

The Creation of a Docile Body: What Makes the Practice of Chhaupadi Persistent?

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Abstract

Chhaupadi is a Nepalese patriarchal custom that prohibits menstruating women from participating in daily routines, such as entering houses and temples, touching living plants, cattle, and taps, and eating dairy products. This has led to a number of unfavorable outcomes that threaten the health and safety of women and their babies, leading to it being officially outlawed in 2005. Despite this, the practice persists. Through in-depth interviews with 11 women from a small village in Dhanshingpur, where all residents continue to follow the rules of chhaupadi, this paper explores the complicated mechanisms that maintain the practice of chhaupadi and how it is being reasoned and regulated. In doing so, the paper grounds its discussions in Foucault's conceptualizations of power, ultimately arguing that power can continue to compel compliance with illegal practices through self-regulation and the effect of community surveillance.

Key words

chhaupadi, menstruation taboo, Foucault, biopower, self-discipline

Introduction: The Practice of Chhaupadi

The Nepalese word 'chhaupadi' refers to menstruating women. The Nepalese custom 'the practice of chhaupadi' prohibits women from participating in daily routines during their menstruation period. A series of rules is applied in chhaupadi, although they vary slightly depending on individual families, communities, and regions. Existing studies report the core principles of chhaupadi as follows: A) Menstruating women are restricted from entering houses and temples and from touching men, children, cattle, living plants, public taps, and fruit-bearing trees

* This research has been supported by the AMOREPACIFIC Foundation.

(Kunwar, 2016); B) As entering houses is not allowed, menstruating women spend days and nights outside in places such as cattle sheds. They are expected to engage in hard labor outside their homes, such as digging, collecting firewood and grasses, and farming (Khadka, 2014); C) The practice impacts their diet, as dairy products (butter, milk, and yogurt) are forbidden (Upreti, 2010). Such rules are applied once women start their menstruation, up to 13 days for the first and the second period, seven days for the third period, and four days a month afterwards (Bhandaree, Pandey, Rajak, & Pantha, 2013).

The practice is widespread in Nepal, especially around the Hindu area of the hill districts in the Far-West and some Midwest regions. While national data on the rates of chhaupadi compliance and practice are not available, Achham District reported that around 95% of women followed the chhaupadi practice in 2010 (United Nations Resident and Humanitarian Coordinator's Office, 2011). Furthermore, the practice has recently been brought into the plain belts of the region as the people in the hill districts migrate (Central Bureau of Statistics, 2014; Khadka, 2014). For example, the Tikapur Municipality in Kailali District had 30.1% of women following the practice in 2012 (Yonsei University & TOPEC Engineering, 2012). According to a recent survey conducted in 2017 based on 414 households in Pathariya and Tikapur, there has been an increase of 49% in women who are now practicing chhaupadi (Institute for Poverty Alleviation and International Development, 2017).

This practice has several consequences that threaten the health and safety of women and their babies. Newspapers tell stories of women raped, killed by wild animals, bitten by snakes, or dying of cold during their stay in sheds (Bhandaree et al., 2013). The practice is known to contribute to uterine prolapse in women, menstruation disorders, and a high rate of neonatal mortality (32 deaths per 1000) (ibid.). The Nepalese Supreme Court outlawed the practice of chhaupadi in 2005, and parliament recently passed a bill to stipulate a three-month jail sentence or a fine of 3,000 Nepalese rupees (around \$30) applied to anyone who isolates a woman during her menstruation period (Sedhai, 2017). However, despite punitive legislative and judicial intervention, compliance with this ban has not been successful, and the practice is still widely followed in many regions in Nepal.

In acknowledging that compliance with legal frameworks is a matter that includes many different complex networks of relationships and socio-cultural-historical contexts to fully unravel, this paper explores the continued practice of chhaupadi from a single standpoint: through the words of practitioners themselves. In attempting to do so, we offer a contextualized description of how the rules are being applied to women in this specific community and identify elements that are

flexible and dependent on families themselves. We also discuss how the practice is reasoned by respondents and attempt to evaluate how such reasoning is shaped and regulated both within and outside the community. We present our findings in relation to Foucault's theoretical conceptualizations of power in exploring how women's bodies and behaviors have been subjugated and controlled. The following sections explain how this case study speaks to some of the complexities of our theories of power and agency when discussing the regulation of women's bodies.

