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Blood and Burden: Menstrual Stigma and Intellectual Disability in Aparna Singh’s “Death Wish”

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Abstract: This paper examines the intersection of intellectual disability and menstrual stigma in Aparna Singh’s “Death Wish,” a chapter from the short story collection *Periodic Tales* (2022). Through the figure of Saumi, a twenty-five-year-old intellectually disabled woman raised by a single father and subsequently placed in an understaffed foster care facility, Singh constructs a narrative that exposes the compounding oppressions borne by disabled menstruating women within familial and institutional structures in India. Drawing on Rosemarie Garland-Thomson’s concept of misfitting, the paper argues that Saumi’s body is rendered perpetually incompatible with every environment it inhabits, domestic, institutional, and cultural, not through personal failing but through the systematic refusal of those environments to accommodate non-normative embodiment. Complementing this framework, Johnston-Robledo and Chrisler’s theory of menstrual stigma illuminates how Saumi’s intellectual disability denies her the menstrual socialization, bodily literacy, and communal support that might otherwise partially mitigate the shame and secrecy culturally imposed on menstruating bodies. Michel Foucault’s biopolitical framework further reveals how the foster care home manages Saumi as a population to be contained rather than a person deserving dignity. Together, these frameworks demonstrate that Singh’s narrative is not merely a portrait of individual suffering but a structural critique of whose bodies are deemed worthy of care.

Keywords: *Intellectual Disability, Menstrual Stigma, Misfitting, Biopower*

Introduction

Menstruation is traditionally seen as “polluting,” casting the menstruating body as pathological, abnormal, and unhygienic (Manorama and Desai). In a patriarchal society, menstruation, though a natural biological function, limits one’s participation in social, religious, and familial spaces (Kamat and Tharakan 261–268). Likewise, a disabled body in an able-bodied world is pushed to the periphery, creating a precarious, uncertain existence (Das 103–130). There remains a system of beliefs that “not only signals disability as a form of difference but constructs it as inferior” (Ben-Moshe 16). When menstruation and disability intersect in one person, it creates a doubly silenced predicament. Menstruators with disabilities report feeling like they have to comply with the norms of able-bodied menstruators, giving rise to different forms of discrimination and marginalization (Steele and Goldblatt 77–79).

Many menstruators with disabilities experience shame around menstruation, are embarrassed about the “burden” of their menstrual experiences on their caregivers, and are concerned about breaching menstrual etiquette around hygiene (Thakur and Mishra 1–15). Introducing a disability perspective also permits us to interrogate why popular depictions of the menstruating body are inadequate, how they continue to reinforce and romanticize values like independence and productivity, and validate structures that grant power and privilege to those values (Nair 181). The goals of the menstrual activism movement are to challenge the representation of menstruation, push past stigma to have meaningful conversations about body literacy, create safe and effective products to manage menstruation, and challenge the manipulation and suppression of menstruation (Bobel 8). However, the menstrual activism movement has been criticized as being primarily white, heteronormative, and able-bodied (Bobel 135).

Understanding this critical lacuna in menstrual studies, this paper intends to investigate the menstrual experience of a twenty-five-year-old woman with intellectual disability. The story “Death Wish” is part of Aparna Singh’s collection, *Periodic Tales*. Occupying a peculiar space at the intersection of fiction and feminist social commentary, the collection challenges the persistent social silencing surrounding menstrual health in the Indian context (Manorama and Desai). The chapter fourteen titled “Death Wish” stands apart for its bold entry into an uncharted territory, which is the lived menstrual experience of an intellectually challenged woman, Saumi, whose bodily vulnerability is compounded by menstrual stigma and lack of hygienic institutional support (Manorama and Desai). The paper establishes its theoretical foundations in Rosemarie Garland-Thomson’s concept of misfitting and Johnston-Robledo and Chrisler’s menstrual stigma framework, before moving to

examine how Saumi's disabled body is constructed as socially deviant, useless, unproductive, and institutionally burdensome.

