; Dressler, et al. 2005; Krieger and Fee 1996).

Genetic research turns its gaze on the significance of population based disease (Lancaster 2006). Anthropologist Roger Lancaster (2006) warns against “bioreductivism” or the act of reducing all aspects of health to “what’s written in our genes”. Some researchers believe that many health disparities can be explained by understanding the

distribution of alleles in certain geographic populations (Foucault 1987), and (Krieger 2012). Is geographic population the new code for race? Gravlee and Sweet (2008) asserted,

Medical anthropologists are well positioned to make anthropology matter again. One striking element of recent debates in medicine and public health is how often clinicians and health researchers appeal to anthropologists for guidance on the meaning of race, often citing American Anthropological Association's recent position statement...Such broad recognition is rare, a singular invitation to be relevant in solving a problem of theoretical and practical importance (2008:28).

My desire is to address how race is created, transmitted, and maintained by understanding what race means in African American women's lives.

How I Conceptualized Race for this Dissertation

Health research (e.g. sociology, public health, epidemiology, anthropology, etc.) studies the rates of disease and/or poor health in specific populations. The specific populations are categorized by race without explaining what race means and how the concept will be operationalized in the research. It is important to define how the concept of race is utilized in this dissertation research project. African American (for the purposes of this dissertation project) is used to recruit people who self-identify, share some phenotypical characteristics (e.g. skin color, hair texture) often attributed to African ancestry, and share an ascribed status in the United States that is responsible for de jure and de facto discrimination.

In no way, is African American used to imply some genetic similarity or innate predisposition for poor health and/or disease. In the spirit of Boas' human plasticity, African American is used to describe a socially constructed population whose members were/are disproportionately excluded from resources (economic/political/social) within the

American (United States) environment; whose exclusion creates poor health in myriad conditions (e.g. pregnancy outcomes, hypertension, diabetes, HIV/AIDS, high IMR, etc.) when compared to other socially constructed populations in the United States.

CHAPTER 3 HOW STIGMATIZATION OF AFRICAN AMERICAN WOMEN BECOMES NATURALIZED

HOW REPRESENTATION FUELS STIGMA

Sander Gilman (1985), discusses the importance of representation in the ways that people conceptualize their worlds. Connecting images to groups of people facilitates a process in which people “are characterized using a model which synthesizes our perception of the uniformity of the groups into a convincingly homogeneous image (1985: 204)”. Detailing the importance of artistic representation of female bodies – specifically Black and white female bodies – Gilman (1985) explores the historical trajectory of representations of Black female sexuality in European art. Understanding when and how Black women’s bodies come to signify hyper-sexuality is critical to conceptualizing the complicated relationship between Black¹ women and sexuality² .

Prior to examining how Black women are perceived as the embodiment of hyper/deviant sexuality it is important to explore how anthropologists study the body because this dissertation is “an opportunity for rethinking various aspects of culture and self (Csordas 1999)”. The development of the anthropology of the body literature includes four stages: “implicit or taken for granted, explicit topic of ethnographic concern, a problem to be accounted for with respect to its cultural and historic mutability, and finally an opportunity for rethinking various aspects of culture and self (Csordas 1999:172)”. Both Csordas (1999) and Scheper-Hughes and Lock (1987) begin their chronological examinations of the anthropology of the body with mind-body duality. The separation of

¹ I use “Black” to emphasize phenotypical difference when compared to White women.

² I am using sexuality as a concept that encompasses many meanings. Sexuality connotes moral judgement and more specifically humanity in its essence. Since earliest contact Europeans doubted the humanity of Africans. Supposed “differences” in genitalia and sexual appetites were used to justify inhumane treatment of Africans. See discussion of Hammond, Gilman, and Hine.

the mind from the body is conceptualized by philosopher-mathematician Rene Descartes (Nancy and Margaret 1987). Credited as being the author of many of the ideas that influence biomedical notions about the body; Descartes believes that empirical evidence is needed to prove “truth” (1987). The body becomes the realm of science and the mind becomes representative of the soul (Scheper-Hughes and Lock 1987).

This “Cartesian dualism (9)” is responsible for creating dichotomous thinking that evolves into an ordering of things in ways that seem based on “nature” (e.g. civilized – primitive, intellectual – emotional) (Lock 1993). The body is associated with all that is primitive, physical, and subjective (Lock 1993). The mind is associated with civilized, intellectual, and objective (Lock 1993). Durkheim’s *The Elementary Forms of Religious Life* categorizes “man as double” by double he means the biological and societal representations of human beings (Csordas 1999; Scheper-Hughes and Lock 1987). The biological represents basic human needs and society represents “intellectual and moral ordering (Scheper-Hughes and Lock 1987:10)”. Understanding how dichotomous thinking evolves regarding “the body” and specifically, racialized bodies, is vital to my assertion that African American women’s feminine hygiene practices are an attempt to equalize their humanity through practice.

How Stigmatization of African and African American Women Informed Practice

African American women’s bodies have been stigmatized since initial contact with Europeans (Gilman 1985; Higginbotham 1992). As early as the twelfth century, European explorers write about Black people they encountered (Gilman 1985). One meeting inspires the following diary entry,

At Seba on the river Pishon ... is a people ... who, like animals, eat of herbs that grow on the banks of the Nile and in the fields. They go about naked

and have not the intelligence of ordinary men. They cohabit with their sisters and anyone they can find ... And these are the Black slaves, the sons of Ham (Gilman 1985:209).

Often juxtaposing white women's sexuality as a product of culture Evelyn Hammond (1999), writes that "Black women's sexuality is constructed in binary opposition to white women's sexuality (p.93)". Thus, sexuality becomes a means of affirming difference between the humanity of Black women/people and white women/people. The next section of this chapter examines the history of binary oppositions regarding Black women and white women.

Sarjie Bartman also known as the Hottentot Venus is the iconic representation of African/African American women's bodies (Gilman 1985; Stephens and Phillips 2003a). Stephens & Phillips' (2003) article begins with a description of social Darwinism that states "the African race is the lowest on the hierarchy of humans in terms of intelligence, health, civility, and basic reasoning (Krieger and Fee 1996)". These ideas are the foundation of Georges Cuvier and Henri de Blainsville's scholarship about African/African American women's bodies and more importantly African/African American women's deviant/hypersexuality (Stephens and Phillips 2003b).

Cuvier and de Blainsville are responsible for disseminating comparisons of the Hottentot Venus' or Saartjie Bartman's genitals with the genitals of orangutans (Stephens & Phillips 2003). Sarjie Bartman works for a White planter in Cape Town, South Africa when she is noticed by a French doctor (Stephens and Phillips 2003). The French doctor coerces Bartman into leaving her home in Cape Town in 1810 (Stephens and Phillips 2003). The doctor tells Bartman that she can make a lot of money by showing her body to Europeans; who are fascinated with "exotic, animalistic body of African women

(Giddings 1985)". Bartman only lives in Europe for six years; she dies within six years of her arrival (Stephens and Phillips 2003b).

Before her death, Bartman presents her almost naked body (only dressed in a loin cloth) to Europeans so that they can see the "exotic African woman" that they read about in the newspapers (Stephens and Phillips 2003). Per historical documents, Bartman does not like displaying her body or people touching her buttocks to determine if they are real but that is what she is paid to do (Stephens and Phillips 2003). Cuvier tries to convince her to allow him to inspect her genitals but Bartman refuses (Stephens and Phillips 2003). Bartman did allow physiologists and zoologists to examine her for three days in Paris in 1815 (Stephens and Phillips 2003). However, after her death in 1816, Cuvier is given Bartman's body to dissect. He details the anatomy of her genitals, breasts, intact hymen and compares her sexual organs to orangutans (Stephens and Phillips 2003, Gilman 1985). Cuvier also compares orangutans mating habits to what he imagines are African women's reproductive behaviors (Stephen and Phillips 2003).

Cuvier's (and later de Blainsville's) writings solidify ideas about African/African American women as "primitive, wild, sexually uninhibited, and exotic" from the early 19th century until the present (Fausto-Sterling 2000). This is my rationale for grounding the depiction of African/African American women as deviant/hyper sexual beings with the image of the Hottentot Venus. These ideas do not begin with Bartman in 1810 but her body becomes iconic as the representation of African/African American women's bodies and their deviant/hypersexuality.

Many scholars argue that the categorization of African/African American women's hyper/deviant sexuality becomes science during the nineteenth century and is ascribed

to justifications for slavery (Brown 1994; Clark-Hine 2007; Gilman 1985; Harris 2003; Higginbotham 1992; Jones 2009). Gilman (1985) argues that this reification is possible because belief in science is moving towards positivism that is spreading throughout Europe during the second half of the 1800's (Turner 2009). Despite understanding that science and culture are inextricably linked and mutually informing; "science" is perceived as objective rather than subjective (Gilman 1985; Turner 2009).

In Hammonds (1999) article "Toward a Genealogy of Black Female Sexuality: The Problematic of Silence", three issues related to African Americans women's sexuality are discussed. First, African American women's sexuality is constructed in binary opposition to white women's sexuality "it is rendered simultaneously invisible, visible (exposed), hypervisible, and pathologized in dominant discourses". Second, "resistance to dominant discourses are coded and lived by various groups of African American women within African American communities at different historical moments (p.93)". Third, Hammonds discusses the "limitations of strategies of resistance in disrupting dominant discourses about African American women's sexuality and implications of this for African American women with AIDS (p.94)". Hammond's third point relates to stigma because I argue that hyper cleanliness is a form of resistance to stereotypes and negative characterizations African American women as subhuman.

African American Women's Sexuality is to White Women's Sexuality as Nature is to Culture

Hammond's (1999) first revelation about African American women's sexuality is seminal in how I make connections between (1) the historicization of African/African American women's bodies as deviant/hypersexual, (2) African American women's rates of engaging in douching practices, (3) and Foucault's (1987) theory "care of the self and

technologies of the self". Hammond's (1999) insight about the binary relationship between African American women's sexuality and white women's sexuality leads me to reconceptualize Sherry Ortner's (Ortner) analogy "female is to male as nature is to culture" to African American women's sexuality is to white women's sexuality as nature is to culture. This reconceptualization distills "racism", the Great Chain of Being, and social Darwinism into a phrase that explains how the reification African/African American women's deviance (morally, sexually, and/or intellectually) is iconic.

If Africans are viewed as the "lowest form of humans (Gilman 1985, Stephens and Phillips 2003)" then all aspects of their behavior will be more animal like or natural. Ortner wrote (1972),

Every culture, or, generically, "culture," is engaged in the process of generating and sustaining systems of meaningful forms (symbols, artifacts, etc.) by means of which humanity transcends the givens of natural existence, bends them to its purposes, and controls them in its interest. We may thus broadly equate culture with the notion of human consciousness, or with the products of human consciousness (i.e., systems of thought and technology), by means of which humanity attempts to assert control over nature (p. 72).

Ortner uses "nature" as a signifier of beings (women) that need to be "controlled" or molded into something useful. Conversely, "culture" signifies rational behavior based on "human consciousness" and the "products of human consciousness".

Ortner (1972) discusses stratification of "human essence" based on sex by employing the language of Great Chain of Being. Additionally, Social Darwinism and biological determinism/racism provide a justification to control/colonize/enslave natural humans (Africans/African Americans). If white women do not rank inclusion on the Great Chain of Being remember that African women are considered one step above orangutans (Gilman 1985, Stephens and Phillips 2003).

During this time, there are many debates about slavery in Europe. By the 19th century, "science" proves that African/African American female sexuality is uncontrollable. Gilman (1985) concludes that "the construction of African female sexuality as inherently immoral and uncontrollable is a product of 19th century biological sciences". Per Hammond (1999), "ideologically, these sciences reflected European males' fear of difference in the period of colonialism, and their consequent need to control and regulate the sexuality of those rendered 'other' (95)". "Respectability and sexual control are set against promiscuity in the discourse of middleclass whites (Hammond 1999: 96)". There is a fear among land owning whites that African Americans - free and enslaved - and white immigrants are "undermining" the morals of the country (Hammonds 1999).

Sander Gilman (1985) discusses Buffon's (French naturalist) thoughts about African women. Previously, I discuss comparisons of African women's genitalia and sexual practices to orangutans. During the 1800s, comparisons between orangutans and Africans are widely accepted as legitimate by "scientists" (Gilman 1985). For example, Buffon's observations during his travels are elevated to "scientific" knowledge making them more objective than subjective. He writes, that African women are so hypersexual that they will have sex with apes (Gillman 1895). Per Gilman (1985), Buffon avows that the Great Chain of Being demonstrates that Africans occupy the "antithetical position to the whites on the scale of humanity (212)". Buffon's views extend to "all aspects of mankind, including sexuality and beauty (212)". Therefore, the African woman is the "antithesis of European sexual mores and beauty (212)". Although Buffon does not explain why he considers Hottentots to be the lowest form of African and believes they occupy the lowest rung on the Great Chain of Being; Gilman (1985) asserts that for

nineteenth century explorers Hottentots are central to “the nineteenth century icon for sexual difference between the European and African (212)”.

The specific focus on Hottentot women explains how Saartjie Bartman becomes the symbol for African/African American women’s bodies. It is important because African women are associated with the “natural”; they are considered devoid of “human consciousness” and “products of human consciousness”. African women become essentialized as bodies rather than minds. This essentialization of African/African American women as deviant – morally/sexually/intellectually transcends occupation, appearance, class affiliation, and behavior. White women are not essentialized in the same ways. White women’s status can be elevated by the men they are affiliated with, their occupations, appearance, etc.

In 1884, “former slave, anti-lynching crusader, suffragist, women’s rights advocate, journalist”, Ida B. Wells-Barnett, sues the Chesapeake & Ohio Railroad Company because they force her off the train when she refuses to ride in the “Jim Crow” or smoking car; because a White man wants her seat in the “ladies” car (Baker 1996). Wells-Barnett bases her suit on the premise that she is a “lady” due to her social status and occupation. Wells-Barnett believes her race will not obviate her position as a school teacher (Baker 1996). She wins the initial suit but it is overturned on appeal to the Tennessee Supreme Court (Baker 1996).

Wells-Barnett’s occupation, education, and appearance are indicative of being a “lady” in 1884. Apart from submissiveness, Wells-Barnett personifies the “cult of true womanhood” (Welter 1966). Per Barbara Welter (1966) “the cult of true womanhood asserts that womanly virtue resides in piety, purity, submissiveness and domesticity.

These characteristics are crucial to promoting a woman's "proper" role in the country. It is evident these assertions are at odds with popular notions about African American women's deviant/hypersexual persona. Hammonds' (1999) argues that African American women are never apart of this cult no matter how much they internalize its values. During the Reconstruction Period, politics, race, and sexuality become popular rationales for lynching African Americans.

Before the Civil War, Sojourner Truth (1992) questions whether society sees her as a woman. In 1851, Truth's (1992) speech focuses on the contradictions between being an African American woman (and former slave) who picks more cotton than some of the men that she works with in the fields and popular ideas – shaped by the cult of womanhood that governed many white women's lived experiences. Truth (1851) argues that her ability to work like a man does not prevent her from bearing or breastfeeding children. Yet she receives none of the perceived advantages bestowed upon white women or white people. At its essence, Truth's (1851) speech is about the denial of her humanity and the denial of the humanity of other African Americans.

Truth's (1851) words are appropriate for this discussion because perceptions about African/African American people's equal humanity have been challenged for centuries. This is not to say that all white people are treated equally. However, never in the history of this country have the social/legal/political structures enacted policies and practices that diminish the rights of white people based on their race.

I assert that challenges to the equal humanity of African Americans are part of the nucleus of the creation of African American women's clubs, respectability politics, and hygiene practices. The other critical component is survival. Resistance to perceptions of

African American women's hyper/deviant sexuality is about more than stereotypes it is about survival. During the Reconstruction Era, African American women need to be perceived as morally upstanding to protect themselves from rape and other assaults (Hammonds 1999; Hine 1989a; Hine 1989b). With the equal humanity of African American people in question African American women create community-based organizations to assist each other and Black communities. The women's clubs are usually affiliated with churches but not always. Whether secular or non-secular, examining African American women's clubs is vital to understanding the cultural milieu that created African American women's special attention to cleanliness.

African American Women's Clubs

Michelle Mitchell's (2004) book *Righteous Propagation* details the experiences of African Americans during the Reconstruction Era. African Americans are trying to uplift their community and navigate their ambiguous status as formerly enslaved people. Cleanliness, is stressed as a means of combating negative assumptions about African American's. Thus, hygiene practices (both personal and environmental) are core foci of African American middle-class women's clubs (Mitchell 2004). Victoria Wolcott (2001) also writes about how early twentieth century African American women living in Detroit, Michigan concentrate on teaching other African Americans, especially African American women, how to be respectable (e.g. personal appearance and morally upright behavior) and improve their negative master status.

Middleclass African American women use respectability politics as a class wedge to separate themselves from poor African American women. Michele Mitchell's (2004) *Righteous Propagation* and Victoria Wolcott's (2001) *Remaking respectability: African*

American women in interwar Detroit examine how middle class African American women's clubs made uplifting the race their mission. Uplifting the race had two primary foci (Wolcott 2001, Mitchell 2004). First, to help their poorer less educated African American sisters embrace the cult of womanhood so that they can better their lives with respectable occupations or marriages (Mitchell 2004). Second, to distinguish themselves from their poorer less educated African American sisters by demonstrating to white society that they embraced the cult of womanhood well enough to teach its values to others (Wolcott 2001, Mitchell 2004).

During slavery and through the Jim Crow Era, African American women are thought to be hyper sexual, incapable of being raped, and unfeminine (Hammonds 2004; Hammonds 1999). Evelyn Hammond (1999) discusses proper Victorian morality that helps to construct the binary opposition that characterizes African American and white women's sexuality. In this binary, white women are "the epitome" of respectability and sexual control: African American women are "the epitome of immorality, impurity, pathology, and sex itself" (Hammonds 1999). This narrative about African American women's sexuality becomes and in some cases, continues to be a dominant component of African American women's master status. The middle-class African American women's clubs develop strategies to combat stereotypes to change negative narratives about African American women's sexuality; by replacing it with the super moral African American woman who is the epitome of Victorian womanhood (Hammonds 1999 and Mitchell 2004). Hammonds (1999:97) asks a critical question, "How did something that was initially adopted as a political strategy in a specific historical period become as ingrained in Black life as to be recognizable as culture?"

“The three B’s – the Bible, the bath, the broom: clean life, clean body, clean home (Nannie Lee Burroughs (1909) (Harley 1982)” encapsulates the foci of the respectable twentieth century African American woman. The preceding quote is a guiding mantra for African American women since the early 20th century. Cleanliness, as a core component of health - both individual and public, is a widely expected concept (Rosen 2013; Smith 1995). Historically, African American women are charged with uplifting themselves and their families with limited financial resources (Rosen 2013; Smith 1995). A core value (especially during the twentieth century) within many African American communities, and broader American culture, is cleanliness. Cleanliness affords members of this racially stigmatized group an opportunity to refute negative stereotypes that depict them as uncivilized, ignorant, filthy, and immoral people. “The three B’s (Burroughs 1909) (Harley 1982; 1990)” are a perfect illustration for Douglas’s assertions about marginalized group’s attentiveness to hygiene rituals (Douglas 1966). Necessitated by the anxiety African American’s presence causes in greater American society, African American leaders seek to correct negative assumptions about the group’s perceived danger by charging the group with hyper-cleanliness.

Scott’s (1990) article "*Most Invisible of All: Black Women's Voluntary Associations*" discusses the history of African American women’s voluntary organizations or clubs. Many of the clubs are established by free African American women living on the East Coast (Scott 1990). It is difficult to find documentation because many records are lost or destroyed (Scott 1990). However, financial documents prove fruitful for Scott because the clubs collect dues from their members. Scott (1990) finds documents going back as far as the early eighteenth century; the “Female Benevolent Society of St. Thomas” a

mutual aid society is established by African American women in Philadelphia in 1793. In 1818, “The Colored Female Religious and Moral Society” of Salem, MA, includes in its constitution the following articles:

Art IV. – We promise not to ridicule or divulge the supposed or apparent infirmities of any fellow member; but to keep secret all of the things relating to the Society, the discovery of which might tend to do hurt to the Society or any individual.

Art V. – We resolve to be charitably watchful over each other; to advise, caution and admonish where we may judge there is occasion, and that it may be useful; and we promise not to resent, but kindly and thankfully receive such friendly advice or reproof from any one of our members.

Per Scott (1990) by 1830, there are at least twenty-seven African American female mutual aid societies in Philadelphia, PA. These mutual aid societies include working class women and middle-class women as members even though they are seldom in the same organization (Scott 1990). The working class African American women’s organizations focus on pooling money to help members during sickness, unemployment, or other family troubles (Scott 1990). Middle-class African American women’s organizations focus on “mental improvement in moral and literary pursuits (Scott 1990)”. Some of the middle-class African American women’s societies write articles for Frederick Douglass’s abolitionist paper *North Star*. By 1832, African American women are very active in establishing female anti-slavery societies in the Northeastern states. In 1843, Detroit, MI, a “Colored Ladies Benevolent Society” is registered and held regular meetings at the Colored Methodist Church (Scott 1990; 7).

Only free women are members of the earliest African American women’s societies but after emancipation African American women quickly organize themselves to create beneficial aid societies. Scott (1990) writes about the “Daughters of Zion of Avery Chapel”

an aid society in Memphis, TN, that votes to hire a doctor to treat all their members. The aid society pays the doctor to ensure that all members have access to medical care without worrying about individual ability to pay. This transaction is recorded by the Freedman's Bank in 1867 (Scott 1990).

During the Reconstruction Period, many African American aid societies are single sex but some were coed and members are both middle-class and working class. Kathleen Berkeley (1985) argues that African American aid societies frame the African American women's club movement that begins in the 1890s. The Black Baptist church creates a space for African American women to organize and assume leadership positions.

African American women organize a women's convention that provides leadership training and is key in supporting Nannie Helen Burroughs' "National Training School" (Scott 1990). Burroughs' school helps teach African American women how to support themselves and become leaders in their own communities. Despite all the success that African American women's clubs have – white public opinion about African American people and African American women remain negative (Scott 1990).

Scott (1990) offers two articles written during the Progressive Era as evidence of White people's thoughts about African American people. First, southern historian Phillip A. Bruce wrote,

The average [black] father and mother are morally obtuse and indifferent, and at times even openly and unreservedly licentious. Their character is such ... that they have no just conception of the paternal obligation. Mothers do not endeavor to teach [their daughters] those moral lessons that they peculiarly need as members of the female sex. Chastity is a virtue which the parents do not seem anxious to foster and guard in their daughter; she has no abiding sense of personal purity ...

The second article was written by a white woman in a journal titled *Independent*:

Degeneracy is apt to show most in the weaker individuals of any race; so negro women evidence more nearly the popular idea of total depravity than the men do ... they are the greatest menace possible to the moral life of any community where they live. And they are evidently the chief instruments of the degradation of the men of their own race. When a man's mother, wife, and daughters are all immoral women, there is no room in his fallen nature for the aspiration of honor and virtue ... I cannot imagine such a creation as a virtuous black woman.

Scott (1990) addresses the disconnect between the actual lives of middle-class African American women who are often married to educated professional men; and the general (white) perception of African American women during the Progressive Era. This incongruence between race and status is researched by William Dressler. Dressler (Dressler, et al.) researches incongruence in African American people in Alabama and dark skinned people in Puerto Rico. Dressler (2007) finds that higher blood pressures are associated with African American and dark skinned Puerto Ricans people whose status/occupation is incongruent with their race. African Americans and dark skinned Puerto Ricans who have high status occupations (e.g. doctor or lawyer) are more likely to have high blood pressure than African Americans and dark skinned Puerto Ricans who have low status occupations (Dressler 2007).

White women's club members have more issues with middle-class African American women than with poor African American women. When Josephine Ruffin tries to integrate the national convention for the General Federation of Women's Clubs; a white woman said "It is the high-caste negroes who bring about all the ill-feeling. The ordinary colored woman understands her position thoroughly (Scott 1990: 12)". There is a saying about African American people, status, and the difference between white people's thoughts in the northern United States and the southern United States...

In the North, white people don't care how successful you are as long as you don't get too close; In the South, white people don't care how close you get as long as you don't become too successful (anonymous).

Victorian morality informs the politics of silence that surrounds African American women's sexuality and becomes a strategy for African American women reformers (again Douglas' (1966) *Purity & Danger*). The reformers hope to make stereotypes about African American women's uncontrolled sexuality disappear (Higginbotham 1992). I include an extensive discussion about the politics of silence in the chapter ten. Most of my informants' mothers never discuss sexuality or douching with their daughters. Darlene Clark-Hine (2007) writes about "the behavior and attitudes of African American women that created the appearance of openness and disclosure but actually shielded the truth of their inner lives and selves from their oppressors." Thus, feigned openness about superficial things is enacted as a buffer between African American women, men (both African American and white) and white women (Hine 1989a). This strategy does not work because stigma surrounding African American women's sexuality becomes a type of truth that influences how African American women are perceived and treated.

Central to the cult of womanhood is purity – sexual purity (Welter 1966). As slaves, African American women have virtually no control over their sexual and reproductive practices (Higginbotham 1992). Free African American women are often raped while working in white people's homes (Higginbotham 1992). For African American and white women - control of their sexuality is directly related to the status of the men they are affiliated with (DuBois and Gordon 1983; Higginbotham 1992; Hine 1989a). The most dangerous place for women in the past and present is at home (DuBois and Gordon 1983). Due to women's lack of power during this period in American history, sexual purity

is viewed as a badge of honor. This is especially true for middle class African American women who are consider themselves exemplars for their entire race.

Hammonds (1999) asserts that the worst part of silence is that African American women lose the ability to conceptualize their own sexuality. Hazel Carby (1993) writes that in the 1920s (during the Harlem Renaissance) African American women writers focus their energy on defending their morality or displacing it somewhere else. Blues singers of this era are not African American middle class reformers and sang about sexuality (Carby 1994). Hammonds (1999) writes that the state sees all African American women as the same. Class and educational distinctions do not matter regarding rights or having the ability to vote. Thus, the respectability politics that are central in African American women's clubs both religious and secular - illustrate the lie of African American women's immorality. So, are respectability politics hegemonic or acts of resistance, I argue they are both acts of resistance and hegemonic because domination must be internalized before one can resist it.

The health implications of African American women's politics of silence are not lost in this discussion about history. African American women who do not trust white doctors can be viewed as protecting themselves from being dehumanized by caregivers. So not discussing douching because of its direct relationship to sex, morality, and cleanliness can be read as protective not dismissive or deceptive. Previous research finds that health care workers who focus on HIV prevention and treatment are not immune to stereotypes about African American women (Kinsler, et al. 2007). To not appear promiscuous, African American women who provide incomplete sexual histories to doctors are displaying acts of resistance and hegemony. Often these women are perceived as unsympathetic and

hypersexual drug abusers who get what they deserve (Kinsler, et al. 2007). Topics like vaginal douching are connected to sexuality and STD's. Many women's douching practices are initiated when they perceive something is wrong with their vaginas or when they do not want to be stigmatized by smell during sexual activity. Thus, many African American women's practices of hygiene are tangentially related to sexuality and are shrouded in the politics of silence.

Connections between Stigmatization of African American Women & Care of the Self and Technologies of the Self

The desire to be clean to prove or display one's humanity relates to Foucault's ideas about what it means to be a proper or good citizen. Care of the self exhibits one's dedication to being a proper citizen of the state (Frank 1998). In ancient Greece, men read philosophy as a means of improving themselves (1998). I apply Foucault's (1987) ideas about care of the self to the practices that African American women engage in as acts of resistance; I employ Foucault's (1987) ideas about technologies of the self to practices that become ritualized within the context of an oppressive structure – racism. Previously, I asked if respectability politics are hegemonic or acts of resistance. I argued that respectability politics, hyper cleanliness, politics of silence and the practices (hygiene and vaginal douching) that African American women engage in to embody these ideals are both hegemonic and acts of resistance. They are mutually informing. The technologies of the self are practiced to verify care of the self. The resistance cannot be enacted until the hegemony is embodied. Ultimately, this dissertation project is a critique of power/racism that uses the example of vaginal douching or special attention to cleanliness as examples of performances utilized by African American women who

continually try to display their humanity; because they embody their inequality – not by choice but through hundreds of years of enculturation and acculturation

CHAPTER 4 VAGINAS

INTRODUCTION

This dissertation is about African American women. Much of the content focuses on race. It is my belief that race and gender cannot be separated; you cannot understand the lived experiences of African American women by trying to comprehend how gender effects their lives without exploring how race mediates gender (and vice versa). In chapter six, I provide an overview of the research design and methodologies that structure this dissertation project. I discuss conducting qualitative anthropological research without a traditional setting. However, I argue that the United States is the setting that informs experiences of African American women included in this research. In the Boasian sense, this dissertation is focused on the environment that historically and currently informs how African American women experience race and gender. As this dissertation gives attention to race it was necessary to explore how having a vagina informs African American women's experiences. There are African American women that are not born with vaginas. I understand that this research is limited by only including the voices of cisgender African American women.

Feminine hygiene provides a unique opportunity to explore two central areas of anthropological inquiry – the body and hygiene rituals. Specifically, this dissertation project focuses on feminine hygiene or any means of cleansing the interior and/or exterior of the vagina and reproductive tract. Often a taboo topic the vagina is the site of material and symbolic meanings for women (Braun and Wilkinson 2001). Because the vagina is part of the biological body and the site for myriad cultural/social/historical representations

it provides a unique opportunity to understand bio cultural phenomenon (Braun and Wilkinson 2001).

If women's understandings of the vagina are developed in relation to their socio-cultural and historical context, then representations of the vagina exist as cultural resources that women (and men) can use for making sense of the vagina and their experiences of it. Likewise, these representations can be resisted, and potentially challenged. From this theoretical viewpoint, representations are not simply 'ideas', but have material impacts on people's lives, with implications for women's sexual and reproductive health (Braun and Wilkinson 2001: 18).

This chapter intends to examine gender through the lens of the vagina. This chapter is divided into several sections (1) a historical overview of ideas about the vagina, (2) a historical overview of vaginal douching, (3) an overview of cross-cultural douching practices, (4) and an overview of the epidemiology of vaginal douching and vaginal cosmetics. I focus primarily on Western representations and ideas about the vagina because Western culture has been/is the dominant culture in the United States.

Historic Representations and Ideas about Vaginas

Karen Harris and Lori Caskey-Sigety's (2014) book, *The Medieval Vagina*, detail the history of the vagina. Beginning with an examination of the polarization of women (either virgins or whores) Harris and Caskey-Sigety (2014) discuss how medieval women are caught in a paradox. If women remain virgins they ensure their places in heaven; but if women marry and then lose their coveted virginity they are "like whores, albeit married, monogamous whores" but still not virgins (Harris and Caskey-Sigety 2014). There is a disconnect between the secular world and the church (Harris and Caskey-Sigety 2014).