Theoretical Framework and Existing Knowledge

Biopower and the Creation of a Docile Body of Women

In attempting to understand how women's bodies and behaviors are controlled in maintaining *chhaupadi*, this paper draws its theoretical insights from Michel Foucault's complex delineation of power, both in a sovereign and biopolitical framework. This conceptualization asks us to consider the diffuse nature of power, its varied manifestations, and its ability to produce normative behaviors.

Biopower, or that which Foucault labels as a "technology of power," organizes human subjects as a population designed to "incite, reinforce, control, monitor, optimize and organize (behaviors)" (Foucault, 1978, p. 136). This conceptualization of power contrasts subtly yet sharply with a more common conceptualization of power: retributive, vindictive, and coercive. Foucault's power stands in opposition to the "repressive hypothesis," understanding power as domination, coercion, and suppression of desire and truth that operate as a form of law, taboo, and censorship (Dreyfus & Rabinow, 1982). Within a Foucauldian frame, this conventional one-dimensional understanding of power, especially in macro-level approaches, focuses on the deductive nature of what is termed "sovereign power" (Foucault, 1978). This type of power "was essentially a right of seizure: of things, time, bodies, and ultimately life itself; it culminated in the privilege to seize hold of life in order to suppress it" (Foucault, 1978, p. 136). Here, power acts as a repressive force that attempts to regulate behavior through the threat of taking away (in contemporary times) freedom and the right to live. It can be argued that judicial interventions and punitive legislative mechanisms draw mostly on the conceptualization of power to regulate population behavior. In the case of *chhaupadi* in Nepal, the expression of state and sovereign power has not been enough to stamp out the practice, despite its clear public health ramifications.

Thus, if sovereign power is marked by the sovereign's right to seize life, bio-

power shifts markedly from this deductive means to one that is inherently productive; its purpose is to preserve life (Harwood, 2009). Biopower governs the behaviors of individuals through complex measures that require us to reconfigure our understanding of power to one that is both omnipresent in spaces in which life is lived, and functions as a technology of production. It is a power that is “taking charge of life [...] concerned with matters of life and death, with birth and propagation, with health and illness, both physical and mental and the optimization of the life of a population” (Dean, 1999, p. 99; Foucault, 1978, p. 143).

One of Foucault’s central themes in this expanded articulation of biopower is the creation of a docile body. Biopower is an attempt to maintain political order. This is achieved through the creation of docile bodies which are “passive, subjugated, and productive individuals” (Pylypa, 1998, p. 22). It should be noted here that a docile body is formed through both sovereign forms of power and biopower. During its deployment, biopower induces self-discipline through surveillance. In many cases, it constructs concepts of normality and deviance, which makes the norms appear moral or “right” (Pylypa, 1998, p. 24). Conformity is then achieved through desire, not coercion or force alone. Disguised as knowledge and desire, power is embedded in everyday discourses and norms, operating in an insidious way, and pushing individuals to produce behaviors that regulate themselves. Thus, this force is rendered somewhat invisible and even elusive to the understanding of the untrained eye. As Foucault (1978, p. 86) states, biopower’s success is “proportional to its ability to hide its own mechanisms.”

Thus, power for Foucault is “dispersed through society, inherent in social relationships, embedded in a network of practices, institutions, and technologies —operating on all of the micro levels of everyday life” (Pylypa, 1998, p. 21). Power is not only imposed by a dominant group, but comes from below (Foucault, 1978, p. 94), because individuals are “both subjugated and constituted through power and an actor who disseminates it” (Lilja & Vinthagen, 2014, p. 3). Essentially, and to put it simply, one outcome of biopower and its operations is that the practice of self-regulation blurs the line between structure and agency. In many ways, disseminating biopower used to regulate bodies is best seen at the family level. In societies where familial structures are at their most influential, the creation of the docile body has been central to maintaining power and control over female bodies in particular (Moon, 2005).