Theoretical Framework

Fitting and misfitting in "Misfits" denote an encounter in which two things come together in either harmony or disjunction. When the shape and substance of these two things correspond in their union, they fit (Garland-Thomson, "Misfits" 592). A misfit, conversely, describes an incongruent relationship between two things: a square peg in a round hole. Misfits are inherently unstable rather than fixed. The discrepancy between body and world, between that which is expected and that which is, produces fits and misfits. The utility of the concept of misfit is that it definitively lodges injustice and discrimination in the materiality of the world more than in social attitudes or representational practices, even while it recognizes their mutually constituting entanglement (Garland-Thomson, "Misfits" 593).

The analytical scaffolding of this paper draws from three intersecting theoretical frameworks: feminist disability studies, critical menstrual studies, and Foucauldian biopolitics. Together, these frameworks illuminate how Saumi's intellectually disabled, menstruating body in Aparna Singh's "Death Wish" is rendered socially unintelligible, institutionally neglected, and personally burdensome—not through individual failure but through the cumulative weight of cultural, medical, and institutional systems that have never been designed to accommodate her.

Rosemarie Garland-Thomson's feminist materialist disability theory serves as the paper's primary framework in disability studies. In her foundational work *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature* (2017), Garland-Thomson introduces the concept of the "normate"—the idealized, able-bodied, self-sufficient subject against whom all non-normative bodies are measured and found deficient. Her later concept of "misfitting," developed in the essay "Misfits: A Feminist Materialist Disability Concept," argues that disability is not located in the body alone but emerges from the profound incongruence between a non-normative body and the environment it inhabits. As Garland-Thomson explains, a misfit occurs when "the environment fails to sustain the shape and function of the body that enters it" ("Misfits" 594). Saumi's experience across familial, foster care, and social spaces is a sustained enactment of this misfitting—her intellectually disabled, menstruating body consistently fails to meet the normative expectations of daughter, ward, and woman.

Complementing this framework is the work of Ingrid Johnston-Robledo and Joan Chrisler, whose essay "The Menstrual Mark: Menstruation as Social Stigma" provides the paper's central menstrual studies lens. Drawing on Erving Goffman's sociology of stigma, Johnston-Robledo and

Chrisler argue that menstruation functions as a culturally produced “spoiled identity”(182), a biological process coded as shameful, dirty, and requiring compulsory concealment. They identify the “culture of concealment”(326) as the dominant ideological framework through which menstruating bodies are disciplined into silence and invisibility. For an intellectually disabled woman like Saumi, who lacks both the cognitive resources and the social support to perform this demanded concealment, menstrual stigma operates not merely as social discomfort but as a profound assault on bodily dignity. As Johnston-Robledo and Chrisler observe, menstrual stigma “can have negative consequences for women’s psychological well-being and physical health” (9), consequences that are exponentially intensified when the woman in question is additionally marginalized by disability and institutional neglect.

The Indian cultural context of Singh’s narrative demands engagement with Anita Ghai’s *Rethinking Disability in India* (2003), which examines how disability in India is compounded by cultural frameworks of karma, shame, and familial honour. Ghai argues that disabled women in India occupy a position of double marginalization—invisible within mainstream feminism and voiceless within disability advocacy, and that their bodily experiences, including reproductive and menstrual lives, are systematically excluded from both clinical and cultural attention.

Michel Foucault’s conceptualization of biopower and discourse, as elaborated in *Discipline and Punish* (1977) and *The History of Sexuality: Volume 1* (1978), provides the paper’s overarching theoretical architecture. Foucault defines biopower as “an explosion of numerous and diverse techniques for achieving the subjugation of bodies and the control of populations” (140). Applied to menstrual experience, this framework reveals how cultural, religious, medical, and industrial discourses collectively construct the menstruating body as polluted, shameful, and requiring management.