Per Harris and Caskey-Sigety (2014) the disconnect is created and resolved by the financial gains associated with virginity. The church stands to gain if women remain virgins because their dowries are donated to the church (Harris and Caskey-Sigety 2014).

The secular world benefits from dowries as capital in communities, and by children that are products of sexual intercourse (Harris and Caskey-Sigety 2014). In medieval times a woman needs to be a virgin if she wants to be considered for marriage. This requirement is also associated with financial gain or wealth because men do not want to support and/or leave their property to children that are not their biological heirs (Coontz 2005; Harris and Caskey-Sigety 2014).

Virginity is supposedly proven by evidence of an intact hymen. The problem with the hymen's use as an indicator of virginity is that some women are not born with hymens. Additionally, hymens rupture for a variety of reasons unrelated to sexual intercourse (Harris and Caskey-Sigety 2014). In medieval Europe, virginity is a commodity; women need to prove that they are virgins to benefit from virginity (Harris and Caskey-Sigety 2014). Women devise several ways to prove their virginity when they are not virgins (Harris and Caskey-Sigety 2014). One method is to assert the need for a veil or face cover, then employ a real virgin, have her tested, and claim the virgin's test results as their own (Harris and Caskey-Sigety 2014). A popular medieval test for virginity is for the new bride to display her marital bedsheets; if the sheets are bloody it is assumed that an intact hymen ruptured and bled (Harris and Caskey-Sigety 2014). If the woman is not a virgin or did not bleed; some sort of animal blood is used as evidence (Harris and Caskey-Sigety 2014).

In addition to testing for intact hymens, pre-medieval and medieval people believe myriad powers are awarded to virgins (Harris and Caskey-Sigety 2014).

Virgins, according to legends and myths, could do all kinds of hocus-pocus that was chalked up to their *virgo intacta*. A virgin could hold running water in her hands, calm angry bees, fit into clothing impure women couldn't wear,

tame wild beasts, and hold her pee. ...medieval folks thought that regular old sex ruined a lady's bladder (Harris and Caskey-Sigety 2014: 22).

The use of water or holding water becomes a metaphor for morality; if a woman is viewed as gossipy it is thought that she is also loose because if "she opened one orifice, she would open them all (Harris and Caskey-Sigety 2014)". Virginity, is not the only concern of medieval women. Evidence of an overused vagina is also problematic for women (Harris and Caskey-Sigety 2014).

Medieval women douche with chemicals that are believed to tighten the vagina (Harris and Caskey-Sigety 2014). In 1684, a play written by John Wilmot, titled *Sodom, or the Quintessence of Debauchery* includes the following line, "cunt wash't with alum makes a whore a maid". Harris and Caskey-Sigety's (2014) book details evidence of alum used in the 16th, 17th, and 18th centuries to tighten slack vaginas. Virginity, is not the only concern about the vagina during medieval times; the bleeding vagina is also a topic that was and continues to be associated with waste or dirt (Harris and Caskey-Sigety 2014)

Menstruation continues to shape representations of vaginas and women. Harris and Caskey-Sigety (2014) include a passage written by Pliny, the elder in the first century. Per, Harris and Caskey-Sigety (2014), Pliny is considered a scientist during his lifetime and much of his writings are viewed as scientific knowledge for hundreds of years.

Contact with [menstrual blood] turns new wine sour, crops touched by it become barren, grafts die, seed in the gardens are dried up, the fruit of trees fall off, the edge of steel and the gleam of ivory are dulled, hives of bees die, even bronze and iron are at once seized by rust, and a horrible smell fills the air; to taste it drives dogs mad and infects their bites with an incurable poison (Pliny the elder in the first century) (Delaney, et al. 1977).

Pliny's ideas about the pollutive properties of menstrual blood have not disappeared. Negative feelings about menstruation are expressed by research participants in this

dissertation project. The medieval church does not dispel negative attitudes about menstrual blood and menstruating women; if anything, the church perpetuates negative attitudes about menstruating women (Harris and Caskey-Sigety 2014).

The medieval Christian church views menstruation as a punishment from God for “feminine wickedness” or Eve’s fall from grace (Harris and Caskey-Sigety 2014). The Church creates standards or rules that men and women need to obey regarding menstruation (Harris and Caskey-Sigety 2014). These rules include: 1) menstruating women cannot take communion, and 2) anything or anyone a menstruating woman touches is unclean for seven days; furthermore, a menstruating woman must take a ceremonial bath before she is considered clean (for Jewish women a mikveh) (Harris and Caskey-Sigety 2014). Harris and Sigety (2014) discuss an interesting myth in their book. Red headed or “ginger” children are the result of sex with a menstruating woman (Harris and Caskey-Sigety 2014).

Medieval women create devices like modern tampons; however, rags are used instead of pads which are not inverted until later (Harris and Caskey-Sigety 2014). Strings are attached to cotton or another material to ensure that it can be removed once it is soiled (Harris and Caskey-Sigety 2014). Poor women cannot afford cotton so they use bog moss to absorb menstrual blood (Harris and Caskey-Sigety 2014). No method of absorbing menstrual blood is completely effective; so, medieval women wear dark colored petticoats to camouflage leaks.

Historical Overview of Vaginal Douching in the United States

Vaginal douching apparatus and recipes are discovered by archeologists in an Egyptian tomb that dates to 1500 B.C. (Harris and Caskey-Sigety 2014). The recipe is

written on a papyrus scroll and suggests that women rinse their vaginas with garlic and wine to cure infections (Harris and Caskey-Sigety 2014). Per Harris and Caskey-Sigety (2014), women document douching for several reasons including but not limited to removing menstrual blood, removing semen to prevent pregnancy, and removing pus from sexually transmitted infections. Unlike modern women, that douche to “feel fresh” medieval women douche to prevent pregnancy and cure sexually transmitted infections (Harris and Caskey-Sigety 2014).

As early as 1790, women in the United States, record using vaginal syringes to inject solutions into the vagina as a means of birth control (Stanley 1995). Between 1880 and 1892, four women hold patents for vaginal syringes (Stanley 1995). Caustic and acidic chemicals are thought to kill sperm and women are poisoned by douching with products like Lysol (Stanley 1995). One of the benefits of vaginal syringes and subsequently, vaginal douche is that hygiene rather than birth control can be its official function (Jütte 2008). The passage of the Comstock Act of 1873, prevents the dissemination of contraceptives, pornography, and anything that can be construed as obscene or immoral (Tone 2002). Thus, contraceptives are advertised and sold as feminine hygiene products so that laws are not broken did not violate the law (Tone 2002).

By the 1930's, advertisements for feminine hygiene products are in every popular women's magazine (Tone 2002). Douching products are popular amongst women of every socioeconomic level but the ads target middle-class housewives by suggesting that failure to use their products can put their marriages at risk (Tone 2002). Per researcher Andrea Tone (Tone), crews of women are deployed to knock on doors in a variety of communities to convince women that they need to use feminine hygiene products; despite

the infections, pregnancies, and even deaths that result after women repeatedly douched as a means of birth control.

In the 1940s, vaginal douching as an effective contraceptive is no longer needed to sell feminine hygiene products (Ferranti 2011). After World War II, marketing companies realize that African Americans are viable consumers. They begin targeting newspapers and magazines with predominantly African American readers (Ferranti 2011). Ferranti (2011) quotes D. Parke Gibson, the founder of the first African American advertising firm in New York City in 1969. Gibson writes, “Undoubtedly, much of the desire for cleanliness is to overcome the prejudicial old wives’ tale that all Negroes smell bad”. The push for African American dollars by feminine hygiene manufactures continues by embedding advertisements for feminine hygiene products in Ebony and Essence magazines; these publications cater almost exclusively to African American readers (Ferranti 2011). Linda Ferranti (2011) asserts in her article “An Odor of Racism: Vaginal Deodorants in African-American Beauty Culture and Advertising”, that advertisements targeting African American women are effective because research shows that African American women have adopted douching practices as a cultural “norm”

African American Women’s Feminine Hygiene Practices

Frequently thought of as dirty and smelly by lay people doctors discourage the regular use of internal vaginal cleansing or vaginal douching since the 1980’s (Baird, et al. 1996). The “clean” vagina is a contested concept. Per physicians the vagina is a self-cleansing organ; but this idea is not shared by all women – especially African American women who are more likely to douche than any other population in the United States (Annang, et al. 2006; DiClemente, et al. 2004; Klebanoff, et al. 2010; Misra and Trabert

2007; Misra, et al. 2006). I propose that the tension between scientific knowledge and local knowledge presented an opportunity to examine the relationship between culture and health in two areas – reproductive health and race.

Feminine hygiene practices are behaviors initiated by the individual with the intent of maintaining cleanliness by removing and/or controlling bodily substances (e.g. menstrual blood, semen, vaginal secretions, etc....). For the purposes of this dissertation, feminine hygiene practices are considered a component of women's reproductive self-care practices (RSCP). This concept of RSCP is influenced by Dill et al.'s (1995) conceptualization of "self-care" practices, and Centers for Disease Control and Preventions broad scope of reproductive health. Dill et al. (1995) defines self-care as "the repertoire of self-care behaviors individuals develops over time, the sources of particular symptoms responses in the context of that repertoire, and the diverse linkages among sources of care". Dill et al.'s (1995) version of self-care theory is conducive to identifying the micro level data (e.g. personal meanings, experiences, and behaviors) and understanding how individuals manage perceived health risks. Research foci dedicated to improving the health of women "from menarche through menopause" are included under the umbrella titled Reproductive Health" (Division of Reproductive Health 2013).

Feminine hygiene practices include any practices utilized by women to clean the exterior and the interior of the vagina and reproductive tract. Cross cultural research finds that women engage in various practices across the lifespan (e.g. intravaginal cleansing, external washing, vaginal douching, and ingesting substances) (Hilber, et al. 2007; Hilber, et al. 2010). It is important to note that feminine hygiene practices often have multiple

purposes (e.g. cleanliness, increasing or decreasing fertility, and sexual satisfaction) (Braun and Wilkinson 2001; Hilber, et al. 2010).

Research conducted from 2002 to 2007, examine the relationship between vaginal douching and preterm birth find that women who douche during pregnancy have an increased risk for preterm birth (Bruce, et al. 2000; Fiscella, et al. 2002; Misra and Trabert 2007). Additional research finds that women who report douching for ten years or more have a 1.9-fold increase in preterm birth (Fiscella, et al. 2002). African American women are 34% more likely to report douching on a weekly basis than White women (Martino and Vermund 2002). Despite numerous studies concluding that douching is associated with negative reproductive outcomes and unnecessary because the vagina is a self-cleansing organ; “few groups, including the American Public Health Association, formulate statements guiding women and health providers around this practice (Association 2007).”

Previous research finds significant relationships between intimate partner violence and vaginal douching (Seth, et al. 2015; Weisman, et al. 2007). Weisman et al. (2007) suggest that there is a synergistic relationship between intimate partner violence, sexually transmitted diseases, and vaginal douching. At the root of this synergistic relationship is women’s power or lack thereof in intimate relationships that include women who are most likely to douche vaginally. African American women and White women that are most likely to douche have limited educational and economic resources. They are often reliant on male intimate partners for resources. Their lack of power in intimate relationships makes it more difficult for these women to refuse sex, require condom usage, and leave abusive relationships. Vaginal douching is identified as a practice that increases the risk

of contracting HIV and other sexually transmitted diseases, and as an agent of upper reproductive tract infections (RTI). RTI (e.g. bacterial vaginosis) are known contributors to spontaneous preterm birth. Therefore, vaginal douching provides a starting point or thread to begin unraveling the myriad aspects of African American women's reproductive self-care practices.

Seth et al. (2015) examines the relationship between intimate partner violence and sexually transmitted infections (STI) in 848 African American women enrolled in a HIV/AIDS intervention program. The rates of HIV and STI infections are thought to be at least 20 times higher than rates of infection for white women (Seth, et al. 2015). Of all the new HIV infections in 2010, African American women (13-24 years old) represent 23%, and the rate for African American women between the ages of (25-30) is 30% (Seth et al. 2015). A new concern for researchers is the relationship between intimate partner violence (e.g. physical, sexual, or psychological harm by current or former partner) and STIs (Seth et al. 20015). Vaginal douching is included in the intervention program to educate participants about the negative aspects of douching, and the relationship between douching and STI/HIV transmission (Seth et al. 2015).

While the researchers do not report findings about the frequency of vaginal douching it is worthwhile to mention that they do find a statistically significant relationship between IPV and STI/HIV infection (Seth et. Al 2015). The pathway between IPV and STI/HIV infection is increased by risky sexual behaviors amongst the participants and douching is listed as a risky behavior (Seth et al. 2015).

Cross-Cultural Douching Practices

Much of the cross-cultural research about vaginal douching focused on women's practices in Sub-Saharan Africa (Hilber, et al. 2010; Lees, et al. 2014; Majigo, et al. 2015; Pérez, et al. 2016). The relationship between vaginal douching practices and transmission of HIV/AIDS creates a renewed interest in vaginal hygiene practices (Hilber, et al. 2010; Lees, et al. 2014; Majigo, et al. 2015; Pérez, et al. 2016). As the HIV/AIDS pandemic continues to affect millions of people around the world; vaginal practices in Asia, Central and South America, and Europe are also examined.

Women have inserted various items (from plants to Lysol) into their vaginas for myriad reasons (Harris and Caskey-Sigety 2014; Tone 2002). In 1653, an English botanist, Nicholas Culpeper, writes the prescription for "women's troubles" that "should be applied directly to the afflicted area (Modernish 2014)". Less than one hundred later, Pierre Pomet, creates a mixture of white Vitriol (metal sulphate), Roch Alum, and Spring water that is injected into the vagina (Modernish 2014). Pomet's prescription is supposed to cure whites in women (a vaginal discharge caused by sexually transmitted infections). In the late 1800's the vaginal syringe is readily available as a method of birth control (Harris and Caskey-Sigety 2014).

Wang et al. (2005) examines the relationship between 454 female sex workers in a Chinese county who douche vaginally and regular condom usage. Wang et al. (2005) find that female sex workers who douche after sex with clients are less likely to use condoms than female sex workers who do not report douching. The female sex workers who douche state that they believe that vaginal douching protects them from pregnancy, HIV/AIDS and STI transmission (Wang, et al. 2005). Because of their belief that vaginal

douching protects them from acquiring an infection the sex workers do not see the need to use condoms with clients or regular sexual partners (Lees, et al. 2014).

Heng et al. (2010), explores the vaginal douching practices of 451 Cambodian teenagers and women aged 15-49 years. The researchers want to determine the relationship between vaginal douching and genitourinary symptoms (e.g. vaginal discharge, urinary pain and frequency, and vaginal bleeding) and infections (Heng et al. 2009). Over 76% of the sample douches at least once a week (Heng et al. 2009). More urban than rural women in Heng et al.'s sample report douching more than once per week. There is a statistically significant relationship between frequency of douching and genitourinary symptoms (Heng, et al. 2010). Frequency of douching is associated with yeast infections (Heng, et al. 2010). It is interesting to note that Heng et al. (2009) compare the high percentage of Cambodian women that report regularly douching with African American women.

Feminine hygiene practices are created and transmitted through social relationships and often utilized to maintain relationships. For example, women living in Little Haiti (a neighborhood in Miami, FL), engage in feminine hygiene practices that begin in Haiti, and reinforce cultural beliefs about magic, cleanliness, and how to keep an intimate partner (Menard, et al. 2010). *Twalet deba* (cleansing, drying, and tightening the vaginal tract) serves multiple purposes (Menard, et al. 2010). Vaginal secretions are thought to carry infections, aid in the transmission of spells from intimate partner's mistresses, and decrease valued friction during sexual intercourse (Menard, et al. 2010). The shared knowledge of *twalet deba* and its myriad functions are transmitted to

generations of women in the Haitian diaspora. African American women are more likely to douche than any other population in the United States.

Hilber et al. (2012) synthesizes sixteen texts about vaginal practices employed by Sub-Saharan African women between 1951 to 2009. Discovering cultural meanings and motivations are the primary goals of the synthesis (Hilber et al. 2012). This article is particularly interesting because the earlier ethnographies are conducted before the HIV/AIDS pandemic started. Many of the articles written about vaginal practices (including vaginal douching) focus on discovering and/or describing the relationship between vaginal douching and HIV/AIDS and/or STI transmission (Hilber, et al. 2012).

Prior to the HIV/AIDS pandemic, vaginal douching research focuses on meanings both individual and community (Hilber, et al. 2012). The recurring themes are female chastity, cleanliness, and immorality (Hilber, et al. 2012). Much of the early vaginal douching research is used to other colonized people's sexual practices (Piot and Laga 1989). Per Hilber et al. (2012), a large percentage of post HIV/AIDS pandemic vaginal douching research continues to other African women by criticizing their vaginal practices and blaming exotic practices for increasing HIV/AIDS transmission. One benefit of the synthesis is its ability to illustrate the non-sexual meanings of several vaginal practices (Hilber et al. 2012).

For instance, much of the colonial concerns about vaginal practices stem from their interest in African sexual practices. The synthesis demonstrates that much of the African focus on vaginal practices is about fertility not sexuality per se (Hilber et al. 2012). As time progresses colonial interests in African fertility increase as a facet of population

control (Hilber et al. 2012). It is important to note that sexuality is often a taboo subject in many African societies and is rarely discussed (Hilber et al. 2012).

Hilber et al. (2012) divides the texts into the following themes: fertility, body as a metaphor, sexual development, rites and rituals, identity and aesthetics, virginity, social pressure, sex norms and pleasure, ethno-medical beliefs, power of vaginal fluids, evolution of vaginal practices, and worldview of body concepts. Once the synthesized texts are organized into themes some of the older texts (1950s) are re-analyzed using current theoretical frame works (Hilber et al. 2012). Goodman (1951) and White's (1953) initial analysis of gender in Uganda finds that vaginal practices contribute to the submissiveness of girls and women (Hilber, et al. 2012). A recent analysis of Goodman (1951) and White's (1953) texts finds that knowledge of vaginal practices indicates a status change from girl to woman; and that womanhood is highly respected in Uganda because a woman's role is to reproduce Ugandan society through procreation (Hilber, et al. 2012).

Hilber et al. (2012) concludes that,

Although lifestyle, behaviors and world view among the various African populations belies generalization, we think it is of value to observe commonalities and differences between groups as they reveal a range of possible explanations of vaginal practice use that affect how they are lived and can be understood by public health practitioners. Our line of argument synthesis is reflected in our conceptual framework which attempts to offer a graphical explanatory model of vaginal practices as a woman's toolkit to balance her body, prepare for sex and reproduction, and harmonize or mitigate influences (threats and opportunities) from her external world. While a simplification, it shows that the representation an individual woman (placed in the center) ascribe to their vaginal practices is made up from changing "layers" of influence recognizing that European (western) individualistic and African collectivist concepts of personhood, and thus agency. Co-exist within the diverse groups (and people within those groups) (p. 1321).

The synthesis of texts highlights the myriad rationales for vaginal practices. Whether to maintain “cleanliness or cast a spell”, Hilber et al. (2012) argues that vaginal practices depend on who the woman is, “who is asking her about her practices and her relationship to that person (p. 1321)”. For the scope of this dissertation, Hilber et al.’s (2012) discussion provides profound connections with Mary Douglas’ (1966) analysis of hygiene practices as a means of maintaining order when they write, “Vaginal practices are thus expressions of ‘the central rules, hierarchies, and even metaphysical commitments of a culture (Bordo 1993):63””.

Epidemiology of Douching

Nelson et al. (2013) examines the relationship between bacterial vaginosis (BV) and reproductive health. Per Nelson et al. (2013) the highest rates of BV occur in poor urban African American. Previous research finds a “2-fold increased risk of spontaneous preterm birth (SPTB) in pregnant women with BV (Nelson, et al. 2013). However, many pregnant women with BV deliver full-term infants (Nelson, et al. 2013). The purpose of the study is to identify the specific bacteria associated with BV so that future treatments can target bacteria and potentially treat high-risk women; the goal is to find ways to reduce the rates of SPTB and improve women’s reproductive health (Nelson, et al. 2013). Two specific bacteria are identified in participants with BV (Nelson, et al. 2013). Elevated levels of *Atopobium vaginae* (*A. vaginae*) and *Gardnerella vaginalis* (*G. vaginalis*) are found on the pregnant participants’ vaginal swabs (Nelson, et al. 2013). Previous research (Menard et al. 2010) finds that “women presenting with signs and symptoms of preterm labor and elevated levels of *A. vaginae* and *G. vaginalis* are at higher risk for experiencing SPTB (Nelson, et al. 2013).

Foxman et al. (2014) finds that specific bacteria are associated with increased and decreased risk for pregnant women with BV experiencing SPTB. Foxman et al. (2014) and Krieger (2012) state that prematurity (birth prior to 37 weeks) is experienced most often by African American women (16.75% compared to 10.49% White women) and that prematurity is a major cause of infant mortality. In addition to identifying which bacteria are found at elevated levels, Foxman et al. (2014) also documents other characteristics associated with preterm birth. Shortened cervix, smoking, and vaginal douching before or during pregnancy are all associated with increased risk for preterm birth (Foxman, et al. 2014).

Epidemiological research focuses on vaginal douching primarily examines the vaginal microbiome or the microorganisms in the vagina (Brown, et al. 2016; Fettweis, et al. 2014; Hyman, et al. 2014; Wen, et al. 2014). Understanding how douching and other intravaginal practices affect vaginal microbiomes can lead to decreasing bacterial vaginosis, yeast infections or vaginal candidiasis, pre-term birth, ovarian cancer, and other reproductive tract infections (Brown, et al. 2016; Fettweis, et al. 2014; Hyman, et al. 2014; Wen, et al. 2014). This dissertation research project's investigation of African American women's feminine hygiene practices is borne out of a desire to alleviate racialized reproductive health disparities. As such, an overview of the relationship between vaginal douching, reproductive health issues, and research devoted to exploring those issues are discussed in the concluding section of this chapter.

For over twenty years, epidemiological researchers explore douching practices in the United States. There is consensus that African American women are more likely to douche than any other population of women in the country and have the highest rates of

preterm births (birth at < 37 weeks) (Annang, et al. 2006; Brotman, et al. 2008; Brown, et al. 2016; Cottrell 2010; DiClemente, et al. 2004; Fettweis, et al. 2014; Hyman, et al. 2014; Martino and Vermund 2002; Misra and Trabert 2007; Wen, et al. 2014). The research does not focus on why African American are the most likely to douche but rather on how douching practices affects the vaginal microbiome. In the next section of this chapter, I review current research that explores douching and the vaginal microbiome.

“Selected Vaginal Bacteria and the Risk of Preterm Birth: An Ecological Perspective” written by Ai Wen et al. (2007), examines the “community ecology of vaginal microbial samples”. The samples are taken from women with histories of preterm birth (birth prior to 37 weeks’ gestation). The researchers are interested in the specific types of bacteria found in the samples and whether some types of bacteria are found more often in African American, white, or Hispanic research participants (Wen et al 2014). Per, Wen et al. (2014), the bacteria associated with bacterial vaginosis or (BV) and other intrauterine infections are associated with preterm birth. Antibiotic treatment for BV is not consistently effective; however, explanation for the inconsistent effectiveness of antibiotics is yet to be determined (Wen et al. 2014). It is the aim of Wen et al’s (2014) study to identify the bacteria and analyze the bacterial communities to look for patterns that provides insight into the relationship between vaginal microbiomes and preterm birth.

In addition to identifying the vaginal microbiome communities, Wen et al. (2014) study previously identified predictors of preterm birth. The predictors are self-identification as African American or Black, douching, smoking, extremely high or low body mass index, and shortened cervical length during pregnancy (Wen et al 2014). The researcher’s logic is that any interaction, be it direct or indirect, between the previously identified predictors

of preterm birth and aspects of the vaginal microbiomes can provide pertinent information (Wen et al. 2014).

The study's sample consists of 127 African American women, 141 Hispanic women, and 106 white women (Wen et al. 2014). The researchers find that African American and Hispanic women have "frequent co-occurrence of *Mycoplasma* and BV associated bacteria 3 (BVAB3) in their vaginal microbiomes (Wen et al. 2014). There is also evidence that the predictors of preterm birth (African American, smoking, douching, etc.) interact differently with the vaginal microbiomes depending on the race of the participants (Wen et al. 2014). Unlike the African American and Hispanic participants, white women included in the study do not show "significant correlation" between their vaginal microbiome and preterm birth (Wen et al. 2014). The researchers find that studies that include racially diverse groups of participants can increase knowledge about vaginal microbiomes and preterm birth (Wen et al. 2014).

"Differences in vaginal microbiomes in African American women versus women of European ancestry" by Fettweis et al. (2014) examine the vaginal microbiomes of 1268 African American women and 416 women of European ancestry. This study is a part of the Vaginal Human Microbiome Project at Virginia Commonwealth University (Fettweis et al. 2014). Using an RNA gene sequence analysis, the researchers find "significant" differences in the vaginal microbiomes of African American women and women of European ancestry (Fettweis et al. 2014). Like Wen et al. (2014), Fettweis et al. (2014) analyze the vaginal microbiomes and predictive factors for preterm birth in their analysis. They find that the most significant factor is being African American (Fettweis et al. 2014). Women of European descent are more likely to have colonized lactobacilli than African

American women; lactobacilli are associated with healthy vaginal microbiome (Fettweis et al. 2014). The significant findings of this study are that women of European ancestry have more bacteria associated with healthy vaginal microbiome than African American women; and are less likely to have BV which is associated with preterm birth (Fettweis et al. 2014).

“Diversity of the vaginal microbiome correlates with preterm birth” by Hyman et al. (2014), explore the vaginal microbiomes of 88 pregnant research participants to determine if preterm birth is associated with specific bacteria. Hyman et al. (2014) assert that intrauterine infection is identified as the cause of 25% of all preterm births. To understand intrauterine infections, the researchers explore the vaginal microbiomes to analyze the composition of vaginal bacteria (Hyman et al. 2014). The sample consists of 8 African American women, 16 Asian women, 40 Caucasian women, 13 Hispanic women, and 11 women that self-identified as other (Hyman et al. 2014). Lactobacillus is found to be the most common bacteria in “healthy or not presenting with any infection or disease” adult vaginas; the study finds African American, Asian, and Hispanic women respectively have the lowest percentage of lactobacillus (Hyman et al. 2014 and Fettweis et al. 2014). Hyman et al. (2014) conclude that there is an inverse relationship between the amount of lactobacillus and preterm birth.

In all the previously reviewed studies, African American women have the least “healthy” vaginal microbiomes. Additionally, out of all live births in the United States (2010), 12% of them are preterm births (Hyman et al. 2014). African Americans have a preterm birth rate of 17.8% compared to white women with a preterm birth rate of 11.5% (Hyman et al. 2014). The cost of treating babies born before 37 weeks’ gestation is

estimated to be at least \$26.2 billion in 2005 (Hyman et al. 2014). Understanding the complex reasons for reproductive health disparities, continues to be an epidemiological priority. However, the epidemiological studies reviewed for this dissertation research include race as a critical factor without defining or operationalizing race.

Race Should Be Operationalized in Research

The preceding sections of this chapter examined historical concepts of the vagina and the epidemiology of vaginal douching. Seemingly, targeting medical anthropology, medical, and/or public health, I argue that operationalizing race in research is imperative for any researcher that includes race as a variable. Race is introduced as an indicator of differential ancestry in one of the studies (Fettweis et al. 2014). It is unclear if any of the previously discussed studies are asserting that race as a biological phenomenon influences differential vaginal microbiomes or if race as a social construction influences differential vaginal microbiomes. Additionally, all the previously discussed research describes the research participants race as self-reported. Given the history of hypodescent and miscegenation in the United States, how is the reader to interpret the significance of the research participant's race? Especially if the findings are supposed to infer significance of biological or genetic differences between races of research participants. It is unknown how much African ancestry is needed to affect vaginal microbiomes; or how much European ancestry is needed to affect vaginal microbiomes. As important as it is to include diverse participants in research about preterm birth an explanation of how the researchers use or conceptualize race as a variable will provide critical information to the reader; and might force the researchers to explore interactions that they previously ignored.

SECTION II: PROJECT OVERVIEW

Section II is comprised of chapters five and six. Chapter five explores how theoretical frames are utilized and conceptualized for this dissertation research project. This chapter examines how several theories are integrated to ground data analysis. Chapter six provides an overview of the sample, methodology, and data collection process

CHAPTER 5 INTEGRATED: THEORIES AND DATA

Previous chapters in this dissertation research project focus on the background and significance of African American women's feminine hygiene practices and beliefs about cleanliness. This chapter provides insight into how theoretical frameworks and participant responses are integrated to examine African American women's feminine hygiene practices and beliefs about cleanliness. It includes an examination of the theoretical frameworks that grounded this research. This chapter is divided into the following sections: 1) an examination the tenets of Foucault's (1987) theory care of the self and a discussion about how moral personhood is defined in this dissertation project, 2) a discussion that identifies how Goffman's (1977) stigma provides an analytically beneficial frame for examining race, 3) an exploration of some of Foucault's critics and supporters paying special attention to the application of care of the self to study issues of inequality, 4) an examination of practices of hygiene and technologies of the self, 5) and the chapter concludes with an explanation of how practice theory supports the theoretical framework of this research project.

Data analysis reveals two analytical domains that integrate the data and primary theoretical paradigms. *Moral Personhood* and *Practices of Hygiene* are the domains that evolved from an analysis of the self-care narratives and interview responses. *Moral Personhood* is the focus of this chapter and comprised the most codes. *Moral Personhood* describes the social mores and norms or truths that Foucault (1987) discusses when he conceptualized care of the self. Care of the self (Foucault 1987) explores how people try to improve themselves or transform themselves into good citizens. Good citizenship refers to internalizing society's notions or truths about what

makes a person good or bad with respect to behavior. Foucault's (1987) paradigm focuses on how people display that they are responsible citizens of the state. Foucault (1987) examines how rich men demonstrate care of the self by studying philosophy to know themselves better. In ancient Greece and Rome knowledge of self is highly regarded (Foucault 1987).

Moral Personhood and Race as Stigma

All societies include the classification of person but the rubric that determines personhood is cross-culturally variable (Luborsky 1994). Mark Luborsky (1994) discusses the concept of personhood as it relates to adults living with late onset disability. He writes "Personhood is not an automatic or intrinsic property of the individual nor can it be gained by personal claim—it must be socially legitimated (Luborsky 1994:240)". Further still, per Luborsky (1994) personhood – specifically "full personhood" is linked to adulthood which is awarded to responsible people that "achieve entry and remain competent with respect to familial, occupational, and community obligations (Luborsky 1994:240)".

