

Plan International UK



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INTRODUCTION

For over 80 years, Plan International UK has worked to deliver and protect the rights of millions of children around the world, and to address gender inequality. We are the global experts on girls' rights.

Decades of global experience tell us that due to their gender and their age, adolescent girls are particularly vulnerable to having their rights denied. In 2016, our State of Girls' Rights in the UK report¹ showed that here in the UK there are also specific challenges for girls, as well as many of the same problems of gender-based violence, discrimination and gender stereotypes that hold girls back around the world. Girls are not only feeling unsafe in schools, on the streets and online, but their education, career choices and ability to be heard are also being negatively impacted. Having listened to the concerns of girls in the UK about their rights more broadly, Plan International UK wanted to explore some areas of specific concern more thoroughly, such as digital rights, street harassment and relationships and sex education. This report therefore seeks to examine a key issue for girls – menstrual stigma and taboo - and expose the negative impacts on their lives and the solutions that could challenge this stigma and address its impacts.

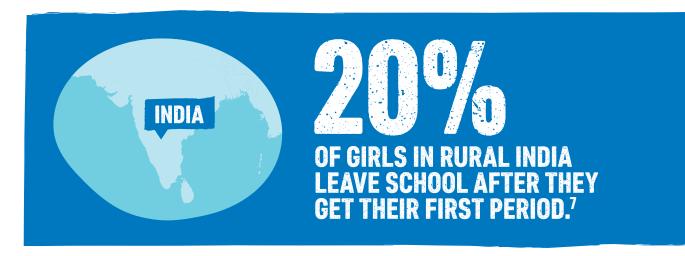
For centuries, menstruation has been a hidden topic – dealt with in silence, rarely spoken about and then only in female company – as well as a topic of shame and embarrassment. Menstrual stigma is often internalised by individuals and reproduced in societies across the world, and generates a number of negative impacts which can reduce health outcomes, well-being and self-esteem.

Plan International UK works on menstrual health management around the world and this global work on ending menstrual stigma In our research in Bangladesh² we have seen that adolescent girls and women face a range of challenges during their menstruation which prevent them from realising their rights and contributing to society:

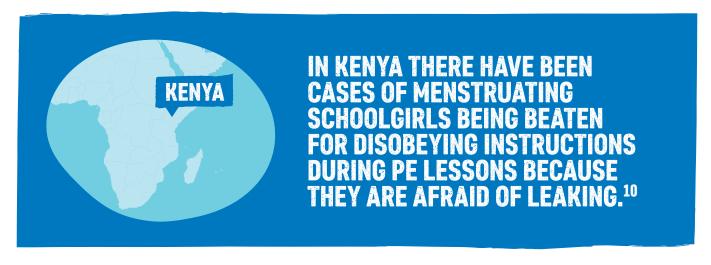
- A widespread context of silence and shame.
- A lack of accurate information about menstruation at home or at school, with information based on changing social norms and cultural beliefs.
- A resulting set of extensive restrictions that prevent girls from taking part in normal daily activities such as family life, education and participation in social activities.
- Multiple barriers at schools including a lack of running water, bins for disposal and a lack of emergency supplies of menstrual 'napkins'.

and taboo was the inspiration for us to turn the spotlight on the UK. Equally, it is important to locate the UK context within that of the wider global situation. Nearly half of the world's population menstruate at some point in their life and yet there are secrets, myths and taboos all around the world about this natural process.

Menstruation is an educational and socioeconomic issue across the world, not just a monthly biological event. Girls all over the world suffer during menstruation because of religious or cultural norms which often







derive from patriarchal notions about a woman's status and place in society.^{3,4} An extreme example is the practice of 'chaupadi' in Nepal, where girls and women are forced to retreat to special huts and sleep on their own while menstruating. In an encouraging sign, and after much local-led advocacy, this practice was outlawed by the Nepalese government in August 2017.⁵

One major global issue is around access to education about menstruation:

- 48% of girls in Iran, 10% in India and 7% in Afghanistan believe menstruation is a disease; and
- 51% of girls in Afghanistan and 82% in Malawi were unaware of periods before menarche (first period).⁶

For many girls in the Global South, accurate education is not readily available at schools or from their families. Both girls and boys lack the right information to reduce misconceptions and stigma. Alongside this comes the challenge for girls of managing menstruation in a school environment, which can lead to low attendance or school dropout. The reasons for this include inappropriate water, sanitation and hygiene (WASH) facilities within schools; a lack of affordable and appropriate materials to manage menstruation; fear of embarrassment from leaking in class; and even families deciding menstruation is a sign that their child is ready to be married.

As we know that education and family planning are key factors in determining future income and health outcomes, the impact of menstruation upon education access

and achievement is a significant area that should be addressed more urgently.