Alison Kafer’s *Feminist, Queer, Crip* (2013) extends these frameworks by introducing the concept of crip futurity, the insistence that disabled lives contain desire, possibility, and becoming, against a culture that imagines disability as a foreclosure of livable futures. Martha Nussbaum’s capabilities approach, articulated in *Frontiers of Justice* (2006), further grounds the analysis in a rights-based framework, insisting on every person’s entitlement to bodily health, integrity, and dignity regardless of cognitive capacity. Both frameworks stand as direct rebukes to the institutional conditions Singh documents in “Death Wish.” The ambiance of foster care reflects institutional neglect. As Saumi’s father observes, “women were roaming around in wild abandon” (Singh 116). He glimpses a woman, dishevelled and embracing the sink. Nearby, a girl of Saumi’s age has a blood stain on her

skirt: “It was almost the same colour as her skirt: a deep brown, the colour that appears with long-unwashed, long-settled dirt.” The caretaker seized her and forced her away (Singh 116-117).

The Absent Mother and the Gendered Infrastructure of Menstrual Knowledge

Aparna Singh’s “Death Wish” opens with a sentence that immediately establishes the terms of its central predicament: “Being an only parent, that too a father, to a differently abled girl is not easy” (Singh 113). This deceptively simple declaration carries within it the full weight of the narrative’s emotional and ideological terrain. It announces, before the story has properly begun, that what follows is a story shaped by absence, the absence of a mother, the absence of conventional caregiving structures, and ultimately, the absence of a cultural language adequate to the experience it describes.

Saumi’s mother dies when Saumi is still a toddler, and the aftermath of that death is rendered in one of the narrative’s most haunting images: the child sitting on her mother’s cot, smelling the sheets, clawing at them with her nails until they crack and bleed (Singh 113). This image of the child drawing blood from her own fingers anticipates the menstrual blood that will later structure the narrative’s central crisis. Blood, in Singh’s story, is never merely biological; it is always already entangled with loss, with the body’s uncontrollable processes, and with the inadequacy of the care structures surrounding Saumi. That the first blood Saumi encounters after her mother’s death is her own menstrual blood, and that it makes her cry “like she was still a toddler, a little girl who had seen death” (Singh 114), suggests that menstruation, for Saumi, reactivates and compounds the original wound of maternal loss.

The absent mother in “Death Wish” is not simply a biographical detail but a structurally significant absence that exposes the gendered infrastructure of menstrual knowledge transmission. Saumi enters menarche without preparation, without language, without the embodied knowledge that a mother’s presence might have partially supplied. What she receives instead is her father’s silent prayers: “Every day, as her body responded to nature’s clarion call, I muttered silent prayers” (Singh 114), prayers that are themselves a form of helplessness, a reaching toward the divine in the absence of any human framework adequate to the task.

The father’s acknowledgment that “A caregiver’s requisite, a responsibility that should have been her mother’s, was foisted on me” (Singh 114) is one of the narrative’s most analytically significant moments. The word “foisted” conveys not rejection but displacement, the sense of a responsibility arriving in the wrong hands, through no fault of either party. The father does not refuse this responsibility; he weeps alongside Saumi when she first bleeds, changes her pads, washes her,

ensures she stays clean (Singh 115). His love is palpable and his commitment genuine. Yet the narrative is equally honest about the limitations this displacement produces.

The Father's Gaze: Paternal Narration and the Silenced Disabled Female Body

The entire narrative of "Death Wish" is filtered through the father's consciousness, and this narrative choice produces a text of profound and productive ambivalence. The father is simultaneously the most loving presence in Saumi's life and the agent through whose gaze her bodily experience is mediated, interpreted, and inevitably distorted. "At times, her eyes glittered with a deep sense of knowing and, at others, it was opaque, refusing access to us 'normals'" (Singh 114). In this single observation, the father captures the central epistemological problem of his narrative position: Saumi's interiority is not absent, but it refuses translation into the normative frameworks through which he, and the reader might access it.

Yet the father's gaze is also, crucially, a loving gaze. When Saumi first bleeds at thirteen, the father does not respond with disgust or distance but with tears: "I cried with her too. I didn't know why. The tears refused to stop" (Singh 114). And in one of the narrative's most extraordinary moments, it is Saumi who comforts him: "She patted my head, consoling me as it were" (Singh 114), inverting the expected caregiving dynamic and asserting her own emotional intelligence and relational capacity.