Luborsky's (1994) examination of whether adults living with disability maintain their full adult personhood status once they are no longer perceived as competent adults initiates salient points of inquiry about stigma and personhood. First, how do stigmatized people conceptualize their adult personhood when it is challenged by society? Second, how does internalized stigma mediate full adult personhood for African American women?

"Race is stigma (Goffman 1968)". Goffman (1968) examines how stigmas (race, disability, etc.) "reduced the person from a whole and usual person to a tainted, discounted one (p. 3)". In Caroline Howarth's (2006) article "Race as stigma: positioning the stigmatized as agents, not objects", intellectualizing race as stigma provides critical

insight about race how is reproduced and contested within societies. Howarth (2006) provides four analytical benefits of examining race as stigma.

Howarth's (2006) first point is that race is always visible; and thus, the "discredited stigma (Goffman 1968)" becomes internalized because it is a part of the person. Goffman (1968) and Douglas (1966) write that stigmatized bodies are dangerous and/or polluting to others. Bodies that are dangerous require additional policing (Howarth 2006). Many of Howarth's (2006) research participants recount negative encounters in stores. These establishments limit the number of Black people allowed in the store at any given time; because Blackness is dangerous/criminal/polluting. It is obvious to Howarth's (2006) research participants that Blackness is dangerous/criminal/polluting because regardless of their behavior they are policed and scrutinized. Blackness is equivalent to embodying an imminent threat (Howarth 2006). Second, thinking about race as stigma links the dehumanizing experiences of being a racialized other (Black or Brown person) to how "the self as racialized expectations and stereotypes marked one's sense of self, one's own expectations, ambitions and fears; or how race is internalized or embodied (Howarth 2006) (Fanon 1967)". Third, race like any other stigmatizing category is connected to material and historical realities (Howarth 2006). Race effected one's ability to access power and resources in their society (Howarth 2006). The history of race is integral to understanding relationships of power and domination (2006). Fourth, Howarth (2006) asserts that race (as stigma) prevents non-racialized people from seeing racialized others as they see themselves. This results in tense interactions between racialized and non-racialized others (Howarth 2006). Tension occurs because one group – the stigmatized - is advocating for their equal humanity while the non-racialized group is blinded by the

other's stigma and both groups have difficulty acknowledging the common humanity of each other (Howarth 2006). Howarth's (2006) analysis illustrates the benefit of conceptualizing race as stigma and provides critical pathways to explore how race mediates personhood.

Luborsky (1994) establishes that moral personhood is dependent on benchmarks associated with adulthood (maintaining occupational, familial, and community obligations). Adults who do not maintain work, family, and civic obligations are not awarded the socially legitimated status of moral person. Racialized stigma is socially legitimated as well. Both Howarth (2006) and Goffman (1968) examine how race mediates one's perceptions of others and themselves. Extending Luborsky's (1994) conceptualization of moral personhood to examine how race mediates socially legitimated status is vital to an exploration of performances/displays of moral adult personhood. If race is stigma are Black people ever awarded moral personhood status that is equal to white people? I assert that Blackness is laden with stereotypes and that because of the immutability of stigma, African Americans are awarded a socially legitimated status that is tainted by their Blackness. This socially bestowed taint, requires explicit performances to signal their equal humanity. Performances of cleanliness (both hygienic and morality) can be perfected in myriad situations and environments. Rich and poor African American women can pay special attention to cleanliness. The specifics of the performances are important but not as significant as the impetus to be perceived as clean (hygienically and morally).

The focus of this chapter is how moral personhood is an analytical domain of this research. Extra attention to cleanliness (both hygienically and morally) is a consequence

of being stigmatized as unclean/immoral and ultimately less human. Mary Douglas' (1966) book *Purity and Danger* centers on the effects of marginalization; and on marginalized people's hyper attention to hygiene practices as a means of making themselves more palatable to their non-marginalized neighbors. Cleanliness in every form is included in the rubric that determined full adult personhood for the African American women interviewed for this dissertation project. I analyzed the women's special attention to cleanliness as performances of moral personhood. Thus, responses are coded by the performance enacted to display moral personhood.

Morality, per English Oxford Living Dictionaries (2017) is based on "principles concerning the distinction between right and wrong or good and bad behavior". The domain of moral personhood is an encapsulation of analytic codes that articulate judgements about right/wrong or good/bad ways of personhood. Moral personhood works in concert with Foucault's (1987) theory of care of the self by acting to improve one's self by becoming a moral/good/correct person - who assumes responsibility for familial, occupational, community obligations. Judgements about what is or isn't good or desired behavior stem from macro and micro level factors. Much of the criticism about Foucault's (1987) theories is centered around his exclusion of issues of inequality (e.g. race, class, gender) and focus on rich white men (De Lauretis 1987; Hartsock 1987; Marsland and Prince 2012). An examination of Foucault's (1987) critics and supporters is necessary to explore how Foucault's (1987) care of the self is utilized in this research.

Foucault, Personhood, and Stigma

Foucault (1987) – stresses that people only aspire to become something once they internalize that they aren't what they aspire to be. Care of the self is a way of

exhibiting that one is a good citizen or person. Care of the self requires displays or performances that symbolize moral behavior – however morality is culturally defined. For example, one aspect of good citizenship is maintaining one’s health. The performances that symbolize care of the self are exercising, eating healthy, abstaining from smoking, and getting regular check-ups to prevent acute health crisis whenever possible. The performances exhibit an understanding that everyone is responsible for their health. Maintaining one’s health fulfils obligations to the self and contributes to the overall health of the nation – everyone does their part for the collective good. African American women (and men) have been stigmatized as unclean (morally & hygienically) and sub-human/animalistic (Gilman 1985, Baker 1996, and Howarth 2006). I argue that racialized stigma mediates moral personhood because African Americans must incorporate societal truths about themselves into their performances or displays of care of the self. African American women’s special attention to cleanliness can be interpreted as care of the self. Performances of cleanliness cannot remove or transform racialized stigma because it is socially legitimated. Therefore, care of the self is never transformative because it falls short of equalizing societal truths about African American women’s humanity. I assert that African American’s performances of moral personhood are different than white American’s displays of moral personhood because of the multifaceted stigmatization of African Americans.

German anthropologist Adolph Bastian argues for the physic unity of man (Godin 2014). Bastian (1868) states “that all human beings, regardless of culture or race, share the same basic psychological and cognitive make-up; we are all of the same kind.” Race as stigma (Goffman 1968); derails the physic unity of man because stigma requires that

the stigmatized prove that they are not who they are perceived to be. Ironically, like care of the self, stigmatization places responsibility on the individual to disprove stereotypes that are perceived as truths.

Link and Phelan's (2001) article "Conceptualizing Stigma" examines the conditions required for stigma to be reproduced. A critical condition is the unequal distribution of power between two groups. Link and Phelan (2001) extend Goffman's (1968) stigma to include relationships of power/domination; their analysis focuses on the ability of the powerful to stigmatize the less powerful. They argue that stigma, when executed by the powerful, can morph and survive throughout time and cultural changes (Link and Phelan 2001). An "archaeology of the stigmatization of African and subsequently, African American women, provides a historical case for my argument³. Foucault (1987) – cautions that engaging in technologies of the self with the intent of transforming from what one isn't but aspires to be – does not liberate one from internalized truths. These truths are cultural norms that members of a given culture accept as valid. Often these truths serve the function of legitimizing existing social hierarchies.

Foucault (1987) discusses how former colonial subjects retain cultural mores and norms of their colonizers after they successfully fight for liberation. The colonizer's truths are embodied and reproduced by the colonized. Foucault (1987) writes about practices of freedom as performances intended to symbolize something that reinforce existing power relationships. For example, laws enacted to teach indigenous languages in schools do not change the prestige of the colonizer's language (e.g. English or French). Especially

³ African people were considered less human than white people. Jonathan Marks (2002) examined how evolution reinforced difference between human populations. Also "the great chain of being" helped to establish hierarchy between human beings.

when the colonizers language dominates large scale financial transactions. The truth is evidenced by formally colonized people maintaining the linguistic hierarchy introduced by the colonizers.

Colorism or the prejudice against people with dark skin is usually perpetuated by people within the same racial group (Tharps 2016). Colorism is an example of Foucault's (1987) practices of freedom. When some African American's create their own standards of attractiveness, they reproduce the standards of their oppressors. Colorism is another example of how formally enslaved African Americans internalized domination. In the past, historically Black colleges and social organizations restrict their membership to African Americans that can pass "the paper bag test". The "paper bag test" requires African American's skin to be lighter than a brown paper bag tin order to gain membership in some African American academic and social institutions (Pilgrim 2014).

The overt exclusion of dark skinned African Americans in academic institutions no longer exists (Pilgrim 2014). However, lighter skinned African American women are viewed as more attractive than darker skinned African American women. Elizabeth Adams et al. (2016) article "Skin tone bias among African Americans: Antecedents and consequences across the life span", provides a content analysis of research that studies the preference for lighter skin amongst many African Americans. Adams et al. (2016) concludes that colorism effects African American women more than African American men. A variety of skin tones are acceptable or attractive regarding African American men (Adams, et al. 2016). There is a direct correlation between skin tone and level of attractiveness for African American women (Adams, et al. 2016). Ideas about attractiveness of lighter skinned African American women compared to darker skinned

African American women are evidenced in television, movies, and advertising (Adams et al. 2016).

Foucault and Inequality

Foucault (1987) is often criticized for not discussing race/class/gender. The next section of this chapter will examine some of Foucault's critics and advocates. Two of Foucault's paradigms (care of the self and technologies of the self) explain how African American women's special attention to hygiene practices is informed by hegemony and resistance. However, neither care of the self nor technologies of the self adequately explore the research participant's agency. In chapters seven, eight, and nine, I discuss how the performances are mediated by racialized stigma and individually nuanced. Bourdieu's (1977) practice theory offers explanatory agency to the research participants performances. Many of Foucault's critics discuss the lack of agency in his theoretical paradigms. However, Foucault's (1987) theories center relationships of power and domination. My strategy is to combine Foucault's (1987) and Bourdieu's theoretical frameworks to ground this research. This research is about relationships of power and how African American women's performances of moral personhood are mediated by racialized stigma and individually nuanced.

The discourse of power and knowledge is central to this research.

Though accepted in the West as true, Said's point was that Orientalism was a form of ideological fantasy, with no necessary relation to the actual cultures that it supposedly described and understood: the very Orient was itself an Orientalist fiction. At the same time, Orientalism, as Said defines it, was a relationship of power, of cultural domination, the cultural equivalent of the colonialism which it accompanied. As Foucault puts it, 'it is in discourse that power and knowledge are joined together (Young 1995)'.

Much like Said's (1979) *Orientalism*, race relies on fantasy to produce knowledge and power. Volumes of scientific texts that document the inferiority of non-White people and superiority of White people lay the foundation for the infinite mutually sustaining loop of power and knowledge (Baker 1998). The word infinite is used to call attention to the process of stigmatization that is associated with racial categories. Link and Phelan (2001) discuss how power determined which stigmas survived time and space. Chapter three details the historical stigmatization of African and African American women.

Powerful groups stigmatize less powerful groups in ways that have less to do with the specific details or assertions of the stigma than with the general perception that the less powerful group is bad/inferior/immoral. After the stigmatized group is perceived as generally bad/inferior/immoral any new proclamations of their deviance are socially legitimated (Link and Phelan 2001). The emphasis is on power not the specific claims of deviance (Link and Phelan 2001). It is not rare for less powerful groups to discuss the moral and behavioral failings of powerful groups (Link and Phelan 2001). However, the failings of the powerful never become socially legitimated (Link and Phelan 2001).

The discourse of power that Foucault (1977) and Said (1979) relies on knowledge created by the binary oppositions of racial (white/non-white), gender (man/woman), and socioeconomic (rich/poor) categories. The foundations of knowledge are produced and reproduced by the ideological fantasies that Said (Said) conceptualizes. This research is an examination of discourses of knowledge and power that produce and reproduce race. Foucault (1977) provides a critical map to explore how discourses of knowledge and power became the truths that are internalized by both the powerless and powerful.

The power and knowledge created by the illusion of race are multifaceted and consistently reinforce the unequal humanity of African Americans. Prior to Foucault (1977), Antonio Gramsci (1928-33) theorizes about

the moment of hegemony which transcends the corporate limits of purely economic solidarity, encompasses the interests of other subordinate groups, and begins to 'propagate itself throughout society', bringing about intellectual and moral as well as economic and political unity, and 'posing also the questions around which the struggle rages ...thus creating the hegemony of a fundamental social group over a series of subordinate groups (Hall 1986):14'.

Ironically, Gramsci (1928-33), like Foucault (1977) does not theorize about race. Hall (2010) details the utility of Gramsci's theories for studying race and racism because Gramsci (1928-33) emphasizes the social relations that enable both racism and hegemony.

Sander Gilman's (1985) article "Black Bodies, White Bodies: Toward an Iconography of Female Sexuality in Late Nineteenth Century Art, Medicine, and Literature" provides a detailed discussion of how 17th century European explorers' observations about African people become scientific fact. Specifically, the descriptions of African women's hyper/deviant sexuality provide a dialectical or binary comparison for white women's controlled/civilized sexuality (Gilman 1985).

Per Robert Young (1995), although Foucault never explicitly focuses on race or racism. The final volume of *The History of Sexuality* is supposed to be about race and bio power but Foucault died before he can complete the final volume (Young 1995). Young (1995) asserts that Foucault's concentration with sexuality is fundamentally about race. Foucault writes about race as bio power with respect to "regulating the species" (Young 1995). Not in the "Western sense of racism" but as sexuality relates to reproduction,

class, and eugenics (Young 1995). Foucault (1978) writes the following passage in *The History of Sexuality*,

Beginning in the second half of the nineteenth century, the entire thematics of blood was sometimes called on to lend its entire historical weight toward revitalizing the type of political power that was exercised through the devices of sexuality. Racism took shape at this point (racism in its modern, biologizing, statist form): it was then that a whole politics of settlement, family, marriage, education, social hierarchization, and property, accompanied by a long series of permanent interventions at the level of the body, conduct, and everyday life, received their colour and justification from the mythical concern with protecting the purity of the blood and ensuring the triumph of the race.

Ann Stoler (1997; 2002), like Robert Young (1995) writes about race and colonialism. Both scholars utilize Foucault's theories of power to examine connections between colonialism, racism, and sexuality. Stoler's (2002) article "Tense and Tender Ties: The Politics of Comparison in North American History and (Post) Colonial Studies" explore how American history is like other colonized nations. Stoler (2002) discusses how sexuality is used to separate colonizer from colonized in the U.S. and abroad. However, the omission of race and gender from most of Foucault's work is the reason some scholars conclude that his theories are intended to explain the behaviors of rich white men (De Lauretis 1987; Hartsock 1987; Marsland and Prince 2012).

Nancy Harstock's (1987) article, "Foucault on Power: A Theory for Women?" argues that Foucault and other poststructuralists do not provide useful paradigms for women because they are not "theories of power for women but rather theories of power about women (Harstock 1987:158)". The distinction, for Harstock (1987), is that "theories of power for women" potentially incorporates ways to transform power relations as opposed to "theories of power about women" which are limited due to their descriptive rather than transformative focus. Harstock (1978) focuses on women but acknowledges

that there is no singular woman because there were many different types of women. Interestingly, Harstock (1987) realizes that she is universalizing women, discusses it but never alters her discussion to explore the realities of race, class, and citizenship; while accusing Foucault of ignoring the realities of gender.

Harstock (1987) discusses whether an adequate theory of power for multiple groups of subjugated people will ever exist. Harstock (1987) references Said's *Orientalism* (1979) to support her contention that the subjugated *other* in relations of power is created in opposition to the powerful. The fantasy of who women are is created by men (e.g. childlike, emotional, irrational, etc....). Per Harstock (1987) these fantastical creations do not include "women's capabilities, abilities, and strengths (158)". Harstock (1978) asserts, Foucault and other poststructuralist theorists lack of discussion about gender specifically, and difference in general, makes their theories about power irrelevant with respect to transforming relationships of power and domination as opposed analyzing relationships of power (Harstock 1987).

Teresa de Lauretis (1987) argues that Foucault's gender blindness is, "denial of the social relations of gender that constitute and validate the sexual oppression of women". And that, (for Foucault) to deny gender is to maintain an ideology – "an ideology which is manifestly self-serving to the male gendered subject (de Lauretis 1987:15)." De Lauretis (1987) like Harstock (1987), conceptualizes Foucault's theories about power as exclusively male. Rebecca Marsland and Ruth Prince's (2012) article "What Is Life Worth? Exploring Biomedical Interventions, Survival, and the Politics of Life" examines the utility of Foucault's care of the self for researchers studying impoverished people in

East African nations. Marsland and Prince's (2012) focus on economic inequality rather than gender.

Marsland and Prince (2012) argue new medical technologies often determine whether one lived or died (in poor African nations) - are usually out of reach for people who live in abject poverty. They question how medical anthropologists who utilize Foucault's (1987) theories (care of the self and technologies of the self) reconcile Foucault's focus on wealthy men in ancient Greece and Rome (Marsland and Prince 2012). Marsland and Prince (2012) contend that both Foucault and Nikolas Rose underestimate how much socioeconomic inequality limits basic healthcare and the art of living that Foucault (1987) attributes to wealthy men in ancient Greece and Rome.

Marsland and Prince (1987) concludes that the utility of Foucault's theories can be extended to adequately examine inequality. Marsland and Prince (1987) argue that including questions that explore how people living in abject poverty are conceptualizing/experiencing new medical technologies and the "art of living" within the confines of their social locations will extend Foucault's theories. Harstock (1987), de Lauretis (1987), and Marsland and Prince (2012), explore the limitations of Foucault's theories of power. A consistent theme in all the examined critics is that inequity be it gender, race, and/or poverty – are not explicitly discussed by Foucault. Although several scholars focus on Foucault's theoretical limitations others explore the generalizability of Foucault's paradigms

For this dissertation research project the efficacy of Foucault's theories is not based on whether he explicitly theorizes about race or gender but about the utility of his ideas for exploring mutually informing relationships of power and resistance. The value

of a theoretical framework is grounded in its usefulness to explore myriad phenomenon. People theorize about phenomenon that are important or relevant to them. Foucault examines relationships of power and domination using phenomenon that is germane to him. Relationships of power and domination are central to research that illustrate the experiences of African American women. African American women's feminine hygiene practices provide unique opportunities to explore how resistance (focused attention on hygiene to defy stereotypes) reinforces relationships of power (negative health outcomes associated with stigmatized groups).

As it relates to embodying equality, understanding relationships of power provides insight into the ways that power is reproduced and resisted. Marsland and Prince (2012) conclude that additional questions need to be asked by researchers who employ theories that do not prioritize inequality. This is accomplished by including doxa and practice theory in the theoretical rubric of this research. Doxa and practice theory provide opportunities for care of the self and techniques of the self to prioritize the specific experiences and beliefs of African American women. Technologies of the self, practice theory, and *doxa* are discussed in the next section of this chapter; and examine codes included the domain *Practices of Hygiene*. The following section of this chapter includes a chart of inclusion and exclusion criteria for each code, examples of coded data, and detailed descriptions of each code

TABLE: 1**Inclusion & Exclusion Table for Codes Included in the Domain *Moral Personhood***

	INCLUSION CRITERIA	EXCLUSION CRITERIA
race	Any discussion about race focused on comparisons of beliefs and/or about cleaning/manners that includes race people.	Discussions that do not mention race.
Hygiene & Sex	Any discussion about cleaning one's body to prepare for sex or cleaning one's body after sexual activity.	Discussions that include cleaning one's body without mention of sexual activity.
Menstruation	Any discussion about menstruation and how they were taught to clean themselves after a period, stigma surrounding periods, and feelings about menstruating.	Discussions that do not involve menstruation.
Natural Products	Any discussion that includes research about cleaning products/soaps and perceived benefits of using "natural" products/soaps and eating healthy. Includes discussions about the chemicals in vaginal douching/hygiene products and interactions between foods and your body.	Discussion about cleaning products that does not distinguish between ingredients in cleaning products but simply lists products the women like to use.
Generational Differences	Any discussion that talks about younger people lacking basic skills (e.g. parenting, cleaning, cooking, working, maintaining intimate relationships.) that previous generations have mastered.	Any discussion that does not illustrate generational differences in basic life skills.
Ownership	Discussions about being proud of owning your home and taking care of your home to show your pride.	Any discussion that does not include home ownership and pride or taking care of one's possessions.

Religiosity	Any discussion that focuses on religion, sexuality, and morality.	Will not include discussions about cleaning one's house/environment.
Nasty	Any discussion that focuses on homes and/or bodies that were not clean	Will not include descriptions of clean homes/people.
Other People's Homes	Discussions that explore who is/was responsible for keeping the respondents safe from harm	Any discussions that do not explore who is/was responsible for keeping the respondents safe from harm
Moral Personhood	Any discussion about why being clean/moral/responsible person is important/good/necessary.	Any discussion that does not focus on why being clean/moral/responsible.
Medical Advice	Any discussion that are focused on vaginal health that focused on advice from family, friends, doctors, or health educators.	Discussions that talk about vaginal douching or vaginal hygiene that are not focused on health advice from family, friends, doctor and/or health educator.

TABLE: 2**Examples of Coded Data Included in *Moral Personhood***

Race	White people don't smell like we do. They stink. Well, they do though. And I think their makeup is different than ours and therefore, they have a different kind of odor. Well, I don't think they are genetically or physically the same. You know, they may be the same, but I don't know it. I think that they, I think they sweat or something. Something that makes them have a sour smell to me. And so, if they have that sour smell, they need to get rid of it. And I don't know how they get rid of it, but I would say they need to use some lotions or cologne, or body splash or something like that.
Hygiene & Sex	When I did become sexually active in my twenties. I don't know I just became more aware of my vagina, I guess. And thinking that I needed it to be clean. Wait, I remember my first sexual partner. And he wanted to have oral sex and I remember saying something about I don't know, you know... I just wasn't sure that it was clean enough. You know? And he thought it was fine.
Menstruation	No, we didn't talk about periods when we were growing up. Not with anybody. Well, you might read something. Ok, I'll tell you, when I started on my menstrual cycle, my mother gave me a pad and she said "here, put this on." She never said where to put it. I thought should I tie it around my neck? Around my ankle? How do I put it on? And she gave us, gave me, that first time that I got a pad, I had a, a belt, do you know what belts are? The most horrible pains you'd ever think of during a period. So, you had to have a sanitary belt, that's what they were called. So, I don't know why I didn't have one at the very beginning, but later, somehow, I got a sanitary belt. That's it. It was a piece of elastic that had two ends on it. And on each end, it had a little metal piece with a prong in it. And so, you put the end of the pad through that metal piece, and clamp it down on the prong. It didn't stay in place it was just there. It wouldn't fall out. You always had blood on the rims of your panties. Periods were so disgusting that you automatically knew to get all of it washed away. So, I mean, for me, I don't know about anybody else. But for me, it was like just, this is just too much. So being on your period, when I was growing up, was sacred. It wasn't a discussion; you didn't expose yourself to anybody, you know, while you were on your period, whatever went on. You always closed the door; you always took and washed or cleaned yourself separately and privately.

<p>Natural Products</p>	<p>Right now, I am into the natural. So, I like Castile soap, um, any form of Castile. Back then, there wasn't a distinction between the different soaps. We didn't have all that. Everybody used like, the big companies. Coast, Irish Springs and Ivory. And so, as products began to increase, then you move to your specialty products like Bath and Body Works. Then I went to maybe that stage, especially Victoria's Secret, things like that. And then more I started to research what was in these products, I realized this was really unhealthy and then I found out whatever you put on your skin is absorbed into your skin whether you wash it off or not. So, that's how I got into the healthy products. So, it would be Black Soap. Du Du Osum, that's the name of it from Africa. And mango soap and Castile. Oatmeal soap. And so, that's what I use now for every part of my body, including hair. I think all in my thirties. When I started to really transition, to transition away from chemicals and all of the things that are really harmful. What are all of those little things on the side, the ingredients that you've never heard of and when you research you're like, "Oh wow. Ok, this is used to kill something or this is used to make gasoline. So why am I putting this on my body?" And so, I found out about the natural products. I started reading the ingredients and so that kind of led me into my research of natural products.</p>
<p>Generational Differences</p>	<p>I think society is much different, in the last, I'll say, forty years. But anyway, because of single parenting, I think that's a major, major reason that there's no family unit. And on the other side of that is the young people now replace a mate at the blink of an eye. My son met his girlfriend and her baby wasn't but four months old. How do you fall in love again from a previous relationship that fast and want to have somebody living in your house? I think they bring another person in their house with their kids too fast and they don't know them. And that, to me, is morally wrong and it teaches them, it doesn't give them good morals. See, women didn't have babies out of wedlock. If they did, they hid them. In 1965 when my sister had her baby she was really old for it to be wrong. But when a person had a baby at fifteen and sixteen, it was oooooh! Well, my mother didn't want my sister to be at our house. She wanted my sister to move because she didn't want people to know she was pregnant so my mother still had that old-fashioned stigma about, she didn't want us having babies out of wedlock. Nowadays, Oh, yeah. You could have five or ten babies out of wedlock!</p>
<p>Ownership</p>	<p>I think it's important to keep things clean and I do remember when my mom, when we would get in trouble for not cleaning. She would say that you don't want to come home to a dirty house. Or you're supposed to, she wouldn't say to take pride in your home, but that's basically what she was trying to say. You need to be proud and treat it that way. Take care. That would be what she would say. Take care of your things; take care of your stuff. It made sense, because we didn't have</p>

	a lot, nothing could be easily replaced, so you needed to take care of it.
Religiosity	So basically, most of us (friend group), I should so some of us are brought up in a church, so purity is the main thing, just like if you sleep with a certain number of people it means you'll be dirty, or you'll probably feel dirty.
Nasty	I remember my aunts and my grandmother talking about someone that wasn't clean like the neighbor lady, when they were coming up, I am saying Mrs. Green, I can't remember what her name was. They just said her house was nasty and her kids look unkept and just you know, they couldn't wrap their brains around why things were like that at Mrs. Green's house. And my grandmother was real meticulous, like I said, and if you had a dog, she didn't like dogs. But if you had a dog she wasn't eating nothing out of your house. That wasn't happening because, you know, dog hair flying around and all that.
Other People's Homes	Well, my mother, when I was young, she didn't let me go over to other people's houses because she was afraid. She didn't know what was going on in other people's homes. And so, she was afraid something could happen and she didn't know them very well. So just for safety reasons, she didn't really let us spend the night places. So, it wasn't really an issue of cleanliness, it was an issue of safety.
Moral Personhood	Um, if you kept a clean house, you didn't have bugs. You got roaches and bugs if you kept a nasty house. And my mother would always say she wouldn't come to your house if it was nasty. I think that the main thing that my mother instilled in me that I definitely instilled in my daughter was just being clean made you feel better about yourself. You didn't, you don't want anybody else to smell you. And if you smell yourself then nine out of ten times somebody else could smell you. And you just didn't want that. I would hate for anybody to smell me. I think it made me have an extra sensitivity to smell. It's just the fear that somebody would smell me or fear of embarrassment.
Medical Advice	Actually, I think, let me back up. I think the first time I saw a gynecologist I was in my early twenties and they asked me if I was sexually active and at the time I think I was active once or twice so I said, "Yeah." And because I was there to talk about birth control and then he asked me if I was using any kind of douching products. And that was the first, and I believe the last time, somebody asked me. Well, I have never had a complaint feeling unclean. I always felt clean and then when I talked to my gynecologist when I was in my mid-late twenties, cuz then I was hoping to get pregnant, I was hoping to get married and get pregnant, the conversation was no, you don't really need to. You're ok. You're fine. And by that time, I had insurance so I was literally getting my Pap smears and going every year to a doctor, where before I think I had never been, in my childhood I have never saw a doctor talk about anything related to that. It was always talked about and discussed with my mother and she never included me. And

	the doctor would talk to my mother and never said anything to me. Yeah. And I never had a Pap smear in my childhood cuz I never had sex. Although, my mother, I believe would always ask for confirmation that I was still a virgin.
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Description of Codes Included in the Domain *Moral Personhood*

Moral Personhood refers to aspiring to become “truth” that Foucault (1987) discusses in his theory care of the self. What practices and/or behaviors will guide the transformation/production/reproduction of an African American woman to become a clean/moral/responsible African American woman? Thus, *moral personhood* refers to the respondents “truths”.

Natural Products is a code that examines how the women prioritize using natural cleaning products and food to improve their health. Information about natural products is obtained by the women researching and/or reading about the best products to use to transform themselves into healthier citizens. Women illustrated self-care as a means of being responsible for their bodies or being good citizens. **Generational Differences** examine responses that discussed how younger people could be better citizens if they employ practices or technologies of older generations. **Ownership** focuses on data that highlights the importance of owning property and caring for your possessions as a means of exhibiting good citizenship. People who own their homes are perceived as taking better care of their homes than people who rent. **Religiosity** concentrates on responses that attribute desirable behaviors to religious beliefs. Respondents discuss religious foundations as fundamental to good behavior. **Nasty** examines how the women characterize people that are not putting forth enough effort to transform themselves or their environments into good citizens. **Other People’s Homes** explores how maintaining physical boundaries means that you are doing your part to remain a good citizen. By this I mean that responsibility for the women’s safety (even as children) is the duty of the girl’s parents and even the girl - but not potential aggressors. Therefore, being a moral person

means that you accept your obligation to keep yourself safe. This code also speaks to anecdotal discussions about the world not being safe for women. An example is when white women are assaulted jogging by themselves – in some remote area - they share some of the responsibility for the attack because they put themselves in a dangerous situation. **Race** concentrates on discussions that compares behaviors of African American people to behaviors of White people. Most of the responses focused on white people's lack of concern about cleanliness (hygienic & moral). This theme reinforces Link & Phelan's examination of stigma by illustrating that white people (in general) are not concerned about being perceived as bad citizens because they have never been stigmatized in that way. African American women/people are concerned about being perceived as dirty/unclean because they are trying to disprove negative perceptions. **Hygiene and Sex** explores how women prepare for sexual activity to exhibit that they are "clean" women. **Menstruation** examines how the research participants are taught to feel about their periods. Discussions about methods used to eliminate bad odors associated with menstrual blood and ideas about menstrual blood as polluting are included in this code. Additionally, conversations that explore women's memories of starting their periods are included in this code. **Medical Advice** explores conversations that women have with their doctors about vaginal hygiene. Advice from others (e.g. teachers, family, and friends) about best practices for vaginal and general hygiene is included in this code.

Overlapping Codes

Generational advice and **clean your bathroom** have data that overlaps. Under the code **generational advice** research participants discuss social norms that change over time – to the detriment of subsequent generations. **Clean your bathroom** focuses

on advice given and received about maintaining a clean home. Much of the advice is directed at younger people. Some of the data includes step by step instructions about how to clean (e.g. soak the dishes before washing them). There is also a moral undertone in the advice that discusses ways previous generations maintained their homes and communities that no longer exist or are rarely exhibited.