In criticizing the gender blindness of Foucault’s work on biopower and the docile body, King (2004) argues that gender determines the techniques and degrees of discipline to which the body is subjected, as the female body is a particular target

of power and discipline. Women's bodies have been discursively constructed as inferior but also "unknowable, enigmatic, and disquieting" (King, 2004, p. 31) and therefore threatening to man. Scholars have identified a wide range of legitimizations around the subjugation of women's bodies. For example, given the power of defining normalcy and deviancy, science is heavily implicated in the construction of appropriate activities, clothes, and moral obligations for women in order to preserve "womanliness" (Riessman, 1992). Medicine objectifies bodies; in particular, it positions female reproductive bodies under the surveillance of the medical system (Pylypa, 1998). Women's fashion also serves to exaggerate the breasts, waist, buttocks, and hips through corsets, bustles, and bras, which all draw erotic attention to the body but at the same time constrain and correct them (King, 2004). The polished fingernails, high heels or stiletto shoes, corsets, panniers, farthingales, crinolines, and hi-tech stretch fabrics and lingerie in recent years have served to control the unruly parts of the female body in order to achieve the desired shape (Bordo, 1993). The cosmetic industry reinforces the idea that a woman's "duty is to be beautiful" (Wilson, 1985, p. 111) and to avoid exposure to wind, water, and UV rays of the sun in order to look young and fresh (Tseñlon, 1995). Although self-surveillance is promoted as an individual choice and determination, and often internalized as a sign of self-control, discipline, and will power, the end result of such desire is the pursuit of an acceptable body (Crawford, 1984; Tseñlon, 1995).

Chhaupadi and the Regulation of Menstruation

Using a very similar logic, menstruating and menstruating women have long been treated as a threat to culture and society. The practice of chhaupadi is known to stem from a Hindu belief that "menstruation is religiously impure and ceremonially unclean" (Selvi & Ramachandran, 2012, p. 1) which in turn makes menstruating women impure (Sedhai, 2017). Chrisler (2011) highlighted that the positioning of women's bodies as dangerous and polluted stems from patriarchal oppression and uncertainty about whether they have a generic connection to children. Such positioning of women's bodies and menstruation can be found on most continents, including Europe, Asia, Africa, Australia, and America. It creates various superstitions on the negative consequences of menstruation when it is not "properly" controlled. It includes beliefs such as menstrual blood would kill plants or animals when it drops on the ground or in a river, men and animals would fall ill, and food and drinks would go bad when a menstruating woman touched them

(Chrisler, 2011; Frazer, 1951).

While some may feel such control over menstruation is limited to a few extreme cases that only exist in “under-civilized” societies, these practices share the same logical root of oppression and disciplining of women’s bodies that occur in wealthier nations and nations conventionally referred to as part of the West, as a sign of modernity. For example, in many Western nations, any sign of menstruation being exposed is perceived as shameful and embarrassing not only in public (Houppert, 1999; Johnston-Robledo, Wares, Fricker, & Pasek, 2007), but also in private; many men find it embarrassing to buy women’s sanitation products related to menstruation. Taboos around sexual intercourse during menstruation are often still observed due to notions of “uncleanliness” (Johnston-Robledo & Chrisler, 2013). Showing menstrual blood has been discouraged by advertisements of “feminine hygiene” products, by using allegorical images for menses and promoting secrecy around menstruation (Merskin, 1999).

Such construction of normality around menstruation functions as a means of controlling women’s bodies and is one way of curtailing their freedom. It defines what desirable or normal attitudes, and behaviors look like and encourages women to, for example, hide their menstruation, minimize leaks, and avoid certain activities and behaviors (Repta & Clarke, 2013) as if their perfectly normal bodily functions are objects of shame and must be controlled. Restrictions on menstruating women, such as not taking baths, swimming, washing hair, doing heavy housework, playing sports, tending houseplants, eating, or drinking certain things, or not engaging in sexual intercourse, have long and widely been encouraged in many cultures and societies under the name of “being normal” (Chrisler, 2011; Repta & Clarke, 2013).