Despite this significance, menstruation has historically been overlooked in development policies and agreements. Even those nominally focused on women or on sanitation and hygiene have previously ignored menstrual health. Recent strategies of the World Health Assembly, including the Global Strategy for Women's, Children's and Adolescents' Health 2016-2030, do not mention menstrual health. 11 Furthermore, although there is no specific goal or indicator for menstrual health management in the UN Sustainable Development Goals (SDGs) agreed in 2015, menstruation will impact on the following goals: good health (goal 3), quality education (goal 4), gender equality (goal 5), clean water and sanitation (goal 7), good jobs and economic growth (goal 8) and responsible consumption (goal 12).12

More positively, in 2014 the UN Human Rights Council acknowledged, for the first time, that lack of menstrual health management and stigma associated with menstruation both have a negative impact on gender equality.¹³ And in the same year, WASH United declared an annual Menstrual Hygiene Day on 28 May. Menstrual Hygiene Day is now celebrated by 380 partner organisations all over the world, 14 and many developing and developed countries are now including or strengthening menstrual health management in their global sanitation, hygiene and sexual health policies/strategies. Increasingly, new global and national alliances are being formed to bring menstruation to the forefront of the political agenda e.g. The Menstrual Health Hub¹⁵ and The Menstrual Hygiene Alliance.¹⁶

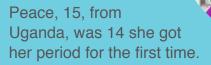
PLAN INTERNATIONAL'S WORK AROUND THE WORLD

In our global programming, Plan International UK recognises the importance of menstruation in all aspects of a girls' life. This can be from education and health outcomes, to the ability to participate in society and economic activities, to their dignity.

We work to ensure the following:

- Girls have access to female-friendly sanitation facilities at home, school and at the workplace;
- Girls, boys, women and men have improved knowledge and skills regarding menstruation through community and school platforms;
- Girls have improved access to sanitary products that are affordable and meet their needs, or know how to safely manage menstruation using existing practices; and
- A positive environment surrounding menstruation, for girls, boys, women and men. We also work to break the silence and dispel stigma and shame.

UGANDA: "WHEN I AM BLEEDING I DON'T GO TO SCHOOL"



"When I am bleeding I don't go to school. I'm afraid it will get onto my uniform, and that the whole class will laugh. I put rags in my underwear, but that does not really help much."

Plan International UK works with girls around the world to help them understand what their period is and what to do when they have them. We construct girl-friendly toilets in schools and communities and increase access to sanitary products like Afripads, so girls don't need to make do with unhygienic materials like the rags Peace has to use. And we talk to boys and men, so they're more likely to spend money on sanitary products for their families.

ROHINGYA CAMPS: "WHEN WE FIRST ARRIVED, THEY DIDN'T HAVE ANYTHING"

For young women, in the Rohingya camps, it's infinitely more difficult to manage their periods while living in the crowded and unsanitary camps in Cox's Bazar. They are up against cultural norms that stigmatise periods and a constant shortage of pads or clean cloths, no medication for cramps and the conundrum of where to dispose of their used products. "When we first arrived, they didn't have anything" Nurankis, 15, explains. So many girls had to borrow from friends or just bleed into their underwear.

Plan International is currently distributing 10,000 menstrual hygiene (or 'dignity') kits. The kits include washable cloth as a sustainable alternative to pads that can be reused and won't clog the latrine systems or cause environmental issues.

METHODOLOGY

In addition to conducting a literature review to understand the existing research, we held a number of focus groups in England and Northern Ireland. Due to time constraints, we were unable to hold focus groups in Scotland or Wales. We spoke to 84 young people, 64 of them across England and 20 across Northern Ireland. As most of the research on this topic in the Western world involves white, middle-class women, 17 we were keen to understand what menstruation means to girls across different identities, as they are not a homogenous group. Furthermore, due to the segregated nature of Northern Ireland it was important to access groups from both Catholic and Protestant communities. Therefore, a youth group in a predominantly Protestant area was selected along with a group from a Catholic school, and a group from an integrated school.

As well as speaking to young people themselves, we also spoke to a number of

key informants who have an interest in this topic or work directly with young people. This included politicians, council workers, health professionals, teachers and parents/carers. Each interview was between 25 minutes and 1.5 hours long and the topics focused on were education, 'period poverty', how to give young people a voice, and the actions that each individual was taking surrounding menstruation. We also engaged an advisory group to help consider the areas arising from the research and bring in additional expertise to the formulation of our conclusions.

More detail on the key informants and members of the advisory group can be found in Appendix 1.

Appendix 2 contains information about the young people involved in the focus groups. In Appendix 3 there is a list of focus group questions used in the research conducted in England.

Plan International UK defines a girl as being anyone under the age of 18 who identifies as a girl. However, we also acknowledge that not all people who were assigned female at birth, or who identify as female, menstruate. Conversely, there are people who identify as genders other than female (such as transgender, intersex and non-binary people) who also menstruate.