The domain of *Moral Personhood* encapsulates the research participant's truths about cleanliness. Connections between the practices of responsible or moral African American women and irresponsible African American women are evident in the data and highlight how "race" mediates personhood through attention to cleanliness. race and gender as stigma (Goffman 1984) are explicit in the women's discourse about sex and hygiene. The next section of this chapter examines the domain *Practices of Hygiene*.

Practices of Hygiene

This chapter includes an examination of how the domain *Practices of Hygiene* differs from and complements the domain *Moral Personhood*. Foucault's technologies of the self and Bourdieu's practice theory and *doxa* are introduced to explain how individual practice accentuate the women's lived experiences. *Doxa* contributes to understanding how that race is reproduced through group practice. Common practices indicate the cohesion and adhesion of ideas about how cleanliness will be enacted or practiced by African American women. The chapter concludes with a chart that provides inclusion and exclusion criteria for coded data. Examples of coded data are organized in chart form to offer a sample of data included in this domain.

Overview of Domain *Practices of Hygiene*

The previous chapter examines the domain *Moral Personhood*. This chapter explores the second domain *Practices of Hygiene*. *Moral Personhood* focuses on how the respondents conceptualize what it means to be a responsible or moral African American woman. Specific attention is paid to cleanliness or how cleanliness contributes to adult personhood for African American women. Cleanliness is salient because of its historical significance in the stigmatization of people of African descent and women of African descent (Davis, et al. 1941; Gilman 1985). For the purposes of this research project cleanliness refers to morality and hygiene.

The domains *Practices of Hygiene* and *Moral Personhood* differ and complement each other in critical ways. First, *Moral Personhood* explores the women's "truths" or thoughts about how they and others transform themselves into good citizens. Thus, *Moral Personhood* encapsulates how race mediates adult personhood with attention to cleanliness. Not only in the literal sense of removing dirt or ordering things but also in the awareness that their Blackness (research participants) is perceived as dangerous/polluting (Douglas 1966). This awareness of a different or unequal humanity then requires action or practice to elevate or attempt to equalize their humanity. Foucault (1987) identifies these actions or practices as technologies of the self. *Practices of Hygiene* is the domain that focuses on the specific ways or practices that the women employ in attempt to transform their humanity from less than to equal (to white people).

Technologies of the Self, Practice Theory, & Doxa

Practices of Hygiene compliment *Moral Personhood* by introducing specific aspects of inequality to Foucault's care of the self which is criticized for ignoring race/gender/class in his theories about power and domination. Marsland and Prince

(2012) assert that Foucault's care of the self did not lend itself to questions about people's lived experiences. Technologies of the self, examine lived experience through practice. Combining Foucault's technologies of the self with Bourdieu's practice theory and *doxa* compensates for (Foucault's) critics' contentions about lack of agency and inattention to inequality in care of the self.

Bourdieu's practice theory refers to the socially informed body where "history is turned into nature or society embodied" (Csordas 1990). Bourdieu (1977) credits Jean Paul Sartre with conceptualizing action that is "implicitly accepted". Practice theory is subject to experience but not individuals because it is shared by members of the same social group or class, and it results in an immediate adhesion (*doxa*) to the world (Bourdieu 1977). Bourdieu (1977) understands this phenomenon as "an endless circle of mutually reflecting metaphors". People with similar histories and experiences interpret information in related ways because of *doxa*. Practice theory and *doxa* illuminate the relationship between historic stigmatization, acts of resistance (via adherence to cleanliness both moral and hygienic), and African American women's current hygiene practices.

TABLE: 3

Table of Inclusion and Exclusion Criteria for *Practices of Hygiene*

	Inclusion Criteria	Exclusion Criteria
Eat Off the Floor	Discussions will include memories of family members showing or telling the women how they should take care of their homes, yards, dorm rooms, etc.	Responses will not include information about how the women learned to clean their bodies or information from community members about cleaning.
Clean Your Bathroom	Responses will include memories, or occasions when the women gave advice or instructor to other people about how to clean one's house/environment.	Responses will be excluded if it contains advice about cleaning your body.
Clean Your Girl Parts	Any discussion about cleaning the vagina. All methods of vaginal hygiene and learning how to clean your vagina (e.g. advertisements) will be included.	Discussions about cleaning any other part of the body will be excluded.
Clean Your Body	Any discussion about cleaning the body (except for the vagina) will be included.	Any discussion about cleaning the vagina will be excluded. Any discussion about cleaning one's house/environment will be excluded.

TABLE: 4**Examples of Coded Data included in *Practices of Hygiene***

	Examples of Coded Responses
Eat off the floor	<p>My earliest memories were of my mom and she cleaned all the time. She was a cleaning woman. She cleaned, one time she cleaned homes for wealthier white people. And then she became a housewife, and then when she wanted extra income, she cleaned office buildings. She would get on her knees. She would have a pad a kneeling pad and she said that was the only way to truly get floors clean because the mops wouldn't go in the corners. So, she would go on her hands and knees and she would scrub like how you'd seen in old movies. She did that. And, she did base boards, like people don't to base boards. We washed, now I do remember washing windows. Springtime, we had a spring time ritual where we would wash windows, take down drapes, cause back then we had drapes, not blinds. So, we did that. But all floors were done, but if it was carpeted, we use to vacuum cleaner, I remember if it was linoleum or wood, we would go on our hands and knees and we would scrub. Holidays. The house would be cleaned top to bottom. Prepare the dishes, you know, the china rather. Because we used china for company. We would clean each room; we'd clean top to bottom. We'd go and purchase new linen cause back then you'd use linen for the tablecloth. Hudson's use to sell this fabulous linen for your table, and you'd get the napkins to match. So, we lived, I guess you could say, even though we grew up in an old Jewish neighborhood, cause that's what it was, an older Jewish neighborhood, the things that she learned from being in the wealthy, cleaning for wealthy people, it was instilled in me and my home because that was the way we lived. So, we dusted. We did the floors, we did the walls, we did the windows, we did the drapes, we did baseboards, we did the cabinets, the whole...we did the refrigerator, we cleaned everything. We cleaned the basement. You could eat off the floor.</p>
Clean your bathroom	<p>I don't want to sit on a dirty toilet. Clean your bathroom. Clean your body, clean your bathroom. That's an easy one. Yeah, oh, I can be honest; I can go into somebody's house and if that toilet ain't clean I will clean it before I sit on it. My pet peeves are bathrooms. Oh, I would tell my daughter, excuse me, a bathroom is something that has to be clean from like top to bottom. That means you would have to do the floors, you don't do the towels every day, but periodically you need to do the towels. And then you want to keep your toilet smelling fresh. So, you either get one of those deodorizer bars, and I keep bleach, and so you need one of those. Now they have those toilet bowl cleaners so you clean, and you have to clean around the</p>

	<p>inside and, you know, bleach it out. Clean the seat. Especially if you have boys, and boys like to spray and leave the seat up. So, you don't want that smell. So, you must clean. Yeah. You clean your sink, your hair. You put little drainers in the sinks and so you can try to catch the hair so your drains won't clog up. So, keep Comet. I mean there are certain cleaning supplies like Tilex, bleach, you have Comet, and you have bleach and Awesome and all that. All those work really well. Awesome is a product. At the dollar store. And some people say its ammonia. But you can use it to clean your clothes. Same thing in the kitchen. I was raised to clean the whole kitchen. You clean the refrigerator; you clean the freezer; you clean the stove like when you cook. You cook and you clean and you go or you prepare and then you clean for the next set you prepare some more and you clean for the next set. If you spill something on the stove, you wipe it off immediately. So, that's how I was raised so I taught my children to do the same thing. Only boys don't really pay attention, at least mine doesn't. So, they don't think. So, I find myself going down and cleaning for them.</p>
<p>Clean your girl parts</p>	<p>But you know, once again, I just, I don't know if I learned about it from my sisters or from my mom because she was always like, just take care of yourself, of course, because you want to be a well-kept woman. Not smelling, because that, of course...would have been bad. I don't know if they said it, but I remember seeing many douche products in the cabinet when my mother was still alive. It was an over the counter product like that, Summer's Eve, or whatever the brand name is. I remember seeing that in the cabinet. I just knew it was there. She never really, she wasn't one of those people who talked about sex and sexuality and all that. But I remember seeing it in the bathroom cabinet, so now we my sisters have talked about it in terms of, you know, just in passing. Like what do you use to keep yourself clean? And my one sister, she was saying that she didn't really believe you have to douche but of course you should keep yourself clean down there nonetheless but it wasn't necessarily a matter of needing to have a douche product. I want to say it was, it wasn't a big part of it, but it was a part of my hygiene for myself. And she was saying it, when we were having this conversation, she was talking about, she works at a hospital. And where she works at you know, when the people get released, she was saying, that you know, if a person had odor, or whatever, and we were just saying like, oh well, this is what I use, you know, so I don't have that issue. And she was just saying that she didn't understand why women, and they weren't young women, however old they were, why they didn't have that regime, why they let themselves smell like that. Probably in my twenties I would bet. I was sexually (active), I didn't become sexually active until I was like eighteen, nineteen, so somewhere along there I thought that was necessary part of being clean. It's probably been</p>

	<p>about ten years since I douched. I was telling my sister yesterday, I am going with a woman to have an interview, and I said it was about douching. And we kind of both giggled about that. And she was saying, "I don't know if that's..." I don't think she douches either anymore. And we were saying, "I wonder if that is a marketing thing."</p>
<p>Clean your body</p>	<p>I would say make sure you get behind your ears, clean your ears inside and out. The neck, especially the back of the neck, it does like to turn black. You're back as well because you get oils and that causes bumps. Your arms, your stomach, underneath the boobs. Especially underneath the boobs. The inner legs and the outside. If you have a bigger butt, make sure you get the crease underneath and the part that is towards the back that you probably wouldn't think about and your feet. So, I'll say like how do we clean our bodies? So, for me, I do two wash ups. So, I use bar soap first and then I use shower gel. So, for them, one of my roommates just uses bar soap because she doesn't like the way the body gel makes her body feels afterwards, it's just like squeamish. Yeah. And so, the other ones just uses shower gel. And that's about it. And I use both. I use the bar soap to get all the oils off. And then I just use the shower gel to go over to make sure the bar soap doesn't leave residue. Because with certain bar soaps I have used before has left residue. So, I just go over it one more time</p>

Description of Codes included in *Practices of Hygiene*

The domain *Practices of Hygiene* include responses that examine specific practices or technologies of the self that are enacted as a transformative practice. **You could eat off the floor** examines the women's memories of cleaning their homes and how homes are maintained in their communities. **Clean your bathroom** focuses on advice that the women receive about how they should maintain their homes and advice that the women give others, especially their children, about how they should maintain their homes. **Cleaning your girl parts** discusses how the women are taught to clean their vaginas. Conversations about douching comprises the bulk of this coded data. **Cleaning your body** examines how the women are taught to clean their bodies except for their vaginas. This theme also includes advice that the women give others about how they should maintain their hygiene.

CHAPTER 6 DESIGN, METHODS, AND SAMPLE

This chapter examines the research design and data collection process. The first part of this chapter describes the research design, methodology, description of the sample, research domains, and analysis methodology. The second part of this chapter includes a discussion about participant recruitment and the interviewing process.

CHAPTER SIX, PART I: DESIGN, METHODS, SAMPLE, AND ANALYSIS

This dissertation research project relies on targeted self-care narratives, and in-depth interview responses. The qualitative study is utilized to study African American women's feminine hygiene practices. The information utilized in this dissertation is collected from targeted self-care narratives and in-depth interviews with thirteen African American women.

Dissertation Project

The dissertation research, analysis, and writing occurred over a period of three years. The research proposal and defense took place from May of 2014 to October of 2014. Human Investigation Committee (HIC) at Wayne State University approved the research proposal for study in November of 2014. Research participants were recruited and interviewed between May of 2015 and to August of 2016. Interviews were transcribed between June of 2015 and September of 2016. Analysis and writing took place from September of 2016 to 2017.

Dissertation Study Characteristics

The next section of this chapter provides a brief description of the study characteristics for the dissertation research project:

- (a) Recruitment. Snowball sampling is used to recruit research participants. Family, and friends of the principle investigator were asked to suggest women in their social networks

to begin the recruitment process. After the first woman is recruited, she suggested women that could be contacted to determine if they would like to participate.

- (b) Inclusion, Women who self-identify as African American or Black, between the ages of 19-70, and born in the United States.
- (c) Exclusion, People who are cognitively impaired, younger than 19 years-old or older than 70 years-old, and women that are pregnant. Cognitive functioning is a criterion because it could interfere with a person's ability to participate in the interview. People that do not identify as African American or Black are excluded from participation.
- (d) Screening, Screening for the dissertation research focuses on willingness to participate and inquiry about the potential respondent's age and racial identity.

Dissertation Sample of African American Women

Thirteen African American women are included in the sample for this dissertation research. The research participants ranged in age from 19 to 69 years of age. Two of the research participants are under thirty at the time they consented to participate in the research project. All the women in the sample graduated from high school. Four of the women have taken some college classes but never earned a bachelor's degree. Five of the women included in the sample have master's degrees. Two of the research participants are enrolled in doctorate programs during the period they are interviewed for this research project. One woman earned a PhD before she participates in this research project. The youngest women (aged 19) is enrolled in a bachelor's degree program during the time she participates in the research project. Three of the oldest research participants (aged 65, 67, and 69) are retired. One of the participants is a college student (working on campus), and remainder the participants worked. Three of the women are married at the time of their interview. Five of the women are divorced prior to their interview. Three of the woman are single at the time of their interview. Two of the women are in serious committed relationships when they participated in this research project.

TABLE: 5**Research Participant Characteristics**

Participants	Age	Education	Marital Status	Occupation
Lula	69	Master's Degree	Divorced	Retired Teacher
Jeaniegal	67	Some College	Married	Retired Civil Servant
Ivilla	65	Some College	Single	Retired Admin. Assistant
Ashley	53	Some College	Divorced	Church Musician
Samantha	52	Master's Degree	Divorced	Hospital Admin.
Kim	51	Master's Degree	Divorced	Teacher
Felicia	48	Some College	Married	Postal Worker
Grace	48	Doctorate Degree	Married	Professor
Freddie	47	Master's Degree	Divorced	Teacher
Lisa	37	Master's Degree	Single	Teacher
Amber	32	Doctoral Student	Single	Program Admin.
Renee	28	Doctoral Student	Single	Program Admin
Julia	19	College Student	Single	College Work Study

Research Measures and Analysis

This section describes the research measures and data analysis procedures used in this dissertation research. The in-depth interviews focus their ideas about cleanliness, feminine hygiene, and general. The self-care narratives focus on African American women's feminine hygiene practices and hygiene practices. The dissertation interview questions are conceptualized around the following subjects: (1) familial standards of cleanliness explore the reproduction of practice, (2) community standards of cleanliness examine if standards are similar in families and communities, (3) explores how feminine hygiene and hygiene relates to beliefs and values related to moral personhood, (4) examines how household cleaning standards relates to moral personhood. The self-care narratives prompts are created to elicit the women's histories regarding feminine hygiene practices. The narrative prompts that focuses on hygiene practices are intended to gather detailed information about how the women conceptualize hygiene practices in relationship to their identity as African American women.

Anthropological Measures and Analysis

The rationale of the proposed study design is grounded in anthropological recognition (e.g. Boas) that people's lived experiences occur within the context of their everyday lives or their environment. Mark Luborsky (1994) examines the experiences and personal meanings of older adults that are diagnosed with polio as children and have varying levels of reoccurring mobility loss in later life. Spero Manson (2002) researches Native American Vietnam veterans with Post Traumatic Stress Disorder (PTSD) to determine individual and community effects, rates of treatment, and types of treatment within two different tribes. Both Luborsky (1999) and Mason (2002) develop research

designs that acknowledge that despite having a master status (e.g. disabled or Native American) people's lived experiences are multifaceted.

An ethnographic design where the participants share a racial classification (African American) but varied experiences (e.g. education and income) related to their environment (e.g. safe spaces, reliable public transportation, good public schools, myriad employment opportunities, etc....) highlight which beliefs/values/practices are grounded in differential life experiences and which beliefs/values/practices are contingent on membership in a racial group. Distinguishing between characteristics shaped by family structure, education, occupation, etc., and racial anchors for beliefs/values/practices; moves beyond essentializing racial similarities or differences and towards locating the pathways that lead to embodied inequality. The dissertation research project utilizes a micro/macro level approach to studying how collective knowledge of societal/historical perceptions about African American women create shared practices. Personal narratives of African American women's feminine hygiene practices provide descriptive data that explains how African American women conceptualizes hygiene practices across the lifespan and communicated these ideas within personal networks. The techniques used to analyze qualitative are described in the following section of this chapter.

- (a) Transcription. The audio files from all the interviews with African American women are transcribed verbatim. Transcribing the interviews provides an opportunity to think about each interview in detail. Reviewing transcribed interviews soon after they are completed created opportunities to think about how well the questions worked at elicited responses about the core topics of the research. This helped to develop strategies for subsequent interviews.
- (b) Coding. The coding process consisted of several reviews of each interview transcript. Open coding or "inducing themes from texts" (Bernard 2002) is utilized to reveal common themes. After the initial codes were identified an Excel file was created and data from all the interview transcripts is organized by code. Upon further reflection, some of the initial codes are collapsed into each other (e.g. data coded to describe advice the women

received about cleaning their homes and memories the women shared about cleaning their homes is collapsed into one code). Coding is used to analyze the data presented in chapters 7,8, and 9.

- (c) Pile-sorting. Pile-sorting was employed to ensure inter-rater reliability. The codebook that included brief descriptions, inclusion, and exclusion criteria of the complete data set is reviewed by another social scientist to determine if coding decisions are consistent and make sense to someone who is familiar with research but unfamiliar with this research focus. Additionally, reflections from the social scientist regarding the efficacy of the codes for analyzing the data set benefitted the analysis of the data because verified that my coding procedures are reliable enough to be understood by another researcher. Pile-sorting is used to analyze the data presented in chapters 7, 8, and 9.
- (d) Research Domain Creation. Research domains are created following coding and pile-sorting. The research domains provided analytical categories that helped connect the data to the theoretical frameworks utilized in this dissertation process. The domains that emerged from data were Practices of Hygiene and Moral Personhood. Both domains were utilized to present the data discussed in chapters 7, 8, and 9.

CHAPTER SIX, PART II. PARTICIPANT RECRUITMENT AND THE INTERVIEW PROCESS

Part II of this chapter describes how participants are recruited and an overview of the interview process. This dissertation differs from traditional anthropological research because there is no one setting where data is collected. This aspect of data collection presents some challenges and some benefits. The research design uses snowball sampling to recruit research participants. Similarly, the sampling techniques utilized in this dissertation create challenges and benefits. Both the challenges and benefits regarding interview settings and participant recruitment are discussed in Part II.

Participant Recruitment

The following section examines the recruitment of African American women who participated in the dissertation research project. During the proposal stage of this research project I anticipated that it might be difficult to recruit African American women to participate in this study because vaginal hygiene is associated with sexual activity.

Many African American women (especially women over fifty) are reluctant to discuss topics related to their sexual activity (Harris-Perry 2011; Hine 1989a; Hine 1989b). I discuss the arenas related to participant recruitment in the following order (1) starting the snowball, (2) challenges to recruitment, and (3) benefits to recruitment.

Starting the Snowball

Snowball sampling is used to recruit research participants. The challenging aspect of this sampling technique is getting the snowball started. A woman that I know from a prior job told me about an administrative assistant that retired earlier in the year. As it happens, the woman I know is still in touch with the retiree; she offers to ask the retiree if she will consider talking to me about my dissertation research. My ex-colleague sets up a meeting and Ivilla is my first interview.

During the proposal phase of this dissertation research, I decide that instead of giving the research participants pseudonyms after the consent process is completed I will ask the participants to select a name that they liked. I find this method works well. The women take ownership in the names that they select and seem to like selecting names that mean something to them. Some chose names of women that they are close to and some selected names that they like. My initial fear is that more than one woman will select the same name but it never happens. After the women select their pseudonyms, their new names are used when I addressed them during their interviews and in the dissertation.

Challenges to Recruitment

After, I interview Ivilla, I ask her if she knows of any women that might be interested in participating in my research project. She says that most of the women that she knows

live out of state. Since I only interview women in person; Ivilla's potential connections are unable to assist my recruitment efforts. It isn't until my third interview that I can recruit new participants based on leads of woman that I have interviewed. The challenge is that the recruitment process is slow. Sometimes I will go months without recruiting a new participant. Additionally, because I use snowball sampling, my sample population is not as diverse. All the participants graduated from high school and are employed (or previously employed). I did not interview any women that had college educated parents. Six of my research participants know each other and my sample includes sisters, cousins, a mother, and a daughter.

Benefits to Snowball Sampling

The primary benefit to snowball sampling is interviewing women that have some familial connections so I can explore how certain beliefs, values, and practices are reproduced amongst family members. The mother and daughter that I interviewed illustrated similar beliefs, values, and practices regarding general hygiene and feminine hygiene practices. The sisters I interviewed are the oldest participants involved in this dissertation research project. Like the mother and daughter, the sisters provide similar responses regarding general hygiene and feminine hygiene practices, especially as they relate to moral personhood.

Interview Process: Benefits and Challenges

As previously discussed, this dissertation utilizes a qualitative research design. The locations of the interviews are always guided by the research participants. Some of the interviews are conducted at homes, in restaurants, and coffee shops. Other women prefer to be interviewed in their offices at work. The interviews are conducted all over the

state except for the upper peninsula. I do not offer financial compensation for participating in this dissertation research project so I always offer to bring or pay for food consumed during the interview. I want to show the women that I appreciate their time and willingness to share their experiences with me. Food is easy to offer and most people like to eat. If interviews are conducted at coffee shops or restaurants I offer to pay for the women's food. When I conduct interviews in homes I offer to bring food or coffee. Similarly, when interviews are conducted in the women's offices I offer to bring food and/or coffee. Most of the women decline the offers of food. Later in the dissertation I offer an interview vignette that involves cake.

The benefits of conducting interviews wherever it is convenient for the research participants is that the women are able select locations that are comfortable for them. No interviews are canceled during the dissertation process. Interviews conducted in restaurants or coffee shops are challenged by background noise. Some of the women want to be interviewed in restaurants in the evening during the dinner rush. Coffee shops in the morning are also difficult locations due to noise. The benefit of conducting interviews in public locations is that we are not interrupted by family members or other obligations. However, sometimes it is difficult to keep the interviews focused on the topic at hand. If the interviewee want to talk for hours I did not stop them.

Interview Process

After potential research participants agree upon a time and place to conduct the interview; we meet at the agreed upon location and begin the consent process. During the consent process, the HIC approved consent form is given to the research participant to review while I read the consent form out loud. At the end of each page, the research

participant initials the bottom of the page; I ask if they have any questions. After, the final page of the consent form is signed by the research participant and I, a copy of the consent form is given to the research participant to keep. Signed consent forms are stored in a locked office (in a locked file cabinet) in the anthropology department at Wayne State University as directed by Human Investigation Committee.

The interviews are divided into two parts. The first part of the interview focuses on cleanliness narratives, general demographic questions, familial and community level talk about cleanliness, and household cleanliness questions. The second part of the interview focuses on vaginal hygiene narratives, questions that focus on general hygiene practices, menstruation, and hygiene practices related to sexual activity. The order of questions is intentional. The first part of the interview is intended to focus on less personal questions and to build rapport between the interviewee and me. The second part of the interview is intended to elicit responses about feminine hygiene and issues potentially related to sexuality. Some of the respondents prefer to complete the interview in one meeting others divided the interview into two parts. Interviews that are completed in two meetings are conducted with three weeks of each other.

Chapter Six Summary

The preceding chapter offers an overview of the design, sample, methods, and analysis. The chapter also provides a description of the recruitment and interview process. Challenges and benefits of sampling techniques, interviewing process, and participant recruitment are also described in this chapter. The next chapter provides an overview of research and scholarship that focuses on different aspects of the vagina.

SECTION III: DISSERTATION FINDINGS

Section III reviews data analysis in chapters seven, eight, and nine. Chapter seven explores dissertation findings for Foucault's (1987) care of the self, included in the research domain moral personhood. Chapter eight examines dissertation findings for Foucault's (1987) technologies of the self, included in the research domain practices of hygiene. Section III concludes with dissertation findings for Bourdieu's (1977) practice theory.

CHAPTER 7 DISSERTATION FINDINGS

I don't know if I learned about douching from my sisters or from my mom because she was always like, just take care of yourself, of course, because you want to be a well-kept woman. Not smelling, because that, of course...would have been bad. (Kim Dissertation Interview 2014, Age 51).

Kim uses the phrase “you want to be a well-kept woman” to illustrate that it is a women’s responsibility to be “well-kept”. The notion of responsibility is at the core of respondents’ discussions about cleanliness. This chapter focuses on the reoccurring theme of moral personhood as it relates to Foucault’s (1987) care of the self. I use moral personhood to explain the status awarded to responsible people that “achieve entry and remain competent with respect to familial, occupational, and community obligations (Luborsky 1994):240”. Centering this discussion on moral personhood highlights the extent to which being clean (morally/hygienically) is enacted as transformative practice. Transformative, in that being “a well-kept woman” requires one to acknowledge that failure to enact practices of cleanliness is irresponsible. The transformation from unkept to well-kept requires action or practice. Foucault (1987) uses the phrase technologies of the self to identify the practices that people enact to transform themselves into what/who they want to be. In this chapter, I explore (1) how stigma (as it relates to race) mediates the women’s notions of moral personhood, (2) how stigma (as it relates to gender) informs the women’s conceptualization of moral personhood, and (3) how philosophies about moral personhood (mediated by race and gender) are reproduced within the respondents’ significant relationships.

This chapter is organized into the following sections: (1) section I provides a brief review of the salient components of Foucault’s (1987) care of the self and moral personhood, (2) section II explores how African American women’s feminine hygiene

practices are mediated by stigma both race and gender, (3) section III illustrates how findings from the data highlight the cyclical relationship between hegemonic practice and resistance, and (4) offers a concluding discussion about Foucault's care of the self.

SECTION 1: SALIENT COMPONENTS OF CARE OF THE SELF

Important Inquiries and Notions

Employing Foucault's (1987) care of the self facilitates examining cleanliness as exemplar of moral personhood and relates to the primary inquiries of this dissertation project. What are African American women's feminine hygiene practices? How are African American women's feminine hygiene practices mediated by relationships of power/domination? How are African American women's feminine hygiene practices sites of reproduction? This chapter functions as an entryway to explore how Foucault's (1987) theory care of the self provides an explanatory map of discoveries in this dissertation research project. Prior to a discussion of an analysis of the data and findings, I review the salient components of Foucault's (1987) care of the self.

As discussed in chapter five, Foucault's care of the self provides a framework to explore relationships of power/domination and how those relationships are reproduced. Care of the self is used to examine how men in ancient Greece and Rome enact transformative practice to become "good" citizens of the state (Foucault 1987). In Foucault's (1987) example, men engage in practices that transform themselves into the people they aspire to be. The idea is that people learned the truths or norms of their societies and engage in practices to transform themselves into whatever the truths dictate that they should be - to be "good" citizens or members of that society (Foucault 1987). The first imperative of engaging in transformative practice is believing that you need to

be transformed. Central to care of the self (Foucault 1987) is the internalization of societies truths.

What are society's truths about African American women? The answers to this question provide the foundational lens used to explore the data collected for this dissertation project. An "archaeology of knowledge (Foucault 1972)" detailed truths about African American women that transcend space and time. Specifically, ideas about the limited humanity of African people initiated in the 17th century (Gilman 1985) have survived to stigmatize African American women in the 21st century (Hammonds 1999). Notions about the limited humanity of African American women are focused on deviant/hypersexuality (Andersen and Collins 1995; Collins 2002; Collins 2005; Gilman 1985; Harris 2003).

Truth about African American women's deviant/hypersexuality coalesce around the philosophy that Blackness is analogous to nature and whiteness is analogous to culture. Culture dominates and controls nature. Nature is wild and unpredictable while culture is tempered and thoughtful. Using Sherry Ortner's (1972) analogy of nature and culture explains the differences in how men and women are binary opposites with regard relationships of power/domination. Evelyn Hammonds (1999) asserts that African American women's sexuality is constructed as the binary to white women's sexuality.

African American women's sexuality is categorized as deviant and hyper. This stigmatization makes it impossible to rape an African American woman, until the 1960's. (Broussard 2013). In "Black Women 's Post-Slavery Silence Syndrome: A Twenty-First Century Remnant of Slavery, Jim Crow, and Systemic Racism--Who Will Tell Her Stories?" an article by Patricia Broussard (2013) chronicles the history of rape and African

American women focusing on how sub-human status makes it possible for African American women to be raped without consequence. Broussard (2013) explains how laws reinforced white men's ability to control African American women's bodies during slavery and the Jim Crow Era. More recently Broussard (2013) argues that systemic racism predicated on the stereotype of hyper/deviant sexuality of African American women silences many victims of rape - especially rape perpetrated by African American men. Understanding the history of the truths about African American women reveals targets of transformative practice. This dissertation project is interested in race and gender two arenas that are subject to internalizing truths or domination.

Care of the self, theorizes that engaging in transformative practices will not render one completely transformed. Thus, people rotate between engaging in hegemonic practice and resisting domination. How are African American women's feminine hygiene practices exemplar of cyclical relationships of hegemonic practice and resistance? An example of moving between resistance and hegemony is one of the research participant's discussing her beliefs about African American women needing to douche and ignoring her doctor's advice about douching because her doctor is white. It is hegemonic to believe that African American need to douche. Ignoring medical advice from a white doctor because of race is an act of resistance against whiteness as all knowing. Similarly, Mary Douglas (1966) writes about the special attention marginalized people pay to their hygiene practices to minimize the negative effects their presence has on other people in general but non-marginalized people specifically. Douglas (1966) asserts that focus on cleanliness means that you internalize that you are polluting or dirty. Moral personhood adds an important dimension to care of the self by emphasizing responsibility.

Responsibility to transform oneself is implied in Foucault's (1987) conceptualization of care of the self. However, moral personhood provides an explicit rationale to engage in transformative practice(s) that becomes an imperative for action. Those that do not engage in transformative practice are not "acting" like responsible adult people or exhibiting their full humanity; they are immoral or sub-persons. Grounding this research with Foucault's care of the self aided by moral personhood (Luborsky 1994) provides explanatory pathways to examine African American feminine hygiene practices as hegemonic and sites of resistance.

SECTION II: OPERATIONALIZING FOUCAULT'S CARE OF THE SELF THEORETICAL PARADIGM

Section II of this chapter explains how Foucault's (1987) care of the self, theoretical paradigms and salient concepts are operationalized and employed for this research project especially in the development of codes and grounding the experiences of the African American women interviewed for this dissertation project. Section II begins with a discussion about the development of the interview questions. Additionally, this section includes a discussion of how additional theoretical frameworks are utilized at different points and varying prominence in the development of this dissertation research.