Research Procedure

This paper explores how the practice of *chhaupadi* operates by drawing from interview data focused on a single Nepalese village as a site of inquiry. We argue that by analyzing the experiences of Nepalese women, who at the time of the study openly admitted to complying with the practice despite its being recently outlawed, we are able to gain a deeper appreciation of the mechanisms of power that operate and can be understood through the actions of the participants. This study’s insights are drawn from an interpretivist approach to knowledge generation, which seeks to understand social actors’ language, meanings, and accounts in the context of everyday activities (Blaikie, 2007). It aims to build theory through the re-

construction of intersubjective meanings ascribed to behaviors by social actors embedded in their everyday language. Interpretivists argue that data researchers have access to reproduced concepts and meanings after social actors interpret and process their experiences. These experiences are then best delivered through their own voices, which places social actors as the primary adjudicators of their own lives and experiences (Ravallion & Lokshin, 1999). The data in this study are obtained directly from key social actors—Nepalese women who continue to practice *chhaupadi*—and the meanings they ascribed to the practice and its values as a social construct reproduced in their own narratives.

The data used to formulate this study were obtained from a research project conducted in a small village located within the Tikapur municipality. There were 65 households and all women in this village were said to comply with the practice of *chhaupadi* during menstruation. Among these, the researcher, a Korean woman, met 11 women who agreed to participate in the research. The participants were recruited using a referral snowball sampling method. A lady and her husband, who were family friends to a colleague of the wider research team, played a key role as local interlocutors in terms of spreading information about the research, recruiting the participants, and building local trust within the community being researched.

The interviews were conducted in a semi-attached room rented for research purposes from the lady and her husbands who played the role of local interlocutor. The room was closed during the interview sessions and the researcher ensured that the conversation remained private and could not be overheard by anyone. The participants, including the lady who owned the house, were provided an information sheet written in Nepalese and English, which explained potential advantages and disadvantages of participating in this research and their right to withdraw at any time. The sheet stated how the research would protect their anonymity and confidentiality. At the beginning of each interview, the researcher read and explained the information sheet, and the participants were then asked to sign a formal agreement on the conditions of the research. Participation in the study was voluntary. In keeping with the principles of research reciprocity and the cultural norms of the local village, a small cash remuneration gift was given to each participant as a token of appreciation for their time.

As it was a small village, all participants lived within walking distance from the research site. Participants were aged 16–46 years. All were from the same caste: Chhetri. Education levels varied widely. The vast majority were housewives whose formal education ended at or below grade 12, except for one student who was still in grade 9 and one teacher who had a master's degree. Some participants had no

formal education, or just one or two years of formal schooling.

The researcher individually engaged with the 11 women, conducting in-depth interviews for up to 2.5 hours each in the closed room. Communication was made in both English and Nepalese, with the help of an interpreter (Nepalese – English – Nepalese) who signed a confidentiality contract. All participants provided permission for the interpreter to be present. The interviews were transcribed by the research team after the fieldwork was completed. To ensure the best possible accuracy of translations, another Nepalese translator reviewed the original recordings of the interviews and made further nuanced changes to the transcripts. The transcripts were then coded for themes used to develop the findings of this study. The research questions that led to the themes were as follows: 1. How do you practice chhaupadi? How did you come to know about chhaupadi practices? 2. How do you feel about the practice? What does it mean to you? 3. What does it mean to others in your community?

Findings

The Rules of Chhaupadi

Interviews revealed that there was no universal rule that standardized the practice of chhaupadi. The overarching rule was that menstruating women must be separated from the rest of the family and from the temple. The specifics of what women were allowed or not allowed to do were designed by their family, but often individually tailored further. Thus, two women from one family, a mother and a daughter, would have different rules applied. Table 1 summarizes the different practices and restrictions observed by participants in this study.