The father's narration also reveals the deeply gendered social pressures that circumscribe his caregiving. His acknowledgment that "Taking care of her as a father was a painful rediscovery of the thresholds of our socially prescribed relationships" (Singh 115) points directly to the way in which menstrual care is culturally constructed as exclusively feminine territory. The father's ultimate decision to place Saumi in foster care emerges directly from this impossible position: "My own limitations as a father came knocking on me every month as I became increasingly conscious of them" (Singh 115–16). The monthly rhythm of menstruation becomes the rhythm of his own inadequacy, each cycle a renewed confrontation with what he cannot provide.

Menstruation and Intellectual Disability: The Unwanted Body

Saumi's relationship with her menstruating body is one of the narrative's most carefully observed dimensions. From her first menstruation at thirteen, when she soils her salwar and wails, crying "like she was still a toddler" (Singh 114), to her monthly tears at twenty-five, Saumi's menstrual experience is characterized by pain, confusion, and an inability to integrate the monthly bleeding into any framework of meaning or normalcy. "Her brain refuses to make much of shame," the father observes, "more so the shame associated with the female body" (Singh 115). When the sanitary pads bother her, Saumi throws them out of the window, "mostly in fits of anger" (Singh 115). This act of disposal can

be read through Garland-Thomson's framework of misfitting as a profound, if unwitting, act of resistance. The sanitary pad, that product of what Karen Houppert has called "the culture of concealment", is the material embodiment of the demand that the menstruating body manage and hide its own processes. Saumi's rejection of it is a rejection, however involuntary, of the entire ideological apparatus of menstrual shame that the pad represents.

Johnston-Robledo and Chrisler's framework of menstrual stigma is particularly illuminating here. For Saumi, each dimension of stigma is intensified: she receives no menstrual education; she has no community of women with whom to normalize the experience; she has no language for what her body does each month beyond pain and confusion. And in the foster care home, she is placed among other intellectually disabled women who are equally without resources, women who, the father observes, "probably had very little understanding of things their body put them through every month" (Singh 116). The caretaker's "puzzled look" (Singh 116) at his inquiry about menstrual management confirms that the institution designed to care for these women has given their menstrual needs no consideration. "She is twenty-five now. Every month, she cries when she bleeds" (Singh 115). This spare, recurring fact becomes the narrative's most damning statistic: twelve years after menarche, nothing has changed. No institution, no system, no cultural framework has intervened to provide Saumi with the literacy, the support, or the dignity that might transform her monthly experience of terror into something manageable. The bleeding continues; so does the weeping; so does the institutional silence.

Institutional Neglect and Foster Care: Warehoused and Forgotten

The father's visit to the foster care home constitutes the narrative's emotional and ideological climax. The physical conditions are described with spare but devastating precision: "Used pads, dirt and filth. The bathrooms had not been cleaned for ages" (Singh 117). Women roam around "in abandon" (Singh 116). A young woman Saumi's age runs toward the father with blood on her skirt, but "unlike Soumi, the very sight of it amused her" (Singh 116–17). This contrast is not a hierarchy of suffering but a spectrum of responses to the same institutional failure. Both women are denied adequate menstrual care.

When the warden responds to the father's complaint with "There's nothing more we can do, Dada. We have been doing our best" (Singh 117), the narrative exposes the institutional normalization of this violence: neglect is reframed as effort, inadequacy as best practice, and the dignity of these women is quietly evacuated from the conversation. The foster care home does not actively harm these women through deliberate cruelty; it harms them through the systematic assumption that their bodies do not require the same standards of care, hygiene, and dignity that normative bodies demand.

The father's haunting question :“Did she think that I had failed her?” (Singh 118), transforms the narrative's political critique into personal anguish. Saumi's “vacant look” as she says “Let's go, Baba” (Singh 117) in her first words after three silent hours in the foster care home is among the most quietly devastating moments in the text. The narrative refuses to resolve this ambiguity, leaving the father, and the reader, with the discomfort of uncertainty: what did Saumi understand? What did she feel?