Interview Questionnaire Development

During the initial phases of this dissertation project, Bourdieu's practice theory guides the development of the interview questionnaire. The questions are developed to elicit detailed responses about the research participant's hygiene practices. Central to Bourdieu's practice theory is the concept of *doxa*. *Doxa* examines how practices based on common beliefs become a part of life for people living in similar circumstances. Stemming from my initial question about what African American women share; or what,

other than self-identification as an African American woman, do women who identify as African American have in common? Questions that highlight African American women's *doxa* are salient to this research. Another core concept of practice theory is habitus. Habitus, "referred to the physical embodiment of cultural capital, to the deeply ingrained habits, skills, and dispositions that we possess due to our life experiences (Wacquant 2005)". It is important to explore inquiries about African American women's hygiene practices that stem from habitus.

The concept of embodied inequality (Krieger 2012) provides a framework to analyze how economic/social/political inequality becomes embodied in populations and how embodied inequality manifests as particular health disparities. Creating interview questions that target practices mediated by *doxa* and that illustrate habitus proved difficult. There aren't scales that measured common hygiene practices among African American women. However, there are key scholarly works (Righteous Propagation, Mitchell: 2011, Righteous Discontent, Higginbotham: 1994, and Remaking Respectability, (Wolcott 2001)) that I rely on to create the interview questions. The scholarship details the historical importance of cleanliness (moral/hygiene) in the African American community in general and to African American women specifically. During the interview process, being an African American woman provides me with basic anecdotal knowledge that allows me to ask probing questions about concepts and experiences that I wouldn't have been aware of without prior knowledge of African American *doxa*. One example of the benefit of anecdotal knowledge occurs during an interview with Lula a 69-year-old woman who begins talking about her feelings about white people but is reluctant to continue. The following excerpt is taken from my interview with Lula in 2016.

A. Guy-Lee: Did you have occasion to eat food that other people prepared at their homes for a work potluck, or anything like that?

LULA: Yes.

A. Guy-Lee: Ok, and were you ever hesitant to eat anyone's contributions?

LULA: Yes.

A. Guy-Lee: Ok, and why?

LULA: Because, do you want the whole truth? Because they were white.

A. Guy-Lee: Ahh, because they were white. What does that mean? What does being White have to do with eating or not eating food?

LULA: Because in my opinion, they didn't practice cleanliness is next to godliness and they had dogs, and they would let their dogs in the kitchen, and they would tell you that the dog tasted something, or that they cooked something while they did something related to their dogs.

A. Guy-Lee: Ah, ok. And did it make a difference if you had White coworkers that didn't have dogs?

LULA: I don't like White people.

QUESTION: Why?

LULA: Because they don't like me.

As an African American woman, who works in racially integrated environments I am privy to conversations about perceived differences between African American people and white people. Potlucks or celebrations that involve food elicited parallel lines of inquiry. In my experience, white women ask about the food's ingredients to determine calories or if the food contained something that they are allergic to or just did not like. African American women are primarily interested in who prepared the food to determine if the cook met their standards of cleanliness. During my interview with Lula, I utilize my experiences surrounding food at racially integrated work celebrations to elicit responses about race. It is important to note that two other respondents discussed similar ideas about white people, lack of hygiene, and dogs when asked about work celebrations that involved food. There is an example of race mediating performances of moral personhood.

As previously stated, there isn't an established scale to determine the importance or similarity of African American women's feminine hygiene practices so I sought advice from my dissertation committee advisor and peers that are interested in African American

women's health. Another concern is developing questions that focus on feminine hygiene practices that do not appear invasive. Historically, many African American women are hesitant to discuss anything that draws attention to their sexuality. Darlene Clark-Hine (1989) refers to this phenomenon as a culture of dissemblance. Clark-Hine (1989) describes the culture of dissemblance as African American women's conscious efforts to behave in non-stereotypical ways and some African American women "silencing" any hint of their sexuality to prove that they are not the stereotype.

Melissa Harris-Perry's (2011) book *Sister Citizen: Shame, Stereotypes, and Black Women in America*, explores the history of stereotypes about African American women and how shame is internalized by the stereotyped. Harris-Perry (2011) includes anecdotes from African Americans from poor women who survived Hurricane Katrina to Michelle Obama. Included in *Sister Citizen: Shame, Stereotypes, and Black Women in America* (2011), is an analogy that summarizes the identity assaulting manipulations that African American women embody to adhere to respectability. Harris-Perry (2011) writes, "the act of dissemblance was a tactic to find the upright in the crooked room." Harris-Perry (2011) believes perceptions about African American women are so distorted that they appear crooked; thus, there is not enough room to stand upright (be themselves) because of all the distortions they are working against.

Given the culture of dissemblance (Hine 1989b), developing a questionnaire that explores issues related to sexuality without being intrusive is difficult. To build rapport with the research participants I divide the interview in two parts. The first part of the interview asks questions about memories of cleaning one's house, memories about how their communities are maintained, talk about cleaning, advice about cleaning one's

house, and moves to questions about general hygiene. The second part of the interview asks questions about menstruation, vaginal hygiene, hygiene practices related to sexual activity, talk about vaginal hygiene, and who teaches the women about vaginal hygiene. This approach allows the women to gain rapport with me and feel comfortable discussing personal/sexual issues.

Interview and Targeted Self-Care Narrative Responses

The following section discusses the process of examining and analyzing the data for moral personhood and practices of hygiene. It is difficult to develop an interview questionnaire that elicits responses surrounding sexuality and cleanliness while being cognizant of the “culture of dissemblance (Hine 1989b)”. This section reviews how interview transcripts are coded, analyzed, and deciphered to understand African American women’s lived experiences surrounding cleanliness (moral and hygienic) and moral personhood and practices of hygiene. Additionally, this section of the dissertation discusses and examines how Foucault’s (1987) care of the self and technologies of the self in conjunction with Bourdieu’s practice theory is utilized to code the data.

The review of the dataset section of this chapter is centered on the responses collected during interviews with research participants. Some of the interviews are conducted during two meetings and others were conducted during one meeting. The interviews are scheduled at the convenience of the research participants. Some research participants prefer to schedule one long interview rather than two shorter interviews. Regardless of whether interviews occur during one or two meetings the trajectory of the questions is the same. The first part of the interview focuses on general cleanliness and cleanliness practices (cleaning your house, talk about cleanliness, etc.) the second part

of the interview focuses on personal hygiene, vaginal hygiene, and menstruation. Interviews that are conducted during separate meetings occurred no more than three weeks after the initial interview. All the interviews are conducted between 2014 and 2016.

Coding and Analysis

The analytical codes are developed using theoretical constructs from Foucault's (1987) care of the self and technologies of the self. Bourdieu's practice theory is utilized in the development of the codes to introduce African American women's *doxa*. *Doxa* addresses Foucault's lack of explicit attention to issues of race and gender. Specifically, technologies of the self as theorized by Foucault (1987) explore the activities that white men of property in ancient Greece and Rome engaged in to transform themselves into good citizens. Unlike Foucault's (1987) technologies of the self, Bourdieu's practice theory focuses on the local activities or practices that become *doxa* which are practices reproduced in people that illustrate a shared belief system. Thus, including Bourdieu's theoretical concepts adds the important dimension of reproduction to response coding and analysis because a major concern of this research project is whether race is reproduced through practice.

The codes are grouped into two domains. The domains are Practices of Hygiene and Moral Personhood. Codes included in Practices of Hygiene are explored first. Coding for eat of the floor is developed in relationship to talk about memories of cleaning. Specific details are provided about cleanliness standards and routines in the women's homes, friend's homes, and communities in general. Discussions about cleaning advice that the women receive (usually from their mothers) or give to others (usually their children) is also included in this code. Coding for clean your girl parts is based on the women's talk

about cleaning their vaginas. This talk ranges from discussions about who taught them to clean their vagina to what advice they give to other women about how they should clean their vaginas. Coding for clean your body is developed using the women's talk about learning to clean their bodies excluding their vaginas. Talk about learning to clean their bodies and ideas about advice they give to others about cleaning one's body is included in this code.

The domain Moral Person encompasses the most codes. Coding for it is important is based on talk that includes why a cleaning/hygiene practice is important to be a good woman. This code ranges from why one did extra cleaning for company to taking on most cleaning responsibilities in a dorm room shared with roommates. Coding for race is based on talk that the women shared about perceived racial differences in behaviors and their ideas about people of different races. This code includes talk about differences the ways white women and African American smelled to how the research participants interact with white people. Coding for hygiene and sex develops from the women's responses about how they prepare their bodies before and after sexual activity. Talk about initiating or ceasing vaginal douching in relationship to the frequency of sexual activity is also prominently discussed in this code. Coding for menstruation focuses on talk about memories of starting their periods. Discussions about who taught them to use pads/tampons and how they feel about the discussions or lack of discussions about menstruation are included in this category. Central to this code is talk about how the women feel about their periods. Menstruation is highly stigmatized by most of the research participants.

Coding for natural products develops from women's talk about cleaning products (household and hygiene) selected because of the perceived naturalness of the products. Additionally, the ingredients in foods are included in this code if the women talk about the benefits of eating non-processed foods. Connections between what they eat and use to clean their bodies, and being healthy are included in this code as well.

Coding for generational deficits is based on talk about younger generation's lack of standards regarding cleaning, cooking, raising children, and maintaining relationships. Included in this category are comparisons of how older generations have mastered skills that younger people have not. Specifically, some of the women talk about how younger people's lack of basic "adulting" skills are damaging to the African American community.

Coding for medical/health advice includes responses that talk about advice the women receive about maintaining vaginal health. The advice can come from medical professionals or friends and family members. Coding for ownership is based on women's talk about caring for homes/property or possessions as a sign of being a responsible adult. Coding for religiosity is developed from responses that provide details about how women's religious beliefs influence their thoughts about sexuality, and morality. Coding for other people's homes focuses on the women's ideas about whose responsibility it is to keep themselves "safe". Much of this talk centers on not going in other people's homes as children because of their parent's fears about sexual molestation. The final code in Moral Personhood is nasty. Coding for nasty includes women's responses about people or environments that are not clean. The term "nasty" is also an example of African American *doxa*. Nasty is used to describe disgust about unclean people, food, or environments. Similarly, the concept "good hair" signifies a specific meaning about hair

texture that illustrates a shared meaning or habitus amongst many African Americans, nasty evokes shared beliefs amongst many African Americans about an extreme lack of cleanliness.

After coding the data, talk related to practice and “technologies of the self” was immediately evident. It took several reviews of the coded data to recognize that the theme underlying the non-practice related talk was Moral Personhood. Because of this revelation two domains were identified and each of the codes was placed in either Practices of Hygiene or Moral Personhood. The codes assist in identifying specific types of practice or examples of how the women perceived responsible people should or should not behave.

The process of coding for the domain Practices of Hygiene begins by reviewing the responses to the interview questions “What are your earliest memories of cleaning” and “What are your earliest memories of cleaning your body?” both questions are asked during the initial part of the interview. Most of the talk included in this domain focuses on cleaning practices that describe detailed rituals passed down from older generations to the research participants. All the interview transcripts are reviewed for descriptions of practice related to cleanliness.

The coding process for the domain Moral Personhood consists of reading and rereading the interview transcripts to identify themes that do not involve practice. Talk that includes descriptions of how one should behave to be a good person is a common theme in many responses. Interview questions “What do you remember about starting your period” and “How did people talk about a person that isn’t clean?” elicited responses about how one should clean themselves so that they do not smell. Responsibility for

maintaining cleanliness (all aspects) is prominent in the data that is included in the domain Moral Personhood. New codes are added when new themes emerged. The coding process ceases when all the dataset is coded. Tables are used to illustrate inclusion criteria and exclusion criteria for each code. A brief description of each code is included in the table. Samples of coded responses are used to provide a visual example of how responses are coded.

The next section of this chapter explores the myriad ways that responses are deciphered and connected to care of the self and technologies of the self, and practice theory. The findings discussed in Section III are divided into three main parts. Part (1) presents and explores evidence from the interview transcripts that supports Foucault's (1987) technologies of the self. Part (2) identifies and examines evidence from the interview transcripts that support Foucault's (1987) care of the self paradigm. Part (3) reframes Foucault's (1987) care of the self and technologies of the self by utilizing Bourdieu's (1992) practice theory (*doxa* and *habitus*). Both Foucault's (1987) technologies of the self and Bourdieu's (1992) practice theory are utilized to describe transformative practices and/or technologies that the African American research participants discuss in their interviews. I assert that adding Bourdieu's (1977) practice theory emphasizes issues of race and gender that are not apparent in Foucault's (1987) frameworks (care of the self and technologies of the self) when left on their own.

SECTION 3: FINDINGS AS EVIDENCE OF TECHNOLOGIES OF THE SELF, CARE OF THE SELF, AND PRACTICE THEORY

This section examines the primary findings from this dissertation research on technologies of the self and practice theory within the feminine hygiene practices of African American women. Divided into three parts, this section (1) explores how

participant's responses about their feminine hygiene (and hygiene) practices illustrate support for Foucault's (1987) technologies of the self, (2) to examines how African American women's talk about feminine hygiene (and hygiene) provide evidence of Foucault's (1987) care of the self framework, (3) and utilizes Bourdieu's (1977) practice theory (*doxa* and *habitus*) to add dimensions of race and gender to Foucault's (1987) theoretical framework.

Chapter 8 FINDINGS: INTERPRETING FEMININE HYGIENE/HYGIENE PRACTICES OR PRACTICES OF HYGIENE

People engage in transformative practices to become “good” citizens. Foucault’s (1987) technologies of the self theorizes that transformative practices require an internalization of “truths” or society’s rules. Foucault (1988) writes technologies of the self are practices that,

Permit individuals to effect by their own means or with the help of others a certain number of operations on their own bodies and souls, thoughts, conduct, and way of being, so as to transform themselves in order to attain a certain state of happiness, purity, wisdom, perfection, or immortality (Foucault 1988:18).

My initial interest in hygiene practices – both general and feminine hygiene is based on Michelle Mitchell’s (2004) book *Righteous Propagation* and Mary Douglas’ (1966) book *Purity and Danger*. Mitchell’s (2004) book examines the Reconstruction Era’s mandate on African American hyper-cleanliness. Middleclass African American women’s clubs make cleanliness (moral and hygienic) their mission (Mitchell 2004). Focused attention on cleanliness is an example of “the culture of dissemblance (Hine 1989b)” because African American people in general and women specifically, are stereotyped as filthy and devoid of morals (Gilman 1985). During slavery, African Americans are legally classified as three-fifths a person or less than human. Cleanliness and morality are characteristics that separate civilized people from savages (Gilman 1985). Thus, the mandate on cleanliness and sexual morality perpetuated by middleclass African American women’s clubs is an attempt to humanize African Americans.

Mary Douglas’ book (1966) *Purity and Danger* is not about the United States or race. Douglas’ (1966) book focuses on marginalized people all over the world, the special attention they pay to their hygiene practices, and efforts to decrease the discomfort their

presence causes other people. Douglas (1966) writes that once people are stigmatized it is virtually impossible to remove the stigma. Goffman (1968) writes that race (non-white) is a discrediting stigma. Link and Phelan's (2001) article "Conceptualizing Stigma" discuss the relationship between power and the ability to stigmatize. Link and Phelan (2001) assert that people with power can stigmatize less powerful people; so, that the stigma morphs to survive across time and geographic space. Practices intended to decouple African Americans (women) and uncleanness (moral and hygienic) provide unique insight into the truths that American society perpetuates about African American women.

Foucault's (1988) conceptualization of technologies of the self frame practices intended to transform actors into "a certain state of happiness, wisdom, purity, perfection, or immortality". Interview responses that detail specific hygiene practices intended to transform the women and/or their family/friends into good citizens are discussed in this chapter. The practices are separated by what they are intended to transform. Some of the responses focuses on cleaning one's home. Other responses are centered on cleaning one's body. Practices are further divided to describe hygiene practices related the vaginal hygiene and sexual activity.

Part 1. FINDING PATTERNS THAT SUPPORT FOUCAULT'S TECHNOLOGIES OF THE SELF FRAMEWORK

Part 1a. Practices of Hygiene Supporting Foucault's Technologies of the Self

All thirteen of the research participants provide evidence for technologies of the self. The women's responses focus on memories of learning how to clean their childhood homes, relative's homes, and discussions about community standards of cleanliness. Discussions about who taught them to clean their homes and practices that become

routinized are prominent in the responses. Two of the respondent's discussions provide exemplar evidence of technologies of the self, regarding cleaning one's home. Lula is a sixty-nine-year-old retired teacher and Ashley is a fifty-three-year-old church musician. Both women are born and raised in Detroit, MI. Lula currently lives in a suburb of Detroit. Ashley still resides in Detroit.

Lula

In the following passage from Lula's interview, she talks about the process of cleaning her childhood home. The second oldest of four daughters, Lula's mother taught Lula and her sisters how to clean and maintain their homes.

We had to dry the dishes; dry the dishes and put them up. If my memory serves me, it was a daily chore. Ok, inside of the house we did the kitchen, do you want to know what it consisted of? Ok, the kitchen consisted, washing the dishes, drying them, putting them up, wiping off the stove, refrigerator, cabinets, sweeping the floor. That was it. But we mopped on the weekend. We mopped the kitchen and the bathroom. We cleaned up the bathrooms on the weekend. We, we had hardwood floors, so we mopped and waxed, well mopped the hardwood floors; swept and mopped the hardwood floors. Daily chores consisted of making up your bed every morning before you went to school. And I don't know if you would consider this a chore, but when we came home from school, we changed clothes from our school clothes to our play clothes, so we had to hang up our school clothes, you know, hang them up in the closet, and change into our play clothes. Well, let me finish with the routine that we did, that routine and then on the weekends, at least every two weeks or so, we mopped the front porch, sprayed it down with the garden hose. We took the garden hose and sprayed the entrance to the side door. We would, see these are outside chores; we also swept dirt onto the street, swept the sidewalks, swept in front of the street. We took out garbage. That's it. I don't know if it was special, but I forgot to add that we did wash windows, inside and out, downstairs. So, you didn't do special cleaning cause the house was always clean.

Lula's quote illustrates the detailed cleaning practices that she and her family members utilize to transform their home into a "state of purity (Foucault 1988)". When taken out of context the preceding quote might appear to be an insignificant description of cleaning

her childhood home; or just a list of chores that many children perform at the request of their parents. The significance of detailed technologies of the self, that Lula's interview reveals become salient when Lula responds to the question "How did people talk about homes that are not clean? Lula responds "Yes. The adults would talk about a woman's house that wasn't clean and they just said that she was nasty, sloppy, unclean, lazy, etc."

Before exploring the preceding quote in relationship to technologies of the self it is important to examine what Lula said. Lula's recount of the talk that adults engage in when discussing homes that are not clean center on responsibility. It is women's responsibility to maintain household cleanliness. Michelle Mitchell (2004), Nannie Helen Burroughs (1921), and Victoria Wolcott (2013), all discuss the responsibility of African American women to ensure that their homes are sites of reproduction for uplifting the race and enforcement of cleanliness/respectability. Lula's statement indicates that women are responsible for household hygiene and held accountable if they shirk their responsibility. The adults in Lula's community have definite opinions about women that do not clean their homes well enough to meet the community's standards. Not cleaning to meet community standards means that a woman is "nasty, sloppy, unclean, and lazy". She is not engaging in transformative practices to become or maintain status as a good citizen. Foucault (1987) writes that technologies of the self are transformative practices that make people good citizens of the state. In the case of Lula's 1950's childhood community in Detroit, being a good citizen means maintaining specific standards of cleanliness. It is interesting to note that Lula's childhood neighborhood on the Westside of 1950's Detroit was transforming from segregated to integrated.

When I ask about her childhood neighborhood Lula responds:

“It was Jewish, it was a Jewish community, it was mixed with Jewish, white people, African American people. I guess Jewish people are also white.” As previously discussed, Mary Douglas (1966) writes about the special attention marginalized people pay to their hygiene practices to minimize the discomfort their presence causes other people. The fact that Lula and her family move into a previously all white neighborhood during a time of racialized tension is important to consider. In 1950’s Detroit, per Jeff Nilsson’s (2013) article “Black Neighbors, White Neighborhoods” housing covenants that prevent white homeowners from selling their homes to African Americans are declared unconstitutional by the Supreme Court two years earlier in 1948. Thus, all white neighborhoods integrate after the Supreme Court decision.

Nilsson (2013) writes that between the 1940s and 1950s, Detroit sees a thirteen percent increase in overall population. Per Nilsson (2013) Detroit experiences a one hundred and one percent increase of African American residents during the same period. Lula’s parents migrate to Detroit from rural Georgia, and move into the integrated neighborhood in 1954. Lula’s childhood neighborhood may be connected to dispelling the myth that African Americans are undesirable neighbors because they are “dirty”.

Deep South: A Social Anthropological Study of Caste and Class (Davis, et al. 1941) contains insights into white people’s perceptions about why African Americans are undesirable neighbors. The book discusses the ethnographic data collected by White and African American anthropologists who traveled to Mississippi during the late 1930s. The ethnographers conduct interviews (using racial matching) with residents of rural Mississippi towns to identify the resident’s beliefs about how their

social/economic/political lives are organized by race. Beliefs perpetuated by white research participants about African American's being polluting or inherently dirty because of their skin color; is a reoccurring theme in the ethnography (Davis, et al. 1941). Beliefs about Blackness as an analogy for uncivilized or decreased humanity do not dissipate with time. Nearly, sixty-five years after *Deep South* is published, Caroline Howarth's (2006) research about race and stigma in the U.K. yields similar results. African Americans integrating neighborhoods in 1950s Detroit would have been aware of the "discomfort their presence caused" white people. For African American's like Lula's family, engaging in technologies of the self – like special attention to cleaning practices – is a means of mitigating the stereotypes.

Ashley

Ashley is a fifty-three-year-old church musician. Like Lula, Ashley is a native Detroiter who lived in the city most of her. Ashley grows up in a neighborhood that is in the process of changing from predominately Jewish to Black. Ashley, is fifteen years younger than Lula and remembers the Detroit Riots occurring when she is eight years old. When asked, neither Ashley nor Lula remember their parents talking about race. This is especially interesting for Ashley who talks about remembering tanks and National Guard troops going up and down her street. When I ask Ashley about her memories of cleaning her response is,

ASHLEY: My earliest memories are of my mom and she cleaned all the time. She was a cleaning woman. She cleaned homes for wealthier people. And then she became a housewife, and then when she wanted extra income, she cleaned office buildings. So, that is how she learned to clean; she would clean homes for wealthy white women. She would get on her knees. She would have a pad a kneeling pad and she said that was the only way to truly get floors clean because the mops wouldn't go in the corners. So, she would go on her hands and knees and she would scrub like how you'd seen in old

movies. She did that. And, she did base boards, like people don't to base boards. We washed, now I do remember washing windows. Spring time, we had a spring time ritual where we would wash windows, take down drapes, cause back then we had drapes, not blinds. So, we did that. All the floors were cleaned, but if they were carpeted, we used a vacuum cleaner, I remember if it was linoleum or wood, we would get on our hands and knees and we would scrub. For holidays, the house would be cleaned top to bottom. We prepared the dishes, you know, the china rather. Because we used china for company. We would clean each room; we'd clean top to bottom. We'd go and purchase new linen cause back then you'd use linen for the tablecloth. Hudson's use to sell this fabulous linen for your table, and you'd get the napkins to match. So, we lived, I guess you could say, even though I grew up in an old Jewish neighborhood, cause that's what it was, an older Jewish neighborhood, the things that she learned from being in the wealthy White people's homes, cleaning for wealthy people, it was instilled in me and my home because that was the way we lived.

Ashley, like Lula provides a detailed description of the technologies of the self that frame her beliefs about maintaining a clean house. However, Ashley attributes her mother's knowledge of cleaning to the wealthy white people that she works for. Ashley's talk illustrates her ideas about class more overtly than race. Her mother works as a domestic in wealthy white people's homes; but using china, purchasing linen tablecloths and napkins from Hudson's Department stores, and using drapes instead of blinds become transformative practices that create "certain state of happiness, purity, wisdom, perfection, or immortality (Foucault 1988)". For Ashley, being a good citizen means

adopting the domestic practices of wealthy white people. Later in Ashley's interview, I ask about her memories of people talking about cleaning; her response is,

ASHLEY: My mom did. And then later on in life I learned an old saying: cleanliness is next to godliness.

AGUY-LEE: Ok. Where did you learn that saying?

ASHLEY: Oh, in church.

AGUY-LEE: Church. Ok.

ASHLEY: Cause in church it talks about, in the Bible, that a woman should be a good, it's in the scripture, I just can't think of it right now.

AGUY-LEE: You can tell me what you remember.

ASHLEY: Ok. You take care of your home; you take care of your family. There were roles. The husband played a role, the wife played a role, and the children played a role. And the woman should take care of her own house and not be a busy body and go into everybody else's house.

Ashley, like Lula places the responsibility of maintaining a clean house on women. The phrase that Ashley uses "cleanliness is next to godliness" is also used by Lula during her interview. However, Lula uses the phrase in a different way. She says that "white people did not practice cleanliness is next to godliness"; and uses this assertion to support her contention that she "associates white people with germs".

Ashley does not articulate negative thoughts about white people. Instead she uses them as the example to follow regarding domestic practice. Ashley also talks about her mother's employers teaching her how to purchase good furniture. However, it is important to note that Ashley associates transformative practices with wealthy white people. She made no mention of emulating non-wealthy white people. Ashley does not talk about white people for the remainder of her interview.

Victoria Wolcott (2001) examines African American women's clubs that task themselves with teaching new African American female Southern migrants how to be respectable; when they move to post Civil War Detroit. Similarly, Ida B. Wells writes about suing the Chesapeake & Ohio Railroad in 1884, when they force her into the Jim Crow

(segregated and filled with drunken men) car after she purchases a first-class seat reserved for ladies (Baker 1998b). Wells identifies herself as a “lady” because of her socioeconomic status, education, and dress (Baker 1998b). Foucault (1987) discusses how technologies of the self, rarely transforms one into whatever they are striving to become. Ashley discusses the technologies/practices that her mother learns from wealthy white people as transformative; in the sense that she internalizes the truths or societal norms that practices associated with high status people are more desirable than practices associated with lower status people. The arbitrariness of the practice is irrelevant – what matters is that Ashley understands her society’s truths.

Part 1b. Feminine Practices of Hygiene Supporting Foucault’s Technologies of the Self

Women’s talk about practices of hygiene focuses on two distinct arenas of hygiene. Household practices of hygiene, discusses how women’s responses support Foucault’s (1988) technologies of the self. regarding household cleanliness. The following section examines findings that support Foucault’s (1988) technologies of the self related to hygiene practices targeting the vagina and other parts of the body. In addition to discussing support for technologies of the self this section includes an exploration of stigma associated with the vagina. This section is organized by reviewing quotes from the interview transcripts. Instead of focusing on specific interviews I explore findings from several relevant interviews.

All thirteen of the respondents provide evidence to support technologies of the self, regarding practices of hygiene targeting their vaginas and/or bodies. The responses are coded clean your girl parts and clean your body. All but one of the respondents douched at some point in their lives. The overall rational for douching is too “feel clean”.

Per the participants, there are two events that necessitate douching. The first event is douching after a menstrual period. The second event is douching after sex. It is worth noting that sexual activity and menstruation are combined to create the need to feel clean. By this I mean that some women talk about initiating vaginal douching after they become sexually active. Douching to “feel clean” after a period and before engaging in sexual intercourse is discussed as a rational for vaginal douching. Additionally, none of the women talk about douching after a period but before having sexual intercourse for the first time. All the women who report douching at some point in their lives start their periods before they become sexually active. There is evidence for an association between vaginal douching and sexual activity.

The following quote is from Amber’s interview. Amber is a thirty-two-year-old woman that is native to a mid-sized city in West Michigan. She works at a university as a program coordinator and is currently enrolled in an educational doctorate degree program. I ask Amber about her memories of learning how to clean her body, and she responds,

In the morning, when I got up to go to school, she (my grandmother) used to always tell me, “Rinse that monkey (vagina).” So, I had to wash up in the morning, even though I didn’t have to take a bath. She didn’t want me going outside after I took a bath. But you washed up; you took a birdbath. You wash your face, around that neck, your armpits, and your private areas. While, bathing daily is important I would include taking pet baths, a birdbath; whatever my grandmother would call them. Also, about vaginal care, I was taught by my grandmother that you’re not supposed to douche, but after sex you’re supposed to douche. So, I was taught that you douche only after sex. I was taught that you should keep the wipes with you. You know, they go anywhere you go. So, in your purse or whatever. If you need to freshen up or whatever, you keep wipes. For vaginal care, yeah. I like Summer’s Eve. My mom had regular douches (pre-mixed) but my grandmother kept one of those hot water bottle things with the nozzle on the end. Also, I think it is important to like keep the (pubic) hair trimmed or shaved. Especially because, especially in the summer time. Because it holds odor, it holds heat

so it holds odor. You know, and sometimes you take your underwear off and you're like "Wow", what is that?" And it's just, you're sweating throughout the day, and you know, those of us with thicker thighs. So, I've learned that to keep it (pubic hair), you know, either waxed or trimmed or something. Especially for me being prone to yeast infections. So, that's another one of my hygiene things that I try and keep it waxed and keep it neat so that we don't have any issues.

Amber's response provides evidence for practices of hygiene that are meant to be indicative of a responsible adult woman. She outlines daily practices of hygiene for her body in general (daily baths and bird baths) and specifically, for her vagina. Sexual activity requires additional practices of hygiene to "feel clean". Amber's grandmother teaches her that douching after sex and carrying vaginal cleansing wipes "in your purse" are important. Being a good woman means engaging in daily technologies of the self. Amber's response illustrates her perceptions about her vagina.

A popular rationale for douching is preventing foul vaginal odors. Several of the women's responses to questions about practices of vaginal hygiene center on diminishing "the odors" associated with their vaginas. When asked about douching Kim (51-year-old high school teacher) responds,

I just, I don't know if I learned about it (douching) from my sisters or from my mom because she was always like, just take care of yourself, of course, because you want to be a well-kept woman. Not smelling, because that, of course...would have been bad.

Kim, like Amber talks about the odor associated with a vagina that is not cared for. For Kim, "smelling" is evidence of not being a "well-kept" woman. Another respondent, Felicia (49-year-old postal worker) describes how she cleans her vagina,

When you are cleaning your girl parts, sit on the toilet and wash really, good and then get in your crevices. And then dry off really, well, so that you won't have an odor. Something that I learned from my daughter is to have two washcloths. It never dawned on me throughout my adolescence, adulthood, to having a child, to where my child could wash by herself, to have a face

cloth, and a second cloth. And one day she was in the bathroom, and she had two cloths. I'm like, "Why do you have two face cloths?" She was like, "I'm not washing my lady parts with the same towel I wash my face with." And a little light went on like, "Oh my God, I guess you're right." So, that would be it, to have two cloths to wash with.