THE SITUATION IN THE UK

Importantly, some of the key issues in the UK do not dramatically differ from those experienced globally, with the problems of menstrual stigma, taboo, access to menstrual products and the challenge of pain management being universal issues.

SOME MYTHS AND TABOOS STILL FOUND IN THE UK



WHEN YOU'RE STRESSED YOU GET YOUR PERIOD.







The myths and taboos surrounding menstruation have been present in human culture for thousands of years. The ancient Greeks, for example, believed that the uterus wanders and roams around the body, causing erratic behaviour in women. The pre-scientific idea that a menstruating woman is polluting or ritually unclean is found within the Old Testament, which states that women on their periods should not be touched. 18 Religion and culture have had a big part to play in societies' views of menstruation throughout history. In Northern Ireland, where part of the research was carried out, menstrual taboos cut across religious divides and must be placed with larger questions of reproductive rights, bodily autonomy and specific forms of conservatism towards female bodies and sexuality. Menstruation and menstrual blood has also been used as a weapon of resistance in Northern Irish history: in the Troubles, female political prisoners used menstrual blood during the 'dirty' protests, exploiting the existence of entrenched gender norms and taboos.19

Menstruation has been studied since the 1970s,²⁰ and studies have been conducted across the Global North into the experience of menstruation,^{21,22,23} and education around menstruation,^{24,25,26} as well as the advertising of menstrual products.^{27,28,29} More recent literature has included the celebration of menstruation and the analysis of menstrual activism.^{30,31} Throughout, there have been individual experts and organisations in the UK who have been working on the subject of menstruation.^{32,33}

Periods are currently on the agenda. The undercurrents of menstrual activism that began in the US in the 1970s³⁴ broke into popular media in 2015, so much so that it was crowned the Year of the Period by popular US news platform NPR.³⁵ A number of international campaigns focused on breaking down the stigma and silence surrounding menstruation proliferated on Twitter, such as #PeriodsAreNotAnInsult, #HappyToBleed, #periodpositive, and #FreeTheTampons.36 In the UK, menstruation was featured in the press when Laura Coryton launched the 'Stop Taxing Periods' campaign to abolish the 5% tax on menstrual products (the 'tampon tax'),37 and Kiran Gandhi ran the 2015 London Marathon during her period without wearing any menstrual products.38 Since then, the dialogues around periods in the public domain have grown to encompass issues such as menstruation management education,39 understanding different menstrual practices and, to the shock of the British public, the growing consciousness of 'period poverty'.

Period poverty has previously been seen as an external issue affecting lower income countries. However, in the context of austerity and the rise of homelessness and foodbank use, combined with a lack of supportive and accessible menstrual health management education, it is also being experienced here in the UK. In 2017, it was debated in Parliament, 40 and in July, the Scottish Government introduced a pilot scheme to deliver menstrual products to over 1,000 women and girls in need through foodbanks.41 In October 2017, Nicola Sturgeon, the First Minister of Scotland, promised that free sanitary products would be provided in Scottish schools, colleges and universities from the beginning of the next academic year (September 2018).42

It is also important to recognise that through advertising and the power of social media, the messages put forward by large corporations can have a huge impact on all of our perceptions of life. 43 Many adverts for disposable menstrual products have a running theme: emphasising the importance of secrecy, implying dirtiness

and the need to avoid social embarrassment. Nearly all commercial advertisements still use blue liquid to demonstrate the absorptive quality of menstrual products, concealing the reality of menstrual blood.44 A high-profile exception is Bodyform's October 2017 TV advert which uses red liquid to represent menstrual blood. In the UK, a wide range of 'feminine hygiene' products are advertised: wipes, douches, scented liners, 'intimate deodorant', all encouraging girls to feel 'fresh' and 'fragrant'. 45,46,47,48 Many adolescents find going through puberty to be a difficult phase, feeling insecure and self-conscious about their changing bodies. The narratives that menstrual products and fashion adverts disseminate, encouraging the silence around menstruation, help to create a culture in which women are expected to be clean, leak-free, and blemish-free. 49,50 Advertisements for menstrual products have perpetuated the negative ways in which we view periods: many girls now believe that menstruating is unhygienic and that they must hide, conceal and manage their menstruation.51 This creates another layer of pressure and worry for adolescent girls, as they deal with their changing bodies and the pressures of adolescence, as well as with having to navigate and conform to the ideals set out by these dominant forms of media.52

The content of social media can reinforce these narratives and stereotypes. In a content analysis of tweets, it was found that menstruation was described as a source of debilitation, anger, frustration and disdain.53 However, Twitter and other social media platforms have also given rise to a number of campaigns against the stigma of menstruation. There has also been an increase in the number of alternative sources of menstrual discourse and debate, on platforms such as YouTube and BuzzFeed which introduce fresh perspectives around menstruation and offer support, information and guidance about alternative menstrual products, such as reusable menstrual cups.54 For example, Bryony, the 19-yearold founder of 'Precious Stars' re-useable products, puts videos on YouTube which give

positive messages about menstruation, as well as clear and unembarrassed practical demonstrations such as 'How to choose your first menstrual cup'.⁵⁵ In addition, the media's increased willingness to cover stories relating to menstruation suggests that there is more openness and that attitudes in Britain, Europe and the US are changing, albeit slowly.