Reclamation and Resistance: Beyond Burden

Any reading of “Death Wish” that reduces Saumi to pure victimhood misses the narrative's most quietly radical gestures. The most striking of these moments occurs immediately after Saumi's first menstruation. The father, overwhelmed by grief and helplessness, breaks down and weeps. It is Saumi who recovers first. “She patted my head, consoling me as it were” (Singh 114), and in this simple gesture the narrative's power dynamics are quietly inverted. This moment resists every cultural assumption about intellectual disability: the assumption of passivity, of emotional shallowness, of an inability to perceive and respond to another's distress.

Alison Kafer's concept of *crip futurity* serves as an illuminating lens in Saumi's case. Dominant culture imagines disability as a condition without a liveable future, a foreclosure of possibility, desire, and becoming. Yet Saumi refuses this foreclosure in small but consistent ways. Her eyes “glittered with a deep sense of knowing” (Singh 114), a knowing that refuses translation into normative frameworks but that is nonetheless real, present, and irreducible. Her body refuses the sanitary pad, refuses clothes, refuses the civilizational demand for shame (Singh 115). Whether these refusals are read as symptoms of intellectual disability or as a form of bodily sovereignty that her cognitive difference paradoxically enables, they constitute a sustained, if unwitting, resistance to the disciplinary apparatus that menstrual culture imposes on all women.

It is also worth noting that Singh's choice to tell this story at all constitutes a form of literary reclamation. The experiences of intellectually disabled women, their menstrual lives, their relationships with their bodies, their emotional worlds, are almost entirely absent from Indian feminist fiction. By placing Saumi's story within a collection explicitly dedicated to menstrual narratives, Singh insists on the inclusion of intellectually disabled women within the category of menstruating subjects whose experiences deserve literary attention and feminist analysis.

Conclusion: Toward a Crip Menstrual Justice

“Death Wish” ends not with Saumi’s voice but with her father’s and with his wish for his own daughter’s death. “As a parent, asking a death wish for his daughter might sound incredibly far-fetched and cruel too. But I can still wish for myself” (Singh 118). This ending is, in its quiet way, as politically charged as anything in the narrative. The father’s death wish is not despair for its own sake but the logical conclusion of a situation from which no exit has been provided: a situation of total caregiving responsibility, total cultural isolation, and total institutional inadequacy.

“Death Wish” operates as a sustained literary indictment of the interlocking systems, cultural, familial, and institutional, that deny intellectually disabled women like Saumi their most basic claims to bodily dignity and menstrual justice. Through the concept of misfitting, the paper has shown how Saumi’s body is consistently rendered incompatible with its environment: a body that cannot conform to the normative expectations of hygiene, concealment, and menstrual management, and for whom no environment has been redesigned to accommodate difference (Garland-Thomson, “Misfits” 591–609).

Through Johnston-Robledo and Chrisler’s framework of menstrual stigma, the paper has demonstrated how Saumi’s intellectual disability compounds an already stigmatized bodily experience, denying her the menstrual socialization, education, and community support that might partially mitigate the cultural shame attached to menstruation. The absent mother, whose death before Saumi’s menarche forecloses the primary channel through which menstrual knowledge is transmitted in patriarchal societies, is read not as personal tragedy alone but as a structural symptom.

The foster care home, read through the ethics of care and the capabilities approach, emerges as a site of institutional violence, not the dramatic violence of deliberate cruelty but the quiet, grinding violence of systematic neglect, underfunding, and the cultural devaluation of intellectually disabled women’s lives (Singh 116–117). Saumi’s story does not offer solutions. It does something more important: it makes the failure of existing solutions impossible to ignore. In the gap between the death wish of an exhausted father and the vacant look of a daughter who has just seen her future institutional home, Singh locates the full measure of what society owes to its most marginalized members, and the full measure of what it has, so far, refused to give.

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