Felicia's practices of hygiene are focused on "not having an odor". Felicia's adult daughter provides evidence of the stigmatization of the vagina by saying that even a freshly washed vagina is too "dirty" to touch the same cloth as your face. Despite Felicia not adopting this practice until well into her adulthood, she believes that something bad can happen to her face if she uses one cloth to wash both parts of her body.

Freddie (47-year-old high school teacher) talks about her mother teaching her to clean her vagina,

Well I remember her teaching me how, when I went to the bathroom, how to wipe a certain way so I don't get any infections or things like that. How to clean my vagina when I went to the bathroom. And she particularly didn't want me to take baths, because when you wash and take a bath and all the dirt is off your body it's in the water and then you sit down in the water and all that is going into your body as a woman. And so, she did not like me to take baths. And then she, she did teach me about douching when I was younger. And that was a way to keep your vagina clean. I just remember maybe the tone of the conversation was about odor in the vagina and keeping the odor down and douching helped to do that. Because she would have the douche bag thing in the bathroom. And there was a time when I had no idea what it was and I would just wonder what it was and what it was for. And then after she taught me about douching, then I knew what it was for. My mother she taught me to buy like the Massengill, the bottle ones, and it had the vinegar and water in them.

Freddie, also associates cleaning her vagina with controlling odor. Douching is encouraged by Freddie's mother (a nurse) as a means of minimizing odor. There is evidence provided in Amber, Kim, Felicia, and Freddie's interviews that the vagina is perceived as malodorous. Although not a revelation, the perception of the vagina as malodorous contributes to practices of hygiene that are detrimental to vaginal health. The

chemicals used to mask vaginal odor often kill healthy bacteria and leave the user more prone to infections like bacterial vaginosis (Kasaro, et al. 2016). One of the main symptoms of bacterial vaginosis is a foul odor (Kasaro, et al. 2016). The technologies of the self, employed to remove/mask vaginal odor often cause vaginal odors. This cycle of engaging in practices to reduce/mask odor that cause/increase odor is additional evidence of Foucault's (1987) assertion that transformative practices rarely transform; rather transformative practices require an internalization of the phenomenon used as the rationale for the transformation.

As previously discussed in Part 1a of this section (household practices of hygiene) mothers and grandmothers act as conduits of information about hygiene practices – both household and vaginal. Amber, Kim, Felicia, and Freddie all talk about their mothers and/or grandmothers teaching them how care for their bodies/vaginas. Older women tasked with teaching generations of younger women how to be “good” citizens are not exceptional. However, it is integral to the process of reproducing truths. Truths are the sociocultural maps that inform people what is or isn't acceptable in their society (Foucault 1988). What is race and how is race reproduced are questions at the core of this research. One of the respondents articulates how truths are presented to her via her grandmother and mother about how to be a good African American woman. During the interview, Amber says,

It was always implied that as black women, everything I was taught was implied under the umbrella of us as black women. So, we, as black women, even education, we need to make sure we get our education. We, as black women, need to take care of our bodies. We, as black women, need to take care of our hair. So, it was never a sit down and, “Because you're a black

woman, you have to do this.” But everything that I was taught was implied under the umbrella as black women.

Amber’s mother and grandmother “implied” that the truths are founded in their desire for her to be a good African American woman. During Amber’s interview, she mentions that she has reoccurring yeast infections. I ask her whether she has ever discussed yeast infections with her doctor she responds,

Yeah, I talked to a doctor about the reoccurring yeast infections, because I was concerned at first. I was like, you know, “Why am I getting yeast infections all the time?” Then it was explained to me that some Black women are just more prone. That nothing was wrong with me; I’ve been tested for everything under the sun. And she was like, “Everything is fine, you just gonna be prone to them.” So, I talked to the doctor about that. I didn’t ask about douching; however, I am solid about what my grandma taught me. You know. But also, my gynecologist was like white, so there are just some things that are, yeah, that’s ok for you. But I’m not going to do that. I’ll stick with my grandmother.

Amber’s grandmother’s advice about douching after sexual intercourse is probably contributing to her reoccurring yeast infections (Kasaro et al. 2016). She dismisses the medical knowledge of her gynecologist because she “is like white”. It is evident that Amber’s truths and transformative practices are framed by race. Her grandmother teaches her how to be a good African American woman. Amber’s recount of her conversation with her doctor about recurrent yeast infections does not include evidence that her doctor asked Amber about douching. However, Amber, may not have listened to her doctor if she was advised to stop douching because she views her grandmother rather than her doctor as the authority about what it takes to be a good African American woman.

Amber, Freddie, Kim, and Felicia credit their mothers/grandmothers for teaching them about vaginal hygiene. Lula, Samantha, Ivilla, and Ashley talk about the silence and/or discomfort that their mothers display when they started their periods. All four of

the women's mothers taught them how to clean their bodies when they are young children. As the women age into puberty, conversations about vaginal hygiene stop. The following excerpts are from the four women's interviews. Everyone is talking about starting their periods.

(Samantha 51-year-old hospital administrator).

I can tell you that in high school, most of the girls seemed to use tampons and I was still using pads I had to ask the dorm mother how to use the tampon because no one had ever explained it to me. I knew that it made her feel uncomfortable. The dorm mother, it made her feel uncomfortable. She tried her best, but I never could get the hang of it as a teenager. Right? So yeah, it was normal to me that there were no discussions because I'd never had any discussions. Wait, I got my period when I was nine. So, I got my period and I go and tell my mother and my mother says, "Oh, not yet, the kit didn't come." Now, if you remember on the side of the Kotex box, they had this little order form cut out where you could order this kit, which included a belt to hold pads in place, and probably a little booklet. Right? So, my mother was upset because the kit, she ordered this kit and it hadn't come and then I had my period. And so, she didn't have the conversation with me about it yet. I thought, I remember other people having their period including my sister. I remember seeing panties in the sink being cleaned, marinated. No, what is it? Soaked. Soaked. And so, I didn't understand what that stuff was. Right, so there was no conversation, it was just there and I'd see it and I thought what was wrong with her? So, my mother takes me upstairs and give me a pad and says keep it on. Then she told me "keep your pants up and your skirt down and you'll be fine". I think that was the conversation with my mother.

(Lula 69-year-old retired teacher)

No, we didn't talk about periods when we were growing up. Not with anybody. Well, you might read something. Ok, I'll tell you, when I started on my menstrual cycle, my mother gave me a pad and she said here, put this

on. She never said where to put it. I thought, should I tie it around my neck? Around my ankle? How do I put it on?

(Ivella 65-year-old retired administrative assistant)

In those days, that was a no, no. They didn't talk about it; they just said make sure you clean your area every day.

(Ashley 53-year-old church musician)

We had, in middle school, some form of sexual education. And so, we talked a little bit in there. And then some things you just picked up on. Some things you just picked up on them or they came to you.

Per the literature, silence about issues surrounding sexuality is standard practice for many African American women (Clark-Hine 2007; Hammonds 1999; Higginbotham 1992; Hine 1989a). Grounded in the culture of dissemblance historically, many African American women have attempted to decouple themselves from stereotypes about hyper/deviant sexuality by not talking about or signaling that they are sexual beings (Hine 1989a; Hine 1989b). This practice is conceived as a protective strategy; to protect African American women from rape during slavery and after slavery is abolished (Clark-Hine 1989 and Higginbotham 1992). The truths about African American women's hyper/deviant sexuality creates an environment that necessitates an illusion of asexuality to be considered respectable (Higginbotham 1992 and Hammonds 1999). For African American women, unlike white women, respectability is not equated with the usual associations (e.g. status of husband and/or father, socioeconomic status, education, and occupation). Socioeconomic status does not matter when Ida B. Wells is forced to sue the Chesapeake & Ohio Railroad Company in 1884. The conductor forcibly carries her from the first-class car (despite her purchasing the first-class car ticket) to the segregated Jim Crow car (filled with poor African Americans, and White men that were drinking and smoking) because

her race negated her socioeconomic status (Baker 1998). Wells is removed from the railroad car reserved for ladies and gentlemen because the conductor does not consider her a “lady” (Baker 1998). Her race eclipses her education, appearance, occupation.

I argue that the practice of rendering themselves respectable is a technology of the self for African American women. Respectably, is a technology of the self because the practice is an attempt to “create a state of happiness, purity, wisdom, perfection, or immortality Foucault 1988”. Although not included in Foucault’s (1988) conceptualization of technologies of the self for this example I will add “safety” to states of being that transformative practices are intended to achieve. Victoria Wolcott’s (2001) book describes post-Civil-War African American women’s clubs attempts to teach poor women how to be respectable; not only as a means of changing White people’s perceptions of African Americans but also to protect African American women as they go about their daily lives. I explore the rationale for including other desired states of being to Foucault’s (1988) rubric for “technologies of the self” in Part (3) of this chapter.

The preceding sections part (1a) and (1b), explore findings for technologies of the self. The next section of this chapter examines findings in support of Foucault’s (1987) care of the self. Data from thirteen interviews with African American women about their feminine hygiene/hygiene practices and beliefs about cleanliness are utilized as evidence for care of the self.

FINDINGS: INTERPRETING FINDINGS FOR CARE OF THE SELF

Foucault (1987) writes,

One cannot care for self without knowledge. The care of the self is of course knowledge of self – that is the Socratic-Platonic aspect – but it is also knowledge of a certain number of rules of conduct or of principles which are at the same time

truths and regulations. To care for self is to fit one's self out of these truths. That is where ethics is linked to the game of truth (p. 116).

For Foucault, care of the self is based on understanding the truths and regulations of one's society. Care of self is not just about knowing yourself but knowing yourself in relationship to the norms and rules of your society. Critical to this dissertation project is understanding what race is and how truths about race have been reproduced to sustain its ability to stigmatize or empower groups of people across time and space. In the previous section, findings that provide evidence of African American women engaging in transformative hygiene practices are presented. For technologies of the self to be transformative one must have knowledge of states of being that are considered desirable or "good" based on the rules. This knowledge of what is good is discussed in the context of moral personhood. The following questions guides this exploration of the data. What truths inform behaviors of responsible African American women? How is cleanliness (moral and hygienic) mediated by truths about race?

Part 2. FINDING PATTERNS THAT SUPPORT FOUCAULT'S CARE OF THE SELF FRAMEWORK

Part 2. Moral Personhood Supporting Foucault's Care of the Self **Moral Personhood**

The domain of moral personhood contains most of the codes or categories in this research project. Moral personhood is utilized to identify talk that focuses on the regulations and truths that shape the respondent's beliefs and practices related to cleanliness. The women talk about a range of situations during their interviews. The findings presented use direct quotes from the interview. Background information is

provided to ensure that the excerpt is read within the context of conversation between the interviewer and interviewee.

The following quote is taken from Julia's interview transcript. Julia is the youngest woman that participated in this study. She is a nineteen-year-old college student. Julia is a native Detroiter, and currently spends most of her time living on campus at one of the large public universities in Michigan. During her interview, Julia explains how she and her friends separate casual sexual encounters from sex as part of a serious relationship. Julia uses the term "body count" to describe the number of casual sexual partners one has. When I ask Julia about the definition of body count and why a person's body count matters, she responds,

Because, so basically, most of us, I should say so some of us are brought up in church. Purity is the main thing, just like if you sleep with a certain number of people it means you'll be dirty, or you'll probably feel dirty. So, if you have a low body count, they (men) will be happy. So, if you are in the double digits, like ten or higher, it's like you're a hoe. And especially at this age, you're a hoe. At least ten, that matters. Because I do think cleanliness does matter. Yes, so, especially with the body. You know, keeping your temple pure. So, no weed, no alcohol, no drugs, nothing like that. You want to live the cleanest, holy life you could possibly live. So, my roommate Tara, she believes that her mother knows that she has had sex before just because of her past relationship. She had a relationship for two years. And she kind of already guessed it. And that's what we think about all our parents. Like they guessed it. They might ask a question like, "have you had sex?" And I'm just going to keep it cool and just say no. I would say they (parents) probably might think it's messed up, but they would probably try to be more understanding. But because you already did it, you can't take it back, so just go to God and pray and ask for forgiveness. Basically, try not to do it again.

Julia's excerpt focuses on her standards for moral cleanliness. She mentions that she and some of her friends are "brought up in church". Julia's quote provides evidence of support for care of the self by illustrating knowledge of her responsibility to uphold the standards of her religion, her parents, and her role as a "good" woman by not being a

“hoe”. This responsibility is met without knowledge of what truths and regulations govern appropriate versus inappropriate behavior.

Julia creates a moral personhood that allows her to move between the different standards or rules that are important to her. Being “brought up in church” implies that her behavior and/or belief system are influenced by her church and that she regards the church as a significant part of her childhood and adolescence. Julia attends a high school that chartered by a Detroit area church. Her references to “keeping your temple pure” and going to “God and praying to ask for forgiveness” are evidence of ideas that originated in her church. Her church serves as an influential agent of socialization Julia’s life. She moves between her religious belief system and telling her parents what they want to hear about her sexual history. Julia states that her parents and her friend’s parents are aware that they are having sex but prefer to be lied to so they do not have to deal with their children’s sexuality. Julia’s understanding of what makes a woman a “hoe” is an acknowledgement of the form of social control exercised against women called “slut shaming”.

“Rahimi and Liston (2009) confirm that sexual labeling is a clear form of sexual oppression. Thus, it serves to remind young girls of their gendered role in the heterosexual script (Almazan and Bain 2015)”. Julia’s assertion that a “body count” higher than ten “makes you a hoe” is evidence that she internalizes two important truths about being a woman. First, women that have sex outside of serious relationships are dirty. Second, what men think of your sexual history is very important to determining whether you are a good/respectable woman.

Lula, describes her feelings about menstruating. She talks about menstrual blood as “disgusting”.

You always had blood on the rims of your panties. You asked me a question about cleanliness during period time and periods were so disgusting that you automatically knew to get all of it washed away. So, I mean, for me, I don't know about anybody else. But for me, it was like just, this is just too much. So being on your period, when I was growing up, was sacred. It wasn't a discussion (you had with anyone); you didn't expose yourself to anybody, you know, while you were on your period, whatever went on. You know, you always closed the door; you always took and washed or cleaned yourself separately and privately.

The feelings Lula attributes to menstruating are common. In research that examines the knowledge, preparation, and attitudes towards menstruation amongst African American women, Cooper and Koch (2007) find that the silence or avoidance of discussions about menstruation results in negative attitudes about menstruation. Previously, in Part (1b) of this chapter, I discuss the silence and avoidance/discomfort that some of the respondents experience when they started their periods. Similar, avoidance and silence regarding menopause creates negative attitudes about menopause (Cooper and Koch 2007). Lula's talks about menstrual blood as “so disgusting that you automatically knew to get all of it washed away”. Several of the other women (Julia, Felicia, Ashley, Freddie, Lisa, Renee, and Ivilla) respond that douching after a period made them feel cleaner. The statement feel cleaner implies that menstrual blood is associated with feeling dirty. Amber is the only respondent to explicitly state that she does not douche after a period. When asked about whether there are events or times that she douches Amber responds, “I don't do that. I've heard of that. And I've heard that people (douche after their periods), but my family always taught me that your period is a self-cleansing, you know, your body is getting rid of all the stuff it is supposed to get rid of, so.” Amber douches after sexuality

activity because her grandmother told that her douching would remove any residue and odor caused by sexual intercourse. Of the thirteen respondents, eight douche after their periods, one does not, and four do not provide information about douching and menstruation.

Coding for generational differences presents evidence for care of the self as many of the responses talk about how older generations are better at being responsible adults than younger generations. This evidence is presented as blocks of quotes taken from interview transcripts. I introduce the interviewee and provide context as needed. Four out of thirteen women discuss generational differences during their interviews. Jeaniegal, Lula, Ivilla, and Ashley provide evidence for the domain moral personhood.

Jeaniegal is a 67-year-old retired civil service worker. She is a native Detroiter and currently lives in suburb of Detroit with her husband. Jeaniegal discusses morality or causes for the lack of morality in younger generations.

I think society is much different from, in the last, I'll say, forty years. But anyway, because of single parenting, I think that's a major, major reason that there's no family unit. And on the other side of that is the young people now replace a mate at the blink of an eye, and I can use my own self as an example. My son met his girlfriend and the baby wasn't but four months old. How do you fall in love again from a previous relationship that fast and want to have somebody living in your house? I think they bring another person in their house with their kids too fast and they don't know them. And that, to me, is morally wrong and it teaches them (the children), it doesn't give them good morals. They just think that's ok; that's a normal thing to do.

Lula is a 69-year-old retired teacher and Jeaniegal's older sister. During her interview, Lula discusses how younger men and women's irresponsible behavior is negatively affecting African American people (especially children).

I had to rethink a little bit about being in the twenty-first century and you know, women that are criminals. Women who are druggies and alxies and loose. Just say some of the things that we didn't expect women, women

didn't (used to) be that way. There were things that men did. And I'm not saying that all men were druggies and alcoholics and so on and so forth but there were things that men did that women just didn't do many years ago. Sometimes you get hooked up in some loose women who do any and everything. They sleep around and what have you. Well, back then, you know, people were very different. We didn't have a lot of this moral decay going on. And so, people were working and were responsible for their families and what have you. That's it. We've become so immoral; we're not scared of the police, we're not scared of God, we aren't scared of our parents. It's just, nothing has any control, so to speak, about what goes on in our society. Everything, it's just any and everything goes. Like having more than one sexual partner. Like when I grew up, we were on the cusp of women being virgins, and not being virgins. Because they (young people) don't have the same understanding of sexual behavior that I have. We grew up with a kind of a sexual behavior that was not necessarily a conversation with a parent or with another adult, but it was things that was expected of us. At the time, you're twenty, you'd usually marry, right? By the time, you were twenty in the 60's, late 50's early 60's, by the time you're twenty, twenty-one or so, you were married. Married with children. Well, when I had my baby, and that was in '69, that was the late sixty, a lot of women had babies out of wedlock. So, it's like, back then, having a baby out of wedlock, people instantly called him a bastard, which is a term that we don't use now. You know, we might say it as a derogatory term like we say, "Nigga." But we don't use it as that kind of term. Some of them (young people) have three or four by the time they twenty now. I just talked to a lady with a son that had ten kids. Ok, so 2016 and 1965, 51 years ago, there is just a big difference. Anything goes... Well, my mother ain't never told me I was her friend. She never told me that this was my room. It was a room in her house that she let me use. It's just certain things that we were taught to respect and we understood the rules of engagement, so to speak, with what was right and what was wrong. And these parents don't have a sense of what is right and what is wrong. So, I think they are doing a disservice to children, and I don't know what's to come of it. And then we are in our third generation of crack cocaine addicts. The baby is exposed to crack and the thirty-year old are crack cocaine babies. We didn't talk about drugs. But it's part of the moral decay. Oh, it is. Absolutely. It absolutely is, because as I said women didn't use drugs. And now they sell they babies for drugs. Men are doing nothing in 2016. But living off women. So, they have an impact on what goes on in 2016 with their children and which is not very positive. We have a high rate of images that are not very positive with our children. It isn't because they (fathers) don't pay it is because they are not involved with their children.

Lula expresses disappointment for younger adult's failure to behave responsibly. Her quote addresses drug use, sexual behavior, single parenting, neglectful parenting, and

permissive parenting. Most of her criticism is aimed at women; who become increasingly irresponsible because they start engaging in the negative behaviors previously exhibited by men. She attributes “moral decay” and problems with children to poor parenting skills. Lula attributes clear understanding of the rules or as she puts it “we understood the rules of engagement”. To Lula the lack of knowledge about how to be “a good” person or the rules is at the core of current moral decay. To a lesser extent, Ivilla expresses a similar sentiment. When I ask Ivilla if her mother talk to her about douching, Ivilla responds, “In those days, that was a no, no.” She makes a clear distinction between then and now regarding “acceptable” topics of conversations.

Ashley is a 53-year-old church musician and native Detroiter. She associates cleanliness with older generations in her community. When I ask about how homes in her childhood community are maintained Ashley provides the following response. “Well, all the older people on the block, their houses are very clean. So, I think it is a generational thing. I’ll say they were probably born in the early 1900’s. So, they all were brought up a certain way per se.” For Ashley, the older people on her block maintain very clean homes. She attributes their cleanliness to the way they are raised or taught. There is an implied comparison between people born in the early nineteen hundred’s and people born later.

A similar comparison is made by other respondents and relates to the code generational differences. Responses coded for homeownership focus on how owning your home or having possessions makes you more a responsible adult than people that do not own homes or possessions. Talk about generational differences is included in these responses but the differences are attributed to growing up during the depression rather than older people understand the rules of society better than younger people.

Ashley, Kim, and Grace provide evidence that ownership (especially home ownership) positively affects responsible adult behaviors. This evidence is presented by providing the relevant quotes from the interview transcripts. A brief description of the interviewee is included with the quote and additional text provides context as needed.

Ashley 53-year-old church musician discusses how her childhood community changed after the 1967 Detroit civil unrest.

When the riots came, in 1967, I was eight years old. Before that we could sleep with our doors open, sleep on the porch, things were clean, you could walk down to the stores and the neighborhoods were pretty much safe, kids could go out. We could go outside to play and not even think about what we think of today: getting shot. We could play in the alleys; the alleys were clean. We use to play baseball. You be had to be home when the streetlights came on. But everything changed after the riots. They (the neighborhoods) weren't as well kept as they use to be. You know I can say after, when the younger people started to move in they were renters, what changed the neighborhoods were the renters. When there was home ownership, people took pride in their property and they really kept it up. And so as, I guess, as the generation turned over (the property), the next set came in and so they would start, and if their parents left them their home, then they would rent their home out and so that started the demise of the neighborhood. Homeowners verse renters. And there was a generation (of African American home owners), they were one of the first generations to be able to purchase homes in these neighborhoods that were all Jewish. And what they (Jewish people) did, they doubled the price. They (African Americans) couldn't get mortgages. They did it on land contract. So, if the houses were ten (thousand), they had to pay twenty (thousand). If it was twenty (thousand), they had to pay forty (thousand). So, they owned the homes. They took pride in them; they took care of them. They took care of their lawns. They were, also they could afford to do the maintenance on it because that's one of the things now, people cannot afford to maintain the land. There are a lot of costs associated with homeownership.

For Ashley, ownership is the important factor in neighborhood stability and safety. The riots bring more renters to her childhood neighborhood. She discusses the difficulty African Americans in her parent's generation overcome to purchase homes in neighborhoods going through the process of integrating. She attributes pride in ownership

to taking care of their homes and community. Ashely and Lula discuss integration and the 1967 Detroit Uprisings in their interviews. Macro level events that effect their micro level experiences provide evidence that context and history influence people's realities.

Kim is a 51-year-old high school teacher. She is a native Detroiter. Kim talks about her grandmother and older cousin's homes. In the following quote, Kim is describing the difference between how the women in her grandmother's generation and younger generations cleaned.

She (my older cousin) would get the carpets cleaned professionally. And she did a lot of the inside cleaning herself. But that was because, like I said, during the depression they were poor and I think they had rats in the basement or something, so she said that when she got something of her own she was going to take care of it, and she did. I don't think we were, like I said, we didn't have a chore per se, our mother did a lot of the house cleaning but I can remember my cousin, every Saturday was cleaning day. They got up, they had to wash dishes, mop the floor, you know, vacuum. And I remember because I would go over to her house some Saturdays, I was like, "Wow, you all do this every Saturday? You clean up like this?"

Kim talks about a similar memory that included her grandmother.

That's funny; we were talking about my grandmother. She was born in 1900's so of course they were very poor in the thirties and when she got a house in the 60's, she was meticulous about mopping the floors, keeping the kitchen clean, taking your shoes off when you came in the house, and she just took really good care of the things that she owned. And she would say it's not about how much it costs; it's how you take care of it. She was just very, very clean, very, very meticulous, like I said. But, you know, once again, her mother was like depression kid and she appreciated what she had and she was like, "We gonna take care of it and every Saturday, we cleaning." So, she was always, and still is, very meticulous about keeping her stuff neat and clean.

Kim and Grace equate ownership with taking pride in your home and being meticulously clean. Growing poor or over coming financial adversity is discussed in both Kim and Grace's quotes. Homeownership references more that generational differences. It expresses the belief that struggle and/or persevering/overcoming, in these examples both

financial stress and limited access to property due to race (both of Kim's relatives and Ashley's parents integrated previously segregated neighborhoods) creates pride and pride is illustrated by taking really, good care of possessions. The following quote from Grace's interview provides additional support for ownership being evidence for moral personhood.

Grace is a 48-year-old professor. She is from Missouri, and lived in mid-Michigan for the last twenty years. Like, Ashley, and Kim, Grace associates ownership with taking pride in your possessions. Pride that is then translated into being a responsible adult. When I ask about cleaning her home Grace replies,

You know like, some people like right now in my life people would come to my home and say "nice house". But they never said that when I was a child. We had those old wooden floors and we had, we would buy cheap linoleum to put over it to cover the wood floor. But, and so you would have to really clean it real good or the dirt would set it. And so, she my mother would really stress, it would be important to make sure you keep it clean. I think it's important and I do remember when my mom, when we would get in trouble for not cleaning and she would say that "you don't want to come home to a dirty house". Or you're supposed to, she wouldn't say to take pride in your home, but that's basically what she was trying to say. You need to be proud and treat it that way. Take care. That would be what she would say. Take care of your things; take care of your stuff. It made sense, because we didn't have a lot, nothing could be easily replaced, so you needed to take care of it.

Like Kim and Ashley, Grace attributes ownership to overcoming struggle. In her case, growing up without a lot of possessions reinforces the need to take care of what she has because "nothing could easily be replaced". For Grace, like Kim's relatives and Ashley's parent's responsible adulthood is informed by overcoming struggle to achieve ownership.

Another pathway to responsible adulthood is paying close attention to the foods and products that the women consume or use on their bodies. Coding for natural products emphasizes talk that indicates knowledge of ingredients and how ingredients potentially

contribute to health or illness. Eight out of the thirteen research participants provide data that is coded natural products. The evidence is presented by providing quotes from the interview transcripts. Brief introductions of the interviewees and background information is offered to provide context when needed.

Samantha is a 51-year-old hospital administrator. When I ask what advice, she has for young women regarding vaginal hygiene, Samantha replies,

So, you know, I would say don't use that (chemical) stuff. Find something natural to you. Like water. Yeah, I mean there probably are some other natural things out there. So, yeah, I mean I would say to pay attention to that, switch out your deodorants. Pay attention to what you put in your body because, some of the smell (is connected), you know. I don't know what the heck I was eating, I don't know. But I do know that if I am paying attention to what I'm eating, my body smells better, my body feels better, drinking a whole lot of water and exercising. I feel a lot better when I exercise and my body functions better.

Samantha's response provides evidence for support of moral personhood by connecting how her body feels, smells, and her general health to individual action. Her quote illustrates her belief that she is responsible for her body – her health. Responsible adults are accountable for their health. That accountability is demonstrated by attention to food, hygiene products, and exercise.

Ivilla is a 65-year-old retired administrative assistant. She is responding to a question about advice she gives to young women regarding vaginal hygiene.

Yeah, we (my female friends and I) had those conversations. And a lot of us have gone with the natural external douche thing. I mean it's not a douche but a vaginal cleansing because it's not as harsh as soap. They have on the market just the wash. The external wash. I think it's a topic that we need to have with our daughters. I mean I don't have a daughter but I had the same kinds of talks with my son about sex and precautionary measures, and cleanliness, and going to the dentist and you know, all those kinds of things to keep you on a healthy path, because everything we do to our body, there is going to be reaction. For me, that's what I think. If we are not eating right

you are going to have reaction to that. If you are not maintaining, whatever, you are going to have a reaction.

Ivilla, like Samantha asserts that her actions directly affect her body/health. She associates responsible adulthood with going to the doctor, the dentist, cleanliness, and eating “right”. When I ask, what prompted her going on a healthy path she responds, “I just started reading about what else you can do (to be healthy) and the onset of the Internet made it so much easier.” Research, for Ivilla is another direct action that relates to responsible adulthood.

Renee is a 28-year-old doctoral student at a mid-sized public university in Southeastern Michigan. She is a native Michigander, and until graduate school spent much of her life in a small community in Western Michigan. During Renee’s interview, I ask her about douching. Renee’s quote provides a history of her douching experiences.

I didn’t know yeast infections were directly related to that (douching). The (vaginal) drying caused me to get more to the natural douching with vinegar and water. I was buying them and then I realized I don’t have to buy this I can make my own; it took a long time to gain knowledge and understanding that I don’t have to buy it. The floral Summer’s Eve kind I bought at Walmart. I would make a point to get one for you know the whole like the ... I was buying in bulk. One a month. It became a ritual. Not because the number of products that I bought but I because I was experiencing yeast infections. I didn’t attribute them to the actual douching. I attributed them more to being sexually active and maybe eating habits or something. I was just trying to figure out why I became prone to yeast infections. Yeah, I went to the doctor. I got meds for it and everything but they just kept coming back. It was like okay, it wasn’t until I started practicing natural medicine in my own journey of being healthy; where because of the yeast infections I started practicing natural medicine because the meds just weren’t working. They kept coming back and I kept having to buy more douches because of more yeast infections. I was like maybe I should keep it (my vagina) cleaner. I had to change my panties more often; I had to keep a panty liner on because of the moisture and everything. I was just like oh ok I realized I had to do something different. I heard you can put like garlic in gauze and it would cure a yeast infection. I talked to the (health food) shop ladies about it and they were like you have to put this directly in there (your vagina). I was trying things like putting garlic and yogurt down there. I was talking to them

about douching and they were like you're not supposed to douche you're not supposed to use that stuff. The woman's menstrual cycle cleans the body itself. I didn't know that so I started reading and researching about the (vagina). You don't have to douche the menstrual cycle is a cleaning cycle. So not douching got rid of the final yeast infection; with the natural remedies, it never came back. I think my older sister told me I need to douche cus I was like I keep getting yeast infections. She was like oh you need to douche. Even if I do have something like say I had a yeast infection I would get an internal yeast infection I would get like a vinegar and water rinse or something I don't have to do it myself I would go get one but I haven't had one in a long time cus my yeast infections became that bacteria (bacterial vaginosis) thing that juices or something. Yeah, and so I had to get rid of that so... But it was still a natural remedy that then I realized that meds could cause me to get an infection then I took precaution to prevent them from coming. Not eating, and doing things, and not putting external things down there that could cause problems.

Renee, like Samantha attributes her vaginal health to her direct action. Throughout her quote, Renee is recounted how she tried to cure her vaginal dryness by douching. When chemical douching products do not work; Renee uses vinegar and water to no avail. She takes the advice of the health food store employees and stopped douching. The common theme in Renee's account is that her actions create desirable or undesirable results. Adopting natural products, eating healthy, and researching for information about how to maintain vaginal health provide evidence to support that individual action is of responsible adulthood.