Participants spent different lengths of time under the rules of chhaupadi. Five were subjected to five days of restrictions, two observed it for four days, and three spent three days under chhaupadi restrictions. Similarly, all participants spent their days in chhaupadi in various spaces. Five were restricted to an isolated room (mostly a semi-detached room as part of their house). This “chhaupadi room” was often located at a corner edge of the house and closest to the courtyard. One does not have to step into one’s house to access the room. The participants understood that using this room was safer than spending their menstruating days in cattle sheds. However, they were still not permitted to enter common living spaces such as kitchens and family living rooms. The other six participants were not allowed to enter their house as a whole and had to spend three to five days in an animal shed

Table 1*Summary of the rules of Chhaupadi observed by the participants*

	Rules observed	Numbers of participants
Days under the rule	5	6
	4	2
	3	3
Living space restricted to	Animal shed	6
	Isolated room	5
Entering prayer room/ temple	Not allowed	11
Entering other part of the house except prayer room	Not allowed	5
	Allowed	6
Touching things (hand pump, buffalo, male family members)	Not allowed	5
	Allowed	6
Eating dairy products	Not allowed	2
	Allowed	9

located away from their house or built within their courtyard.

Some rules, such as touching males and/or elder members of the family, hand pumps, cattle, plants, and/or fruit-bearing trees, or having dairy food produced from the family's cattle, varied depending on the family; the temple and prayer room of the house, and the touching of god and goddess statues were strictly forbidden to all participating women during their menstruation periods.

How the Rules of Chhaupadi are Being Reasoned

Participants were subjected to the rules of chhaupadi as soon as menstruation started. They remembered their feelings when they first came to know about such rules, as "sad," "troubled," "abnormal," "unhappy," "shocked," "shy," and "embarrassed." Such feelings, however, assuaged over time as they watched their mothers, sisters, and other community members do the same during their menstruation periods. The participants explained that they now feel "normal" about following the practice. The word "normal" was the most frequent description used by the participants for the practice of chhaupadi.

Participants understood their compliance with the practice in two ways. For some participants, compliance was a religious act, making god and goddesses

happy. They were convinced that violating the rules would make the god angry and result in bad luck; for example, touching a buffalo or a family member would make them sick. As a housewife in her late 30s stated:

I think that people follow this practice to make god and goddesses happy, I also do it for god and goddesses; if you don't follow, it would make god and goddesses angry, it is a sin.

She believed that other people comply with the practice because it makes the gods and goddesses happy. Like herself, many commented on the religious justification of the practice. However, what appeared to be more interesting was that few women described themselves as the main agent of such a belief. Rather, nine out of 11 women consciously and unconsciously referred to it as what their ancestors, parents (in-laws), grandparents, husband, siblings, friends, and other close relatives believed. What the participants think others believed became the main ground of their compliance with the practice of chhaupadi, as they stated.

Because my parents have a strong belief that if girls and women during their menstruation period happen to touch cattle, I have to agree to this practice anyway. (25-year-old teacher)

My grandmother believes that if chhaupadi is not practiced, then it will harm the house and family members... (16-year-old student)

My mother-in-law tends to fall sick when I touch her [during menstruation]. (23-year-old housewife)

This finding suggests that the efficacy of religious narratives is tied to a more pertinent factor that facilitates the continued practice and observation of chhaupadi. This shows how a social practice is deeply embedded and perpetuated through women's close social relationships with family, relatives, and the community in which they live. Complying with the rules of chhaupadi meant being a compliant and "fit" member of the family and the community. This entanglement suggests that the practice may have been reasoned as a way to make gods and goddesses happy, but its practice and the desire to maintain it were also functional and related to maintaining relationships for the women being interviewed in the study. Therefore, challenging the rules of chhaupadi ran the risk of violating the relation-

ships they had with their family and friends. There was harm to the social reputation of their families and themselves, which was repeated across many interviews.