Felicia is a 49-year-old postal worker. Like Renee, Felicia recounts a history of vaginal problems related to using pre-mixed over-the-counter douching products. Felicia responds to the question, "What advice would you give younger women regarding douching?"

I would suggest they trying different ones. Because like I can't use soap with any deodorant or color toy or anything like that. It has to almost be like baby soap. But it took trial and error. Like I can't even use like Summer's Eve and Massengal...those. No, not the douche the feminine hygiene wash. Right, I can't even use those. Yeah. As the years, as I got older, I got more

sensitive. So, using the premade douches were irritating. So, I had to either do the extra sensitive... Or I used water and baking soda.

Felicia does not discourage young women from douching. Rather, she recommends that they use “trial and error” to find the product that is right for them.

Ashley 53-year-old church musician discusses her journey with cleaning products.

Right now, I am into the natural. So, I like Castile soap, um, any form of Castile's. I use puffies. Everything. Back then, there wasn't a distinction between the different soaps. We didn't have all that. And if you did, you didn't know it. Everybody used like, the big companies. Coast, Irish Springs and Ivory. And so, as products began to increase, then you move to your specialty products like Bed, Bath and Beyond, no Bath and Body Works, excuse me, Bath and Body Works. Then I went to maybe that stage, especially Victoria's Secret, things like that. And then more I started to research what was in all of these products, I realized this was really unhealthy and then I found out whatever you put on your skin is absorbed into your skin whether you wash it off or not. So, that's how I got into the healthcare. So, it would be Black Soap. Dudu Osum, that's the name of it from Africa. And mango soap and Castile. Oatmeal soap. And so, that's what I use now for every part of my body, including hair. I think all in the thirties. When I started to transition, to transition into natural things. Away from chemicals and all the things that are really harmful. What are all of those little things on the side, the ingredients that you've never heard of and when you research you're like, “Oh wow. Ok, this is used to kill something or this is used to make gasoline. So why am I putting this on my body?” And so, I found out the natural products. I started reading the ingredients and these ingredients, and these names that you can't pronounce and you research and you see what they are used for. And so, that kind of led me into my research of natural products.

Ashley's quote details her transition to natural products she consciously pays attention to the ingredients; further still, she researches the ingredients to determine if they are potentially harmful or helpful to her health.

Amber (32-year-old university program coordinator) talks about her douching history. It is like Felicia's in that Amber states that she is sensitive to most douching solutions but she continues the practice. Amber's regard for her grandmother's advice is evident in her quote.

Summer's Eve. I started with that. And then after a while, I just started buying my own stuff. I just started buying the generic stuff. You know, or whatever. If it was mild. Because another thing I learned from my grandmother is that, and I don't know if this is an African American thing or whatever, but we are prone to yeast infections. And so, that was another reason I was told to douche after sex. Because I will get a yeast infection. So, you know, but I am also sensitive down there, so I can't use those high deodorant-type stuff. So, that's my grandmother, my grandmother use to say, "Just get some vinegar and some water. You know, and douche that way." So, that's where I learned that.

She connects douching after sexual activity to her conception of what it means to be responsible adult.

Freddie (47-year-old teacher) responds to the question, "What advice would you give young women regarding vaginal hygiene?"

Probably using some type of body wash or something that's hypoallergenic or that doesn't have a lot of perfumes and things like that in it because that irritates a lot of women. And I would also talk to them about keeping up their PH balance because I think a lot of that must do with a lot of odors that you're smelling from the vagina if your PH balance is off. And sometimes what you use to clean your body can throw your PH balance off.

Freddie's quote illustrates that information about products is evidence of being a responsible adult. Many of the previous quotes discuss self-advocacy as it relates to vaginal care. The next set of quotes focuses on individual actions informed by doctors or healthcare professionals. The following excerpts support the idea that for some of the women seeking advice from a doctor is evidence of responsible adulthood.

Grace is the only respondent that never douched. During the interview, she describes seeing douching apparatus in the bathroom of her childhood and asking what it is for. Grace's mother told her, "That's none of your business." Despite her mother douching, Grace seeks advice from her doctor rather than her mother. As the self-described white sheep of her family Grace is the only person to earn a bachelor's degree, and PhD. Seeking medical advice is how she conceptualizes her identity as an educated

woman who believes in the efficacy of science. Grace feels that her mother's silence regarding her own douching practices makes it easier to talk to her doctor about douching.

Grace recounts a conversation she has with her doctor about douching.

I think the first time I saw a gynecologist I was in my early twenties and they asked me if I was sexually active and at the time I think I was active once or twice so I said, "Yeah." And because I was there to talk about birth control and then he asked me if I was using any kind of douching products. And that was the first, and I believe the last time, somebody asked me. Well, I have never had a complaint feeling unclean. I always felt clean and then when I talked to my gynecologist when I was in my mid-late twenties, cuz then I was hoping to get pregnant, I was hoping to get married and get pregnant, the conversation was no, you don't need to. You're ok. You're fine. And by that time, I had insurance so I was literally getting my Pap smears and going every year to a doctor, where before I think I had never been, in my childhood I have never saw a doctor talk about anything related to that. It was always talked about and discussed with my mother and she never included me. And the doctor would talk to my mother and never said anything to me. Yeah. And I never had a Pap smear in my childhood cuz I never had sex. Although, my mother, I believe would always ask for confirmation that I was still a virgin.

Lisa is a 37-year-old special education teacher. She is a native Detroit. In this quote, Lisa is responding to the question, "What advice would you give younger women regarding douching?"

Instead of having conversations with friends to dispel myths about cleaning, go contact a healthcare professional. I talked to a doctor. I was about 22. They told me that it was not a necessity, actually it (douching) was a detriment. Like the vagina was like a self-cleaning instrument and if certain things, that it threw off your PH balance and it actually could cause problems. They said not to do it. I stopped douching after that. I did. I told my sands (sorority sister that pledged at the same time) what my doctor told me because I was just amazed that if it was such a big deal, and it was such a detriment, why was it marketed so heavily? And then over the years, I noticed that I haven't seen an ad on t.v., do they even make it anymore because I feel like I saw commercials about it but I don't anymore. It's more about outside hygiene verses internal, like I don't see any commercials about douching. My sands was still douching I think so; I think she didn't believe me. So, she had to go do some research on her own. And I was like

feel free. This is something that research hasn't lied about, so. If she didn't want to take what I said at face value ...

Lisa's excerpt provides evidence that she believes that listening to her doctor is the responsible way to practice vaginal care. She chastises lay information about health issues. Lisa, like Grace has a mother that douched and saw douching apparatus during her childhood. She initially douches like her mother but seeks medical advice from her doctor while she is an undergraduate student. Like Grace, Lisa associates responsible adulthood with seeking information from her doctor. Jeaniegal (67-year-old retired civil service worker), like Lisa, used to douche but stopped. When I ask her why she stopped douching she replies, "I don't douche. And I don't douche because the doctor told me not to douche. But it was a time that I would douche prior to sex." All the preceding interview excerpts provide evidence that the research respondents conceptualize responsible adulthood with being a moral person or a good person.

Moral personhood is evidence of Foucault's (1987) care of the self. During an interview in 1987, Foucault explains what he is referring to when he speaks of the truths that people "fit themselves out of",

...the problem for the subject or for the individual soul is to turn its gaze on itself in order to recognize itself in what is, to recall the truths to which it is related and on which it could have reflected. On the other hand, in the current that one can call globally Stoic the problem is to learn by the teaching of a certain number of truths, of doctrines, some of which are fundamental principles and other rules of conduct. It is a question of having these principles tell you in each situation, and in some way, spontaneously, how you should behave. It is here that we find a metaphor that does not come from the Stoics but from Plutarch. "You must have learned principles so firmly that when your desires, your appetites or your fears awaken like a barking dogs, the *logos* will speak with the voice of a master who silences the dogs by a single command." You have there the idea of a *logos* who

would operate in some way without your doing anything. You will have become the *logos* or the *logos* will have become you (p. 116).

Foucault (1987), provides two perspectives of how care of the self requires acceptance and internalization of *logos* or knowledge or truths that people learn about themselves that and are connected to one's society. For the Plutarch, the truths are internalized so they direct one's actions unconsciously (Foucault 1987). For the Stoics, the truths are taught so completely that they become dogma (Foucault 1987).

At the core of this research project is understanding the cyclical relationship between internalization of truths (about African American women) by African American women and how their feminine hygiene practices are informed by these truths. This cycle illustrates hegemonic thought that informs practice – practices that are often meant to resist hegemony. The technologies of the self or practices are integral to understanding and act as confirmation of the internalized truths. By this I mean that technologies of the self are activities meant to transform one into what society or the truths ascribed to a good citizenship. What it means to be a good citizen is determined by the truths either taught or internalized or both. Evidence of Foucault's (care of the self and technologies of the self) are grouped into two domains. Practices of hygiene and moral personhood exemplify the actions African American women employ to signify themselves as good citizens. I use moral personhood because the concept evokes not only righteous behavior but also responsible behavior.

As previously discussed, Luborsky (1994) defines moral personhood as “a status reserved for adults that achieve entry and remain competent with respect to familial, occupational, and community obligations (p. 240)”. Adopting Luborsky's (1994) definition of moral personhood appropriately frames the women's feminine hygiene practices,

general hygiene practices, beliefs about cleanliness as actions of responsible adults. The knowledge or truths that inform how the women conceptualize what it means to be a responsible adult is based on macro and micro level experiences.

Part 3 of this chapter provides findings that present evidence of issues of race and gender by utilizing Pierre Bourdieu's (1977) practice theory as a framework. The truths that inform the research participants practices are shaped by their race and gender. Both race and gender are examples of systems of domination. While care of the self and technologies of the self provide general evidence of the women's internalization of these systems of domination; they do not examine specific threads of evidence that indicate how the women's truths are informed by gender and race.

Bourdieu's (1980) practice theory refers to the socially informed body where "history is turned into nature or society embodied". Bourdieu (1980) credits Jean Paul Sartre with conceptualizing action that is implicitly accepted (Csordas 1990). Practice theory is subject to experience but not individuals because it is shared by members of the same social group or class, and it results in an immediate adhesion (*doxa*) to the world understood as "an endless circle of mutually reflecting metaphors (Bourdieu 1977)". People with similar histories and experience interpret information in related ways because of *doxa*.

CHAPTER 9 FINDING PATTERNS THAT INTEGRATE BOURDIEU'S PRACTICE THEORY FRAMEWORK

Part 1. Practices of Hygiene and Moral Personhood Findings Supporting Evidence for Practice Theory

Responses coded for other people's houses is presented in four of the thirteen respondent's interviews. This code emerges in the final analysis of the data. This evidence is explored by presenting direct quotes from the interview transcripts. A brief description of the interviewee and additional comments are included to provide context when necessary.

Felicia (49-year-old postal worker), "The couple of houses that I could go in, yes. I wasn't allowed to go in a lot of people's houses. Actually, yeah, my mother was scared of men or boys touching me. Actually, it had nothing to do with cleanliness." Amber (32-year-old college program coordinator), "I didn't go in that many. And that's probably because I went to family (member's) houses most of the time. I wasn't really allowed to go to a lot of friends' houses." Lula (69-year-old retired teacher),

I am going to base this on the time; you didn't go into people's houses. In the winter, you would occasionally visit other people. They had to be your best friend. And so, your mom had to know their mom and their father and so on and so forth. So, you did play on the inside with people that were close to your family.

Freddie (47-year-old teacher)

Well, my mother, when I was young, she didn't let me go over to people's houses because she was afraid, she didn't know what was going on in other people's homes. And so, she was afraid something could happen and she didn't know and she doesn't know them very well. So just for safety reasons, she didn't really let us spend the night places. So, it wasn't really an issue of cleanliness, it was an issue of safety.

All the women are responding to a question about whether people in their neighborhoods employed similar cleaning practices. These excerpts are included in the domain moral

personhood because there is evidence that African American mother's protecting their daughters from potential sexual abuse by not allowing them to go in other people's homes is viewed as being responsible for their safety. How is protecting your daughter from sexual abuse informed by race and gender?

Dr. Charlotte Pierce-Baker (2000) writes in her book *Surviving the Silence: Black Women's Stories of Rape*,

"We are taught that we are first Black, then women. Our families have taught us this, and society in its harsh racial lessons reinforces it. Black women have survived by keeping quiet not solely out of shame, but out of a need to preserve the race and its image. In our attempts to preserve racial pride, we Black women have sacrificed our own souls."

Rape and sexual abuse are not exclusive to the African American community. In 2012, the Department of Justice estimates that "for every one white woman who reported being raped there were at least 5 other victims that remained silent". The Department of Justice estimates that "for every African American woman who reports being raped at least 15 other victims stay silent (Axtell 2012)". The "harsh racial lessons" that society reinforces explains why many African American women do not report sexual abuse. If sexual abuse/rape is not reported by most victims creating strategies to protect themselves and their daughters is evidence of acting like a responsible adult. Additionally, the mothers initiate the practice of protecting their daughters by reproducing protective measures employed by other women in their communities.

Stereotypes about white people provide additional evidence of support for issues of race and gender. This data is presented as quotes from the interview transcripts. I

provided a brief description of the interviewee. Further comments are included to offer context when needed.

Jeaniegal is a 67-year-old retired civil service manager. Jeaniegal is responding to a question about advice she will offer young women regarding hygiene practices.

Well, I think I would tell them (African American girls & White girls) both the same because they need the lotions and the oils because white people don't smell like we do. They stink. Well, they do though. And I think their makeup is different than ours and therefore, they have a different kind of odor. Well, I don't think they are genetically or physically, the same. You know, they may be the same, but I don't know it. I think that they, I think they sweat or something. Something that makes them have a sour smell to me.

Lisa is a 37-year-old special education teacher responds to the question advice she will offer young women regarding hygiene practices.

That certain things, for us, are, we are just taught differently. You know, we are taught that (pubic) hair is ok verses Caucasian women, everything has to go. Everything has to be smooth, everything has to be picture perfect, and everything has to be this standard. And for black women, like hair in certain places is acceptable; for white women, it's not.

Amber is a 32-year-old college program coordinator responds to a question about she gives advice to young women regarding hygiene practices.

I learned that there was a difference between the way that black women and white women did cleanliness things. And like white people wash their hair every day. And when I was going to school, because I went to a predominately white elementary school, and I use to want to wash my hair every day. And so, my grandmother use to tell me, "You can't wash your hair every day, your hair is gonna fall out. You know, you're not like the white girls." And I was like, "Well they wash their hair every day." "Well, they're supposed to. They are not supposed to have the natural oils and things in their bodies that we do." So, I learned that at a young age, probably seven or eight. Also, you know, white people go outside without shoes or socks on and walk around outside and the bottom of their feet will be all dirty. I was taught you don't go outside without something on the bottom of your feet. And then as a young woman, like in my young twenties, I had roommates. And they would be white girls. And so, it was interesting to see, you know, the kinds of things they would do around the

house like put their feet on the dining room table. You know we just didn't, and I was like, "Damn, didn't yo momma tell you not to put your feet where you eat?" Like, you know, it was just interesting to watch that dynamic. After they would take showers, you know, they would wouldn't clean the drain out with all that hair, you know, after they wash their hair. And I would have to get go in there with a glove and take they hair out of the drain. So, I learned that there was a difference there. I never saw a douche or anything like that around the house. You know, they never talked about what they did after sex or how they would clean up. I never seen nobody go into the bathroom after, you know. You know, I don't know what they did. The way you live, cleanliness and the way you live with manners and all of that. I think that there is just a big difference. You know, we are taught that when you walk into somebody's house, you speak to them regardless if you know them or not. These girls, one of them was really close to me, we were, tight. I would take her places with me. But oh, I can't, because she don't speak to nobody. And everybody was like, "Who is this white girl you bringing in here; she ain't speaking." So, I had to teach her, "Hey! When you come in here, you say hello." And it was just you do a general hello, but you have to speak. But you can't come in here and think just because you're with me that gives you some type of pass, because if I'm speaking, you speak. You know, so there is a lot of difference in the way that we're raised and the way that we're taught. And on the whole spectrum.

Julia, a 19-year-old college student) responds to a question about advice she would offer young women regarding hygiene practices.

So, for white people, they have to wash their hair just about every day. And for us, we can go at least probably about a month or two without washing our hair. We can keep our hair dirty but they can't because theirs starts to stink more. We can probably put some stuff in it and it'll be ok because ours won't be so flat or anything like that.

Kim is a 51-year-old high school teacher responds to a question regarding discussions about race in her family.

I can just kind of remember just the undercurrent of really not trusting white people. You know, not all people. My father's philosophy was, you know, you judge people as they treat you but there was always kind of an undercurrent of white people might do something unsavory to you. But we pretty much, you know, like I said, it was a black neighborhood, when I grew up. The school was black, the church was black, it was pretty much all I knew. Yeah, I can remember my mom talking about, once again, about people that would have potlucks at her job, she would say she is not eating

something from so and so's house because, once again they had the dogs or they just weren't clean to her in terms of just how they, every day hygiene or how they carry themselves. Yeah, they were white coworkers. Like if they had a potluck or something. She would say so and so brought, you know, whatever dish and she was like, "I'm not eating that." Because she didn't think they were the cleanest person. They were a nice person but she wasn't eating their food.

Lula, a 69-year-old retired teacher responds to the initial question about eating food at work potlucks, followed by several probing questions that focus on her general feelings about white people.

Because, do you want the whole truth? Because they were white. Because in my opinion, they didn't practice cleanliness is next to godliness and they had dogs, and they would let their dogs in the kitchen, and they would tell you that the dog tasted something, or would be something related to their dogs. I don't like white people. Because they don't like me. There have been a few occasions and I have been cordial to a couple, three in my lifetime and I am 69. But when I say a couple or three, I might be exaggerating. Germs (when asked what she thought about white people). No, I do not think so (that white people are as clean as black people). I never had a reason to think about them or eat any of their food because I never ate their food when I was younger. And I was never in a position to interact with them except they were over there and I was over here and that was it, I never befriended them, we never, nothing. I don't know. Ok, yes, I do. There was something about them that was always rude. In school, at school. And once I got caught up going to a white doctor but it was only by mistake. Well once I had a doctor refer me to another doctor and I didn't know, after that I always asked, I always asked.

Seven out of thirteen research participants provide evidence for support of practice theory related to issues of race and gender. Jeaniegal questions whether white people are "physically, genetically" the same as African American people. Jeaniegal may or may not be aware that genetic differences between "races" is used to question the humanity of African American people. She uses the myth as a rationale to explain why white people "smell sour". Anecdotally, it is interesting to note that white people's smell is a (especially when their hair is wet) topic of conversation that I've heard before. Julia and Amber

discuss perceived racial differences in hygiene practices regarding hair. Though neither Julia nor Amber question whether white people are genetically different than African American people, they both attribute differences in hygiene practices to a difference in standards or acceptable behaviors based on race. Like Julia, and Amber Lisa believes that “white women have to shave off all of their pubic hair”; because they have different vaginal aesthetics than African American women. Kim and Lula, recount how potlucks become racialized based on a common attitude or *doxa* about white people and their dogs. Again, anecdotally, this is a common perception that some African Americans have that white people treat their dogs better than they treat most people. Probably, based on narratives from African Americans that work in white people’s homes; this stereotype about white people being less hygienic because of their close relationships to their dogs is not uncommon.

These examples illustrate conceptions of myriad difference related to race. Of all the research participants Lula is the most outspoken about white people. Several times during the interview she appears to change her mind about expressing her feelings about white people. She indicates that her initial negative contact with white people occurs in school. As previously mentioned, her family integrated a neighborhood on the Westside of Detroit in the 1950s. This is only two years after the Supreme Court declare that housing covenants are unconstitutional. When I ask about her interactions with white people at school, all she will say is that they are rude. Although, Lula may have negative personal interactions with white people when she is younger; she did disclose that a close family member is murdered by a white man. The family member is seventeen years old at the time of her death. Lula’s personal experiences with white people, growing up during

the Jim Crow Era, and living through the Civil Rights Era may contribute to her dislike for white people.

The examples of stereotypes the research participants discussed illustrate how their lives are informed by race and gender. The women's talk about stereotypes about white people exhibit how membership in a group provides access to certain ideas that are not accepted by everyone in the group but are known by group members. Link and Phelan (2001) discuss the role that power plays in stigma. They write that for stigma to negatively affect a group of people, by limiting their opportunities to access power and resources; the affected group must already have less power within society (Link and Phelan 2001). However, this does not mean that less powerful groups do not stigmatize powerful groups – the stigma does not tend to affect the powerful group's opportunities to access power and resources (Link and Phelan 2001).

As much as identifying how African American women are stigmatized is important to understanding the extent that race affects their lived experiences; it is necessary to explore how common ideas about others inform their sense of collective identity. The preceding examples locate the women's talk in collective ideas about protecting young African American women by keeping them out of other people's homes; and how white people are viewed as others who smell differently, have different standards of hygiene, and different standards of what constitutes polite behavior. The stereotypes about white people point to a collective identity or habitus informed by race and gender.

As previously discussed, much of the criticism aimed at Foucault is about his lack of explicit attention to issues of race, gender, and class. Bourdieu's practice theory is used in this research to present how issues of race and gender informed African American

men's lives in *Body and Soul: Notebooks of an Apprentice Boxer* (Wacquant 2004). Loic Wacquant (Wacquant) examines the lives of poor African American men living on Chicago's Southside. The men are members of a boxing gym run by an ex-professional boxer. The men are dedicated to training enough though most of them never fight competitively. Through their narratives, Wacquant (Wacquant) discovers that they see the gym as a refuge from the dangers of their neighborhood and the lack of opportunities afforded to them as African American men. Their collective experiences as African American men brings them to the gym; however, their individual agency makes them use the gym as a refuge – not all African American men on the Southside of Chicago join the gym.

Practice theory is utilized in a similar way in this dissertation project. Highlighting common experiences of the African American women and illustrating how those experiences are informed by macro and micro level factors. Many of the women's beliefs are only common to other African Americans or people who spend time with African American people. Understanding people's belief systems and where they come from is vital to positively affecting their health. Foucault's care of the self and technologies of the self provides the framework to inform the cyclical relationship between hegemonic thought and practices intended to resist hegemonic thought; while Bourdieu's (1977) practice theory illustrates how being African American and women informs how race and gender are reproduced. The final chapter of this dissertation provides a discussion.

SECTION IV: DISCUSSION

Section IV focuses on a discussion of the dissertation findings. This section concludes with a reflection about being an African American woman studying African American women. The reflection includes an interview vignette and examples of how African American women are actively rejecting hegemony; and how these examples of rejecting hegemony create hope for the future.

CHAPTER 10 DISCUSSION: “EVERYTHING, ALMOST EVERYTHING I WAS TAUGHT, WAS UNDER THE UMBRELLA OF US AS BLACK WOMEN.”

Amber, tells me that “everything she was taught, was under the umbrella of us as Black women”. This quote from Amber’s interview presents an overview for this dissertation project. The primary goal of this dissertation research is to determine the role of African American women’s feminine hygiene practices in the creation of race. The aims of the project are multifaceted: 1) to identify African American women’s feminine hygiene practices, 2) to identify which practices, cultural values, and beliefs contribute to the creation of race, 3) to determine if these practices, cultural values, and beliefs are related to the creation of race, and 4) to discover and describe whether race is created through African American women’s feminine hygiene practices.

Next, I discuss where each specific aim is addressed in my dissertation. The first specific aim is to identify African American women’s feminine hygiene practices. This aim is addressed in chapters seven, eight, and nine. The second specific aim is to identify which practices, cultural values, and beliefs contribute to the creation of race. This aim is addressed in chapters seven, eight, and nine. The third aim is to determine if practices, cultural values, and beliefs contribute to the creation of race. This aim is addressed in chapter nine. This chapter explores the findings framed by Bourdieu’s practice theory. The fourth aim is to discover and describe whether race is created through African American women’s feminine hygiene practices. This aim is primarily addressed in chapter eight. Chapter eight and nine are key to understanding how race is created through

practices. The function of this chapter is to discuss the significant findings of this dissertation.

SHARED EXPERIENCE: AND THE CREATION OF RACE

At the core of this research, is my goal to understand how race is created by examining African American women's feminine hygiene practices. When I conceptualize this project, I wanted to include women from various socioeconomic backgrounds. This is key to my research aspirations because I wanted to know what, if any, practices/beliefs/values are common to women who self-identify as African American or Black.

All the women I interviewed are from working class families. Their parents do not have college educations and are employed in a variety of traditionally blue collar jobs (e.g. factory worker, nursing assistant, domestic, postal worker, etc.). However, nine of the thirteen women have master's degrees and of the nine, three either have doctorate degrees or are currently enrolled in doctorate programs. I incorrectly, anticipated that the women's current socioeconomic status will be more influential than the socioeconomic status that shaped their upbringing. I assume that their feminine hygiene practices will be influenced more by their educations than by the belief systems of their mothers. By this I mean, that I assume they will be familiar with douching because of their mother's and other relative's practices but that they will be more influenced by medical advice.

Unlike what I assumed, respondents' douching practices are less determined by their educational attainment than belief in the efficacy of natural products and the cessation of regular sexual activity. Out of a cohort of thirteen, only three women stopped douching because of information they receive from their doctor. Of the three, two earned

master's degrees. Researching the ingredients of products after experiencing negative effects from douching (primarily vaginal dryness and yeast infections) is the primary reason that six of the respondents stopped douching. Lula, Kim, and Ashley indicate that they stopped having sex so there is no longer a reason to douche.

The association of douching and sexuality activity is evident from the interview responses. Women that talk about douching to feel clean after their periods do not initiate vaginal douching until after they became sexually active. None of the women report douching prior to their first sexual experience. The women report starting their periods before they become sexually active. This finding is significant because it suggests that sexual activity is related to feeling dirty or impure. Julia, the youngest woman (19 years old) interviewed for this research responds, "Purity is the main thing, just like if you sleep with a certain number of people it means you'll be dirty, or you'll probably feel dirty".

Applying Foucault's Framework to Understand Collective Experiences

Based on findings and analysis of interviews with African American women regarding their feminine hygiene practices there are varying ways that the women engage in transformative practice to become good or moral people. I discuss the targets of the transformative practices by providing examples the practices attribute to the various ways that the women exhibit moral personhood.

The first example is related to talk about mitigating and/or removing vaginal odors. Being a good or moral women is predicated on not having an odor. Odor or removing odor is primary reason for douching. The fear of someone smelling malodorously is common amongst in this cohort. Even the women who never douche talk about recommending douching products to women in her college dorm that "did not smell fresh".

Only one of the research participants talk about women's fear of vaginal odors probably being a marketing scheme created by a man. Despite varying educational attainment, careers, marital status, or age removing and/or controlling vaginal odor is a primary focus of moral personhood.

Moral personhood regarding feminine hygiene is directly related to the characterizations of African and subsequently, African American women. Many of the negative depictions of African American women focus on smell and hyper/deviant sexuality. Former President of the United States Thomas Jefferson writes in his 1785 book *Notes on the State of Virginia*, that "Blacks have a strong and disagreeable odor". Notions about foul smelling Black bodies is also gendered (Ferranti 2011). Linda Ferranti's (2011) article "An Odor of Racism: Vaginal Deodorants in African American Beauty Culture and Advertising" explores the historic representations of African American women as malodorous, and traces how these stereotypes had and continue to have detrimental effects on African American women's health; due to their propensity to use vaginal deodorants. Ferranti (2011: 5) writes,

Deodorizing one's body not only demonstrated an aspiration toward respectability, "smelling sweet" was also an indication of moral virtue. Sociologists Gale Largey and David Watson have noted that "odors, whether real or alleged, are often used as a basis for conferring a moral identity upon an individual or group.

Mitigating the "real or alleged odors" discussed in Ferranti's (2011) article is the most common rationale provided by research participants for engaging in transformative practices related to feminine hygiene.

A second example from the dissertation findings is associated with general cleanliness. Household cleanliness discusses as important by all the participants

regardless of lived experiences, age, or occupation. Only one participant grew up in a home that is considered nasty by the research participant, extended family members, and people in her small community in Western Michigan. As previously discussed in chapter seven, nasty is an African American colloquialism that describes a person, place, or food that is disgustingly dirty. The woman (Renee), describes a memory of being so embarrassed by her childhood home that she stayed in a hotel while working in her town during the summer between her junior and senior years in college. Renee is aware that her house does not meet the cleanliness standards of her small African American community. She recounts spending the night at friend's homes after her mother died. Although, Renee realizes that her friend's parents are trying to be nice to her; she feels like a charity case when they give her advice about cleaning her body and clothes.

All the women express that household cleanliness is important to their ideas of being a good or moral person. Responses about cleanliness is next Godliness, a cluttered home makes a cluttered mind, and a good wife takes care of her home exemplifies the women's associations between household cleanliness and responsible adulthood or moral responsibility. Homes and vaginas are viewed by all the research participants as sites requiring transformative practices to exhibit moral personhood. It may be that clean homes and vaginas are subject to public scrutiny in ways that may seem contradictory. People visit other people's homes and share opinions about the cleanliness of the homes with others in the community. The women talk about people who keep nasty houses as being the subject of neighborhood gossip. Similarly, the motivating fear people smelling foul vaginal odors is a primary rationale for douching. Mitigating vaginal odors for sexual activity is a common rationale for the women initiating vaginal hygiene practices. Despite

several research participants citing menstruation as their reason for douching; none of them began douching before they became sexually active. Thus, public or other people's opinions of your morality or goodness creates an impetus for engaging in transformative practices.

Both preceding examples contribute to understanding how cultural values and beliefs about transformative practices are informed by truths about African American women. The stigma associated with being dirty and/or smelly is gendered in that douching products are marketed to all women as means of reducing vaginal odors (Ferranti 2011). However, more than just gendered, douching practices are raced because of the historical characterizations that African American women have a particular smell that needs to be mitigated (Ferranti 2011). An integral pathway of the racialization of douching is internalization. As African American women, resist characterizations of unequal humanity related to cleanliness, morality, and intelligence; practices that might influence collective action for a span of time in other populations, became woven into the culture/values/beliefs for African American women. The women interviewed for this dissertation have two common characteristics – they self-identify as African American and are cisgender women. The coupling of dehumanizing stigmas and systems of domination – race and gender – solidify their influence on African American women's transformative practice. The main requirement for perpetuating stigma that survives across time and space is power – the power yielded by the stigmatizers upon the stigmatized (Link and Phelan 2001). The basis for the stigma is perceived difference in humanity as evidenced by skin color.