All people in my community obey this rule so I am also compelled. I am worried if I do not follow this, then what would they [my neighbors and community members] think about me. (25-year-old, teacher)

My neighbors judge me like, you are not following the rule, this is bad, you must practice this system, you are not allowed to do this and that...I take this in a normal way. If all my neighbors and community members tell me to do this, then it is necessary to follow this to adjust to this society. (46-year-old housewife)

I am bound by my community rules and culture. How much I tried? I wanted to abolish this custom but ended up being compelled to follow this practice...it's a ritual. It is a tradition that our ancestors started and followed...I do not believe in chhaupadi, but I know that it has been rooted for many generations. So inside of me, it's just a ritual I follow like every other [person] do[es]. (36-year-old housewife)

While the participants who commented above continued to comply with chhaupadi in order to avoid becoming framed as a deviant within the community, others described their obedience and observation as driven by respect for the older generation, who believed in such rules with more vigor than they did themselves. A 23-year-old housewife mentioned that

My husband used to say, don't worry in the future; we will not practice this system. Nowadays, we have a mother[-in-law], so we should not go against the mother. We must respect our mother. If the mother does not like this, let it be. However, in future, we will only be at home. Therefore, in the future, we will not practice this.

One seeks to be a fit member or a respectful person in their social relations; complying with the practice of chhaupadi in this community was critical in maintaining positive social relations as much as it was reasoned to make gods and goddesses happy.

How the Practice is Being Maintained

Participants explained how a number of key “regulators” in their family played a role in maintaining and preserving the integrity of the practice. One or two family members were responsible for teaching and regulating the rules of the practice. In most cases, they were female members of earlier generations, mainly mothers or mothers-in-law. The regulators taught the value of the practice and helped the daughters build a justification for compliance. They decided the extent to which their daughters complied with the rules of chhaupadi by specifying which behaviors would or would not be permitted during menstruation. They ensured that the other female members of the family acted in accordance with the rules.

Interestingly, the role of regulators often involved modification of the rules from the original version they learned from their own mothers. They tailored the rules to their own specific families or sometimes to each female member of the family. For example, participants who performed the role of regulator in their families believed that it was reasonable to reduce the number of practicing days when you were old enough or close to menopause, while young girls needed to adhere more strictly to the rules. Modification of the rules necessarily involves the negotiation process. Regulators often took this negotiating role with the rest of the family, mainly those who had a stronger influence on family decision-making, such as the older generation and male members. Ultimately, the male members of the older generation usually had a final say over the rules of chhaupadi. This explains the nature of the chhaupadi practice as being socially negotiable based on one’s age and power within the family.

Even so, a case of participant and her experience of learning and accepting the practice of chhaupadi shows how the practice can continue to exist over generations, despite its socially negotiable nature. This participant, a 46-year-old housewife, first learned the rules of chhaupadi from her mother when she started menstruating. She remembered how unhappy she was about having to follow such rules and tried to challenge her mother often subversively (by touching forbidden objects, apart from religious items). She, however, came to feel it quite “normal” to follow the rules over time, as she saw her sisters and friends complying, too. People around her friends and neighbors constantly reminded her of how rules should be followed.

She was married at 16. Her mother-in-law taught her another version of the chhaupadi rules specific to her new family. She was uncomfortable with this new rule, as it expected her to spend seven days outside the home, which was two more

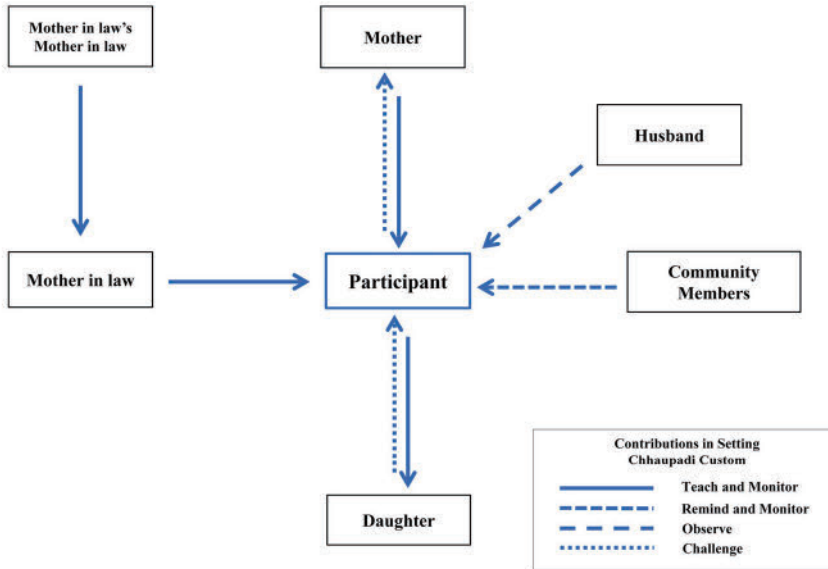


Figure 1. The way the rules of Chhaupadi is taught and monitored

days than her mother had taught her. However, unlike with her own mother, she did not question the new rules of chhaupadi because she felt that she could not challenge her mother-in-law as she did her own mother. She complied with this version of the chhaupadi. Around when her own daughter reached age 25, she was able to persuade her husband and mother-in-law to gradually reduce the days she was required to comply from seven to three. At the point of family decision-making, her father-in-law had been passed away. She felt that it was okay to reduce the length of her compliance as she neared menopause. However, she now applies her maternal version of the practice to her daughter and makes her daughter comply for five days, as she feels it is necessary to apply stricter rules to the young.

Figure 1 summarizes how family members and relatives have taught and monitored the practice of chhaupadi for her and how she herself came to teach the practice of chhaupadi to her daughter.

When she reasoned her compliance with the practice in the interview, she referred to it in both religious and social ways. She did not want to make her gods and goddesses angry, but also wanted to be a compliant member within the family. However, what rationalized and maintained her role as the regulator of her family's practice and motivated her to teach her daughter how to "properly" follow the

rules was very much related to a desire for her daughter to have good relationships with people and enjoy a good reputation as a “fit” member of this community.

When complying with the rules of chhaupadi was understood as a prerequisite for being a good and fit member of a society, accepting and complying with the practice became normal and even moral and desirable. Indeed, most participants explained that their compliance was self-driven after a period of adjustment at the beginning of their menstruation cycles. As a 37-year-old housewife explained:

My husband told me to reduce the number of days I practiced the rules of chhaupadi. He says there is no need for separation, I do not need to be isolated, he is saying, you can stay with me and sleep with me. However, I believe that being with her husband is not good at the time of menstruation. I must be isolated. So, I isolated myself for three days.

Regardless of the reasons behind the continued practice, most women felt that their compliance with the rules of chhaupadi was acceptable, normal, or good. One woman highlighted that it is desirable because it was about “sanitation and cleanliness,” as much as it was about gods and goddesses. For a few, the belief was so strong that they suggested that they would never enter the prayer room while menstruating, even if the entire community decided not to follow the rules of chhaupadi one day.

Concluding Discussion

This study explores the complicated mechanism that maintains the practice of chhaupadi, a series of rules applied to menstruating women that restricts their daily activities. While many studies have identified the religious roots of the practice (Hembroff, 2010; Narayanan, 2005; Sedhai, 2017), such approaches only provide a partial explanation for the persistence of the chhaupadi practice and the willingness of communities to comply with the rules despite its being outlawed. This paper argues that we can better understand chhaupadi practice by focusing on how the reasoning and regulating process of the practice is embedded in families and social relationships. Here, Foucault’s work on biopower and the docile body provides a useful conceptual framework that explains how power can control and regulate people and their behavior without coercive measures having to be used. Rather, what this study highlights is that when coercive punitive measures such as legal regulation threaten people with a fine for practicing social behaviors, bio-

power can continue to compel compliance to illegal practices through self-regulation and the effect of community surveillance. Exploring the complicated mechanisms that maintain the practice in a small village in Nepal, this study has the following implications.

First, the practice of chhaupadi shares a logic similar to that of other social and political controls over women's bodies (Bordo, 1993; King, 2004; Pylypa, 1998). On the surface, discourses around menstruation position menstruating women as a threat to society and, therefore, legitimize the control of women's bodies, as they are believed to be polluted and dangerous. Thus, it seems desirable and moral to control their bodies to ensure the well-being of the community. In theory, if one were to violate the rules of chhaupadi, it would make these women responsible for jeopardizing the health and well-being of their family members and the community; she in turn would become an "unfit" person and would face a spoiled reputation.