Examining How Race Is Reproduced Through African American Women's Feminine Hygiene Practices

To understand how race is reproduced through African American women's feminine hygiene practices, I examine how the women learned about cleanliness - both household and hygiene. Most the women discuss their mothers or older female relatives teaching them to clean their houses. With the exception, of Renee, whose mother died when she was eleven. She is raised by her father. Renee describes her father as a packrat. All the respondents talk about detailed cleaning routines that they participated in or had knowledge of. These detailed cleaning routines are discussed with respect. One of the women talks about her mother scrubbing the floors on her knees "because that was the only way to get the corners clean". She also says that you can "eat off the floors" of most the older people's homes in her childhood neighborhood. Another woman says that when she was a child her mother had "white carpets in their own home and they stayed white". Both statements illustrate the respect that the respondents have for the women that taught them the importance of cleanliness.

Conversely, the women also learned from their mothers what happens if they did not clean their homes. The importance of cleanliness is exhibited by the women's comments about hygienic and non-hygienic environments. As previously discussed, data coded as nasty is as much an illustration of community level expectations of cleanliness as data coded for eat off the floor. Household cleanliness is another example that is raced and gendered. Gendered because the women talk about clean houses as a woman's responsibility. Lula said, "The adults would talk about a woman's house that wasn't clean and just say that she was nasty, sloppy, unclean, lazy, etc." Only one respondent talks about engaging in Saturday cleaning rituals with her father; because her mother works as a nurse's assistant on the weekends. Household cleanliness is raced

because of the internalization of negative characterizations of African Americans regarding cleanliness. Victoria Wolcott's (2001) book *Remaking Respectability: African American Women in Interwar Detroit*, describes the attitudes of African American women during the Progressive Era.

For servants, who were associated with "dirt" because of their occupation and race, high standards of cleanliness refuted stereotypes of African American women. Keeping a clean house also indicated a woman did not place her wage labor over her household duties. Thus, in myriad ways cleanliness could represent resistance to poverty and oppression; it was a symbol of self-respect whose importance was understood by elite performers and working class women alike (p. 27).

The women's mothers and female relatives teach them about the importance of cleanliness through explicit and implicit instruction. The reproduction of race is also taught through silence. Silence about issues of sexuality is discussed by several of the respondents. A primary site of silence is menstruation. Most of the women express their mother's discomfort when confronted with their daughter's first period. Statements like "you'll be fine; just keep your skirt down and your legs closed" illustrate how menstruation is about becoming a sexual being or becoming a woman. The reproduction of the culture of dissemblance (Hine 1989b) is created as a protective stance or practice for African American women during and after slavery. Projecting a public asexual image progressed into silence about issues that are associated with sexuality (Hine 1989b). Often these issues involve reproductive health because issues like menstruation and menopause are taboo topics that leave generations of African American women feeling unprepared to deal with their bodies (Cooper and Koch 2007; Pierce-Baker 2000).

Race is reproduced through generations of African American women internalizing truths about themselves and their perceived lack of humanity. African American women

develop practices or technologies of the self to transform themselves from what they are accused of being into who they ascribe to be. Emphasis on cleanliness first becomes an act of resistance and then a practice; that are transmitted as cultural values and beliefs.

What Is Race? and Why Should It Be Defined in Health Research?

This dissertation research is discussing the concept of race and what it means to self-identify as Black or African American. For the purposes of this research, I use the term African American to signify that the women self-identify as Black women born in the United States. As I continue this discussion about the definition of race I examine what it means to be a Black woman. When discussing race the term Black is a signifier for the opposite of white. It describes the distance that people who identify as one or the other are separated in terms of health, wealth, and educational attainment. This distance is significant and always has been. I define race as an indication of social location, opportunity, and stigma. It is significant to note that the respondents only have two characteristics that they all share; they are women and they are African American. Their collective experiences are shaped by their gender and their Blackness. It is impossible to separate Blackness and gender in the women's lived experiences. I cannot attribute special attention to vaginal hygiene as an equally transformative practice for all women. Black women are twice as likely to douche as their white counterparts (Ferranti 2011). The depictions of Black women as sub-human are coupled with their race and gender. Thus, stigmas attached to race and gender are interwoven; creating myriad targets of transformative practice. African American⁴ women's feminine hygiene practices are prime examples of embodied inequality.

⁴ I use African American to indicate how location or the United States informs practice differently than Black women living in Senegal or a predominantly Black country.

Examining the pathways that inequality becomes embodied is critical to alleviating health disparities. This dissertation aims to illustrate the value of using an anthropological lens (holistic) to improve health. This lens must extend back in time to understand how systems of domination inform truths that are readily accepted as “natural”. Ideas about African American women’s hyper/deviant sexuality are often thought of as natural or true (Lichtenstein 2003). This naturalization leads to healthcare providers stigmatizing African American women seeking treatment for sexually transmitted infections (Lichtenstein 2003). Attempting to understand pathways of inequality without knowing how collective experience informs practices is ineffective. Utilizing race as a variable without explaining what race signifies, devalues the truths that are cultivated to justify a litany of current and historical injustice.

IMPLICATIONS AND RECOMMENDATIONS

The implications and recommendations for this dissertation research are discussed in the following section.

African American Women’s Feminine Hygiene Practices

- (1) African American women continue to emphasize vaginal douching as a viable form of feminine hygiene. Additional attention should be given to campaigns targeting African American about the dangers of vaginal douching and vaginal cosmetics intended to remove vaginal odors and/or discharge. Medical students should receive training on initiating conversations with patients about vaginal douching.
- (2) The dangers of vaginal cosmetics regarding disrupting bacteria and healthy vaginal pH should be disseminated to the public.
- (3) Women should receive information from their doctors about healthy versus unhealthy vaginal discharge and vaginal odors. General ignorance about what constitutes a healthy vagina needs to be included in gynecological visits (especially visits for pubescent girls).

Silence Regarding Issues of Reproductive Health & Sexuality

- (1) Doctors need education about the silence regarding issues of reproductive health & sexuality amongst African American women. Many of the participants discussed the silence that occurred around menstruation in their families. This training should target pediatricians and school health educators who can teach about the function of menstruation to help decrease the negative attitudes and lack of preparation that some of the respondents reported. Additionally, increased sexual health education can eventually decrease the culture of “silence” if future African American mothers teach their daughters to be prepared for the onset of menstruation.
- (2) Public health agencies should initiate peer education programs to empower African American women to teach basic reproductive and sexual health that focuses on menstruation and overall vaginal health to other African American women in their communities. Many of the participants sought information from women other than their mothers if they sensed that their mothers were uncomfortable.

Exploring Race in Social Science and Health Research

- (1) Race should be defined in social science and health research. An absence of a definition assumes that all readers have the same understanding and knowledge about the role race has played in people’s lives.
- (2) Researchers that include race as a variable should educate themselves about the systems of domination that informed the phenomenon that they are researching. This information is critical to understanding that some practices are founded in resisting oppressive stereotypes.
- (3) Interventions created by public health researchers should focus on how African American women conceptualize responsible and/or good behavior. The women in this research project talked about practices that they considered transformative. Understanding what matters to people can help to create health interventions that they will participate in. Additionally, interventions that incorporate activities that reinforce transformative practice (e.g. organizing a teacher’s classroom, or a senior center) might encourage the participants to associate the health intervention with being a “good” or moral person.

LIMITATIONS

Despite the successful execution of this dissertation research, there are several limitations to this research. The following is a list of the important limitations of this dissertation research project.

- (1) The sample of African American interviewed for this research project is smaller than I planned. I planned on interviewing twenty women and ended up with a sample of thirteen. Recruitment proved to be more difficult than I anticipated. In hindsight, I should have anticipated, how silence about sexual issues could have inhibited recruitment. Given the

small size of my sample my data may be limited by the people that are willing to participate in the study.

- (2) Snowball sampling was used to recruit research participants. This resulted in a sample that was not diverse regarding variance in women with very little education and women that grew up in middle or upper middle class families. All the respondents had at least a high school education and none of the respondents grew up in families with college educated parents. Limited diversity regarding education might mean that I was not privy to data from women with less than high school educations. It would have been useful to determine if parental income influenced feminine hygiene practices. Diversifying my research participants would allow me to test my hypothesis that the only thing women that self-identify as African American share with other women who self-identify as African American is multifaceted stigma. The degrees that African American women are stigmatized is mediated by individual access to power and resources (e.g. education, socioeconomic status, and occupation).

FUTURE DIRECTIONS

This dissertation research could be continued in the future in myriad ways. Next, I discuss some of the future directions for this research.

- (1) Explore the efficacy of biology of racism as a paradigm intended to ground research that focuses on adverse health caused by racism. Biology of racism extends embodied inequality by emphasizing the historical processes of stigmatization and exclusion that creates an environment that is detrimental to groups of people's health.
- (2) Alter data collection from interviews to focus groups. Information shared in a focus group could mediate silence surrounding African American women and reproductive health issues.
- (3) Introduce an intervention component and collect data before and after the intervention to determine if education mediates African American feminine hygiene practices.
- (4) Share the findings from this dissertation with healthcare professionals and interview them about their experience talking to African American patients about vaginal douching. Help develop training for healthcare professionals to address the issues highlighted in this dissertation and issues that the healthcare providers experienced regarding feminine hygiene practices.

FINAL THOUGHTS: BEING AN AFRICAN AMERICAN WOMAN RESEARCHING AFRICAN AMERICAN WOMEN

At different points during this dissertation research I thought about what it means for an African American woman to study African American women. Writing about negative

depictions of women who look like me, who are representative of my grandmothers, aunts, mother, sister, and daughters is painful. Of the thirteen women, I interviewed for this dissertation research project, my interview with Lula forced me to reflect upon being an African American woman studying African American women. In the final sections of my dissertation project I discuss aspects of Lula's interview, explore why Lula's interview requires reflection, and explain why I am hopeful about the future for African American women.

Ethnographic Vignette - Lula

Lula wants to meet at her apartment. She lives in a blue-collar suburb of Detroit. Lula is a retired teacher. Her apartment is on the first-floor a of three story unit. The apartment complex seems to have over ten buildings and the buildings were all red brick. Each unit in Lula's building has a patio. Lula had to buzz me in. Her apartment is larger than I thought it would be – I guess I based my assumptions about what the apartment would look like on way the complex looked. The apartments remind me of the cinderblock dorms I lived in my freshmen and senior years in college. Known officially as Bates Hall some of us called our dorm "the projects" because unlike most the dorms on campus all the rooms were small and uniform.

Lula gives me a tour of her home. She lives alone. Married and divorced twice; both of her ex-husbands live in the Detroit area. Three of her four children live in the same suburb as Lula. One of her children lives in Atlanta. All three of her sisters live in the Detroit area. Lula says that she has a close relationship with her children, grandchildren, great-grandchildren, sisters, nieces and nephews. She talks about a high school graduation party for her sister's grand-daughter; and advice she gave to one of her

grandsons about finding balance between work and community college. The floor plan is open and one room flows into the next. There is a galley kitchen, small dining room, two large bedrooms, two large bathrooms, and a comfortable living room. Comfortable because the warm earth tones and wooden figurines all fit together in a calming way. The couch is soft but firm with enough bounce that makes standing easy. Writing this description makes me realize that I evaluate the comfort of couches and chairs by the amount of effort I must exert when transitioning from sitting to standing.

Lula's home is filled with African art and tapestries. There is a large coffee table book of President Obama prominently displayed on a bookshelf. Lula offers me a seat in her living room. Before the interview, I ask if I can bring anything and Lula tells me that she has a sweet tooth. I ask if she would like a lemon cream cheese pound cake because I've been told I make a pretty good one. It becomes a favorite dessert at family dinners especially with women Lula's age. Lula says she would like a pound cake. I give her the cake and she goes into the kitchen to make coffee.

As she makes coffee, and I sit in the living room Lula tells me about her great - granddaughter named Faith. Faith is three years old and very smart. Lula tells me that she used to teach kindergarten; and wishes that Black parents let their children explore and ask questions. This is an interesting conversation in hindsight because Lula generally has very few positive things to say about white people. This criticism of black parents stifling their children's creativity is based on Lula's experiences as a teacher, mother, grandmother, great-grandmother, and observations of white people with their children.

Lula tells me that in one of her graduate classes a fellow student brought her child with her to class. Lula says the little boy told everyone he met all about his family -

including but not limited to his parent's occupations and his address. Lula says black parents will tell their children to "stop being nosy" if they ask their parents any questions about themselves. She says that when children come to her house she encourages them to explore and play with her figurines and books. The only book that that is off limits is the Obama coffee book.

The coffee is finished. Lula cuts the cake and sits down at the dining room table. The walls are a warm off white and the apartment is covered in the same off-white carpet. I offer to move to the dining room table. I feel warm. It is June and hot outside. Lula doesn't have the air conditioning on or the patio door open. She is weeks' shy of 70 years old. I am usually hot no matter the temperature or the season. I don't ask her about air conditioning or opening the patio door because it is her house and I thought it would be rude.

Lula passes me a cup of coffee and tell me that she is a type two diabetic who loves sugar. She remembers that when she was a child her grandmother made coffee in a percolator pot (on the stove). Lula's grandmother allows her to drink coffee that is mostly sugar and milk. Lula says that she always liked her coffee sweet and that isn't good for her diabetes. A friend suggests that she use one spoon of sugar and one packet of Equal to make her coffee sweet enough without using a lot of sugar.

Lula explains that she gained weight and can no longer fit in her size 24 clothes. She asks for the cake recipe. It is a simple recipe; cake flour, butter, sugar, cream cheese, lemon zest & juice, and vanilla extract. Lula is the first participant that I baked a cake for. When I interview Lula's sister later during in the summer I bake her cake. Lula tells her sister that she will like my cake better than her husband's because he uses margarine

instead of butter and his cake is dry. I was taught that it is rude to show up at anyone's home empty handed – especially the first visit. Most of my interviews are conducted at coffee shops or restaurants so I buy participants food or coffee to show my appreciation.

I am glad Lula likes the cake. The conversation about the cake is relaxed and provides an easy segue to the interview. I give her the recipe. She writes it down as she tells me that lemon cream cheese pound cake is her youngest son's favorite cake. She tells me that she'll make the cake for her his birthday. I give her the consent form to read, and am quiet as she read it. I ask if she has any questions. She doesn't and signs the form. I ask her to select a pseudonym and she says "Lula". I ask her if it was okay to record the interview and she said it is. We start the interview and I ask Lula about the house she grew up in she begins to tell me about her neighborhood. Lula, her three sisters, mother and father lived in a house on the Westside of Detroit.

When I ask Lula about the racial composition of her neighborhood she says "Black, white and Jewish". I ask her if the schools she attended had the same racial composition and she said they did. I ask about her friends and she responds, "I only had Black friends". I ask her why and she says "I don't like White people". I asked her why she doesn't like white people and she seems annoyed. She says because "they don't like me and that is it". I took the "and that is it" to mean she was done discussing white people.

As we continue the interview, I ask Lula if they had potlucks at work. I ask about potlucks because I remember work potlucks being opportunities for coded conversations about race and cleanliness. On several occasions, African American women will ask "who brought" whatever to the potluck. The question is not about trying to determine the

ingredients but rather to determine who prepared the food. I never experience white women asking “who made” the food. They ask about ingredients to determine if food is acceptable regarding food allergies or calories. Some of the African American women won’t eat food if they don’t think the person who prepared the food is “clean” enough.

“Clean” enough can mean anything from not licking their fingers if they get frosting on them while they cut a cake, to being in the bathroom with a co-worker that doesn’t wash their hands. I correctly assume that Lula has been in similar situations at work. I think it might be a round-about-way of getting her to discuss her feelings about white people.

Lula says that teachers often had potlucks. I ask if there is ever food that she won’t eat. She says “yes, food made by white people”. I ask her why and she responds, “Because in my opinion, they don’t practice cleanliness is next to godliness, they have dogs, they will let their dogs in the kitchen, and they will tell you that the dog tasted something, or something related to their dogs and food”. I ask her if she will eat food made by white people that don’t have dogs. Lula says “no”; I can tell she is getting more annoyed with my questions but I keep asking why. She repeats that she doesn’t like white people because they don’t like her. I ask if she has ever been friendly with white people. Lula responds, “There have been a few occasions that I have been cordial to a couple, three in my lifetime and I am 69. But when I say a couple or three, I might be exaggerating”.

I feel awkward. I have four dogs at home. I self-consciously examine my pants for dog hair. It is also very clear that Lula means what she says – she doesn’t like white people. I ask Lula what she thinks about white people. She tells me that she thinks about

germs when she thinks about white people. I ask her if she thought White people are as clean as African American people and she says “no”. I want to know more. Lula is glaring at me and I know she isn’t going to answer many more questions about race. I ask her when she began to feel this way about white people. Lula says in school when she was a child. She always thought they (white people) are rude.

Then Lula tells me that there are several other things that she can say but she won’t and we need to move on. I want to know what else Lula is thinking about but I can tell Lula is done talking about white people. I want to know more because this exchange makes me wonder what happened to Lula. I remember being around white people that made an issue of me being African American.

I remember first grade at Burns Park elementary school in the 1970’s. At recess, a group of kids suggests we play “Little House on the Prairie” because we all watch the show on television. The kids tell me I can’t play because there aren’t any African American people on the show (not until a couple of years later when Todd Bridges joins the cast as a runaway slave). There are only about six or seven black kids at Burns Park elementary school. Burns Park elementary school is in beautiful neighborhood in Ann Arbor, MI. There is one African American teacher and every year she invites all six of us to her house for lunch. We walk with her to her house in the late spring. I don’t remember the menu except that we always had ice cream sandwiches for dessert. As a kid, I never think about why the teacher knows this annual lunch is important. As an adult, I wish I

can thank her for making us feel special and trying to get to know us; even though we weren't in her class.

Has Lula been rejected by white kids when she was a child? She asks me to turn off the recorder. I do and asked her why she wanted me to turn off the recorder. Lula said that what she is about to tell me has nothing to do with feminine hygiene; she doesn't know if it is something I will be interested in because it is off topic. Then she tells me about her 17-year-old granddaughter who was murdered by a white man. Her granddaughter is sitting in a van with her boyfriend when a white man walks up to the van shoots her granddaughter and her boyfriend. Lula's granddaughter dies four days later at the hospital. Her boyfriend survives. Lula says she didn't like white people before this happened but now she can't stand them. She tells me I can turn the recorder back on and we continued the interview.

Lula tells me about her granddaughter's murder without showing much emotion. Her voice is angry but not shaking or elevated. She is suffering the loss of her granddaughter. She is the epitome of the "strong black woman" who emerges from the rubble standing tall but Lula is not about forgiving the murderer. She expresses her anger toward the murderer without ever speaking his name. He is a nameless white man. She never says if he is arrested or convicted. When she finishes talking about the murder she says "now that is all". I take that as my cue to go back to my interview script. When I turn the recorder back on it is as though Lula never talked about her granddaughter's murder.

Why this encounter was memorable

I am surprised that Lula has such negative thoughts about White people. I think I am shocked because her prejudice mirrors the prejudice of many white people I

encountered. By this I mean her prejudice is universal or complete. I am not shocked that as a child she experienced prejudice. I think I am shocked because my world (except for high school) is integrated and I have always found a few white friends.

Thinking back to my high school I realize that it would be easy to only have significant relationships with African American people. We move to Louisiana when my father is hired to head the social work department. It is my first time being in an all-black environment. We move to Grambling, Louisiana from Indianola, Iowa. Indianola is extremely white - in a way that Ann Arbor is not. When I lived in Ann Arbor in the 1970s there aren't many African American people (especially at Burns Park) but there is a lot diversity regarding Latinos, Asians, and people of every different religion and nationality.

In Iowa, there are one and a half black families in the town. We are the one, and the other family is an African American woman married to White man. When we move to Indianola all our neighbors know just about everything about us. I am in junior high and there are two African American kids out of five hundred kids. It is a rural community and the smaller towns can't afford their own junior high and high school so their kids are bused to Indianola. My sister is in tenth grade and there are two African American girls in the high school. We are harassed on the school bus and in general. I remember two girls coming home with me the first day of school. I later find out they want to see if we eat the same food that they do and if we have tails. We are called "nigger" and "colored" often.

One day I invite a girl to my house; she tells me that she can only come if I invite another white girl because her parents thought we (Black people) might be a bad influence. I am very confused. My father is a professor at the local college; her father

works at the local grocery store. Part of my confusion stems from the incongruence between African American people I know and how African American people are perceived by many people in Indianola, Iowa.

My parents and their oldest friends met in college. My mother was born in 1938. Her mother was a teacher in Alabama. As a child, we visited my maternal grandparents in Birmingham, AL. My sister and I learned to swim in the Adams' pool. My grandfather's house is located between Peter Hall, a civil rights attorney and Oscar Adams, the first African American Supreme Court judge in Alabama. Due to segregation, African Americans people cannot use public pools so the Adams' put a beautiful in-ground pool in their backyard. Their children taught my sister and I to swim. My father's parents are West Indian immigrants and send all their children (four) to college. My father was born in 1935 and is the youngest of his siblings. He earns a master's and Ph.D. from University of Michigan.

We can only tolerate living in Iowa for two years. We move to Louisiana. Grambling is a culture shock because I discover that not only am I "Northern" I have too many things in common with white people (e.g. musical taste, speech patterns, etc.). While some of the kids give me a bit of good natured grief I am accepted; and do not have to think about race for the first time in my life. It feels safe.

Writing this, I understand how Lula (living in Detroit) can create an African American world. White people represent pain, injustice, and anger and this is before her granddaughter is murdered. Her childhood neighborhood experiences integration and white flight. After Lula, she graduates from high school her interactions with white people are limited. Lula goes to community college in Detroit. Then she attends undergraduate

and graduate school in Detroit. She talks about how racist the professors are in graduate school. Lula's professors treated the African American students differently. She says "the professors will talk to the white girls about their vacations and never engage in conversations with the African American students". When white students talk about their fear/dislike/contempt for African American people (even though most of them have never had a negative experience with an African American person) I am always irritated. How can you form your opinions about a whole group of people based on what someone tells you?

I like to believe that if African American people survived all we have endured in this country and still assess people as individuals surely white people can do the same thing. If I am honest Lula's refusal to think like me is surprising. It should not be surprising because we are different people. One of the things that I learned during my life is how to wear a mask. My mother always says you "learn how to be Black at home". Home is where I can remove the mask. Home can be at work in my office that I share with one of the few African American faculty at the university where I work.

My officemate is from the Caribbean and other than being Black we have very little in common. Home is created in our office the first time another faculty member on our hallway says something racist as though it weren't; my officemate sucks her teeth (as only a Caribbean woman can) I roll my eyes and shake my head. We don't say anything. Our frustration/pain/anger is communicated and home is created in my office.

Upon reflection, I realize that I always have a few white friends but my bar for them is high. I evaluate how they respond to injustice in the United States and in the world. Do they say things that indicate that they tolerate me if I'm not too Black or focused on racial

inequality? Do they think colorblindness is good? Must every discussion about my research be redirected to place that centers White people/women? As I age my mask comes off more often; I have less patience for comments that question the humanity/equality of African American people and or ignorance about white supremacy.

I do think that this part of my interview stands out to me because Lula's perspective is different than mine. I understand Lula's pain and anger but not the completeness or totality of it. But then again, her world, the one she creates is African American. The world I occupy is not. At its core my research is about pain. The pain of trying to be perceived as equally human by people who deny our/my equal humanity. At the beginning of this dissertation, I write the about the connections I am making between articles that I read and my experiences.

The pain that I discuss earlier in my dissertation research project begins long before Lula or I ever existed. At its core my research is about Blackness signifying inhumanity and how these perceptions shape African American women's experiences. Typing that is painful and I keep thinking about Sojourner Truth's speech (1851) "Ain't I a Woman?" Truth's (1851) words are in my thoughts because I must admit to myself that some people still challenge African American people's equal humanity. These challenges are the nucleus of African American women's clubs, respectability politics, and hygiene practices.

Hope from Unexpected Places

When I begin this dissertation project, and researching the dehumanizing stereotypes of African and African American women I am dismayed that not a lot has changed regarding negative depictions of African American women. The stereotypes morph to survive space and time. Assumptions about African American women still

harken back hundreds of years. These stereotypes continue to affect how sexual assaults perpetrated against African American women are ignored or never reported.

Confronting ideas about the unequal humanity of African American people fueled my fear that my ten-year-old daughter wouldn't be a beloved child when her appendix ruptured. I remember worrying about her receiving inadequate pain management after the surgery. I remember feeling relieved when the chief pediatric surgical resident walks into my daughter's hospital room. The surgeon is an African American woman. My relief grows when the surgeon talks about her similarly aged daughter. It may have been unintentional. I will never know for sure but I felt like she was telling me that she saw her beloved daughter in mine. At that moment, I realize that no matter how much education I have or my daughters have they are still subject to the truths about African American women that are accepted as natural.

During a meeting, with one of my dissertation committee members I said that not much had changed regarding negative perceptions about African American women. Ironically, my twenty-one-year-old daughter causes me to change my mind. My daughter calls to say that she is very excited about a speaker coming to her campus. I ask who the speaker is and she said "Cardi B". Cardi B. is a reality television star, former stripper, and aspiring rapper. I am shocked that Amherst College will pay Cardi B. \$15,000.00 for speaking and hosting a party. The following week, my daughter sends a couple of links about Cardi B. talking about the great time she had visiting Amherst College; and explaining that feminism that does include women like her is not feminism (Am 2016; Thompson 2016). Soon after listening to Cardi B. talking about feminism, I see the following meme on Facebook.

Black women need to start a hashtag #ICANBEBOTH where we post pictures of ourselves with degrees, at graduation, sitting in your office, being successful, etc., alongside pics of us partying, dancing, twerking, having fun, as NORMAL HUMAN BEINGS DO.

This idea that you are either a hoe or a sophisticated woman is toxic as hell. It is a racialized version of the virgin-whore dichotomy. I can be both a sexual being and a role model/educator at the same time (posted by Brown Girl Blues) (Dionne 2016).

My epiphany about my relationship to my dissertation topic happens after I read the preceding meme. As an African American woman, I have internalized the truths about women like me; and by doing so I am complicit in my dehumanization. However, Cardi B., Brown Girl Blue's Facebook post, and my daughter, are showing me that I am equally human. I do not have to engage in silence or the culture of dissemblance to resist ideas that were never true.

I am aware of technologies of the self that are replacing hegemonic practices regarding ways to be good or moral African American women. Hair, or the natural hair movement is growing. Hair might seem like an insignificant site of resistance but hair has always been political for African American women. Over the last decade or so, African American women started to embrace their hair in a non-chemically processed state. Natural hairstyles (e.g. braids, dread locs, twists, and knots) are seen on African American women on the street, in advertisements, and other forms of visual media. Research provides the most hopeful data regarding African American women's hair. Mintel (2014) reports that between 2006 – 2011 sales of hair relaxer kits decreased by 17%. This decrease in sales has resulted in a profit loss of 50 million dollars for hair care corporations. I am hopeful that the most important people are decoupling themselves from the truths about African American women. I am hopeful that the reproduction of race through practice will decrease one African American woman at a time.

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ABSTRACT**RITUALS REPRODUCING RACE: AFRICAN AMERICAN WOMEN'S FEMININE
HYGIENE PRACTICES, SHARED EXPERIENCES, AND POWER**

by

ANGELA KRISTINE GUY-LEE**August 2017****Advisor:** Dr. Andrea Sankar**Major:** Anthropology**Degree:** Doctor of Philosophy

This dissertation is an exploration of the role African American women's feminine hygiene practices, namely vaginal douching, plays in the creation and reproduction of race. Compared to their white and Latina counterparts, African American women are the most likely to engage in this practice. Vaginal douching is associated with myriad reproductive and sexual health problems. These problems include but are not limited to recurrent yeast infections, bacterial vaginosis, disrupting healthy vaginal microbiomes, and spontaneous preterm birth; of which African American women experience disproportionately. Although racial differences in vaginal douching are well documented, little is known about the impetus for African American women's vaginal douching practices. I argue that African American women's vaginal douching practices are mutually informed by hegemony and resistance to the historical stigmatization of their sexuality as hyper and deviant. I assert that race is created and reproduced through acts of resistance that are informed by hegemonic thoughts and transmitted through intergenerational

familial sexuality and domestic discourse. Through in-depth interviews and targeted self-care narratives of thirteen self-identified African American women (from various communities in Michigan and between 19-69 years old), I examine women's knowledge, attitudes, and behaviors that women have surrounding vaginal douching. Special attention is paid to conduits of knowledge (i.e. history, family and community members) regarding feminine and domestic hygiene practices. Responses indicate that vaginal douching among African American women may constitute a performance of moral personhood that subtly and overtly challenges socially legitimated discourses about their unequal humanity. Exploring vaginal douching among African American women as an act of resistance to gendered racism, illustrates how concerns about perceptions of their equal humanity, move them to incorporate deleterious practices into their feminine hygiene routines as a means of affirming their morality. However, this act of resistance facilitates the reification of deviant African American female sexuality by placing women at greater risk of negative sexual and reproductive health outcomes. Knowledge gained from this research will provide a foundation on which to build culturally appropriate sexual/reproductive health promotion interventions that empower African American women to challenge their ideals about female cleanliness. In addition, increased awareness of the deleterious consequences related to vaginal douching may encourage African American women to replace this harmful practice with healthful practices that serve the same function. I posit that anthropological research that focuses on the biology of racism - rather than race or racism - provides avenues to explore differential health in human populations by centering the processes of stigmatization and exclusion. Biology of racism reveals historical and structural processes that inform unequal health, explores

how these processes guide health behaviors and practices, and affirms the importance of employing a biocultural approach to examine the human condition.

AUTOBIOGRAPHICAL STATEMENT

The following autobiographical statement provides a history of my research training. I evaluated community based health agencies that receive Block Grants from the City of Detroit (Community Development Block Grant/Neighborhood Opportunity Fund Project, Lyke Thompson PI). As a research assistant for the Dean of College of Urban Labor and Metropolitan Affairs (CULMA) I attend and report proceedings of the Michigan Department of Community Health's meetings focusing on increasing the enrollment of eligible Detroit area children in the State of Michigan's MI CHILD health insurance program.

Conducting qualitative and quantitative data analysis while working for the Adult Onset Mobility Loss NIH funded project (PI Dr. Mark Luborsky) provides essential training in qualitative data analysis and report writing. I receive training in the following areas; medical records abstraction, participant recruitment, and general medical knowledge related to reproductive health while working for the LIFE Study (PI Dr. Dawn Misra).

While completing my dissertation, I taught in the Social and Behavioral Sciences Department at Ferris State University. I teach anthropology, sociology, and African American Studies courses. I am fortunate to teach medical anthropology and anthropology of reproductive and sexuality health courses because they are directly related to my research foci. While teaching at Ferris State University, I partnered with a social work faculty member to develop a Black faculty and student mentoring program. We mentored 25 students and hired 2 undergraduate student assistants. The student assistants were co-presenters at regional and national conferences, prepared a poster for an undergraduate research symposium, and gained research experience.