Second, the practice of chhaupadi and the mechanism behind its operation demonstrate the features of biopower. Biopower enlightens us on how power can be transformed into knowledge and desire, which constitute humans as subjects (Foucault, 1975/1995). While complying with the practice of chhaupadi was described as the desirable and moral thing to do by their families and members of the small community, it quickly became a normal and doable custom that contrasted sharply with its framing as a sad, troubled, shocking, and embarrassing experience for the participants. This then builds a system of self-discipline in which women feel that compliance is moral and desirable, regardless of whether this expression of morality is associated with the act of compliance itself or out of respect for the older generation. This may present their compliance as an exercise of agency and "choice," which assigns them a regulating role later for their daughters or daughters-in-law when they got older and obtain a stronger voice within the family or community. As Fox (1977, p. 806) highlighted, the practice of chhaupadi is a key example of a normative restriction created and reinforced by "social and cultural elaborations," which construct a role for women that requires them to behave as a "good girl" so that they can comply with the rules of society that control and regulate their body and behaviors.

The findings also suggest that the rules women followed often represented directives given by "regulators" of the practice who were often able to persuade individual women of the family by exercising their level of seniority within their family. These regulators had their level of power and influence increased as they aged and so too the respect given to them by others in the family and society as a

whole. This shows how power flows within the families of this village, from the elders to the young, as supported by many cultural studies finding age as the locus of power and authority in most cultural settings (Condon & Yousef, 1975). The patriarchal order of power was obvious in all ways. Men (father or father-in-law) have the final say over the family rules of *chhaupadi*, even when the regulators who teach and monitor the rules are mostly women (mother or mother-in-law). However, in many families, the authority of seniority exceeds the patriarchy, as the voice of the mother-in-law was stronger than that of the husband. What appears to be more interesting is the power imbalance between women of the same generation, and how it reflects the power of patriarchy. As discussed in the case of a 46-year-old woman, women felt that they could challenge their maternal mothers, but not the mother-in-law. This shows that women gain more power after giving birth to a son than after giving birth to a daughter.

Third, the way biopower is in operation seems to be strong enough to address the policy of non-compliant behaviors of the residents in this village. As discussed earlier, *chhaupadi* was outlawed in 2005, and anyone who “forces” women to follow the practice faces a fine of 3,000 Nepalese rupees or a three-month jail sentence. This suggests that the legal change continues to contend with the bio-powered mechanism of the practice embedded in the village’s customs and beliefs. In addition, the residents of this small village risk the possibility of indictment by not following the relatively new law. As Jun and Jang (2018) explain, the practice of *chhaupadi* is deeply embedded in social relations (bonding social capital) and the fear of being regarded as deviant within a small community can perhaps be stronger, compared to that of the stigma of being a law breaker. This is an important consideration. The implication of this finding suggests that Foucault’s framework can help us understand why the practice has largely escaped discipline through punitive measures. It works against biopower-induced self-compliance generated from social discipline maintained through surveillance and normalization. It also suggests that in a closed society with strong familial ties, the hierarchical relationship between family members means biopower mechanisms may in fact be antithetical to forms of sovereign power, such as legislative and punitive threats.

Fourth, the paper shows, albeit in a limited way, that the practice of *chhaupadi* is a complicated process, impacted and evolving due to multiple factors and actors. It is often challenged, negotiated, and transformed as a consequence. In this process, women are not merely passive followers. They often attempt to subversively challenge the rules imposed on them and persuade other family members who have a stronger influence on their families. In fact, some participants achieved a

gradual reduction in their days of compliance with age. This shows that while the practice can sometimes be described as seeming singular and set-in stone, it is much like other social phenomena in all societies, which are reshaped and can be transformed over time. While chhaupadi is undoubtedly a complex, shifting, and reshaping practice that leaves much space for interpretation, this paper has focused on understanding the mechanisms that keep chhaupadi alive in rural Nepal. The gaps this paper leaves then call for further research in this space that might allow us to better understand how the practice is being challenged, negotiated, and transformed. Further scrutiny of this transformation of the practice and how it has been achieved by the practitioners themselves in this small community could lead to an effective deterrent to the continued existence of this practice and its public health ramifications.

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