Importantly, the language used to describe periods by the girls in our focus groups is overwhelmingly negative: "annoying", "inconvenient", "painful" and "uncomfortable" were the most common words used during a 30-second starter activity conducted with the focus groups in England. In Northern Ireland, when asked

if participants had felt prepared for their first period, shockingly, all of them said no. When they described the start of their menstruation, words and phrases were used like: "scared", "horrible", "slap in the face", "I had no idea", "no clue what was happening", "I thought I was going to die", "shock", "embarrassed", "unprepared".

In July 2017, we also conducted an opinion survey with 1,000 UK girls and young women aged 14-21 to understand their views on menstruation. The findings explode any sense of complacency that might have existed about the urgent need to end stigma and taboo surrounding menstruation here in the UK as well as globally.

 $140/_{0}$

OF GIRLS ADMITTED THEY DID NOT KNOW WHAT WAS HAPPENING WHEN THEY STARTED THEIR PERIOD.

1 m 4

GIRLS SAID THEY DID NOT FEEL THEY KNEW WHAT TO DO WHEN THEY STARTED THEIR PERIOD.

1 m 5

GIRLS FEEL COMFORTABLE
DISCUSSING THEIR PERIOD WITH
THEIR SCHOOL TEACHERS OR STAFF.

48%

OF GIRLS FEEL EMBARRASSED BY THEIR PERIOD, WITH THE FIGURE RISING TO 56% OF 14-YEAR-OLDS.

1 11 7

GIRLS HAVE RECEIVED COMMENTS
ABOUT THEIR CLEANLINESS OR
HYGIENE, RISING TO ONE IN FOUR
AMONGST 19-YEAR-OLDS.

"...'I've got a lot to say about this subject [periods] 'coz it really does affect my life. I'm tired of feeling like I kind of suffer in silence about this [periods]....

[One day in work] throughout the day my period got worse and worse and worse until I had to leave work early 'coz I just couldn't stand up straight or function properly which meant that I missed out on earning money.

...I was really glad that my manager on shift was a female, because I don't know how I would have dealt with it had it been a male. I would of still been, I probably still would have been like, I'm on my period and I feel like shit.' But I think it would have taken me a lot more time to pluck up the courage to be like, 'Hey'. Or I would have felt like I needed to act up more to prove to him that my period is causing me this pain... feeling like I couldn't talk about it and feeling like it is a taboo subject when it shouldn't have to a be a taboo subject. You know? It's a fact of life: people have periods! Not only women have periods, guys have periods, non-binary have periods, it's a thing!"

SUKEY, 19, LONDON





SECTION 1. MENSTRUAL KNOWLEDGE AND ATTITUDES

WHAT ARE YOUNG PEOPLE LEARNING AND WHEN?

"I feel like you get one of two educations [about periods] – either it scares you or it's not a big deal." KATIE, 17

Education around menstruation comes in many forms, whether in a structured way through the education system, or through other sources such as family, friends, out-of-school clubs, social media and wider online sources.

The status of menstrual education varies across the UK as education is a devolved matter, with each of the countries of the United Kingdom having its own separate system under its own separate administration. On 1 March 2017 an amendment to the Children and Social Work Bill was passed to make Relationships and Sex Education (RSE) compulsory in all secondary schools in England, and Relationships Education compulsory in all primary schools, and to regulate for PSHE (Personal, Social, Health and Economic) to potentially have a set curriculum and be taught in all schools in the future. These changes will be dependent on guidance currently under consultation by the Department for Education and will be in place in September 2019. However, the interviews here relate to the current policy context. Until these changes happen PSHE education in England is currently only mandatory in independent schools and only those attending secondary schools that are run by the local authority are guaranteed to be offered sex and relationships education.56 Local authorities

have oversight over approximately one third of secondary schools and three quarters of all primary schools in England.57 Neither PSHE nor Sex and Relationship Education (SRE) are currently compulsory within academies.58 There are currently no academies or free schools in Wales, Scotland or Northern Ireland.⁵⁹ The current UK government guidance for SRE in England is from 200060 and states that schools have discretion when choosing the age and content of lessons around menstruation. but must be aware that there should be some preparation in primary school for early menstruators and provision of menstrual products if requested. The majority of young people we spoke to in England said that their first lesson on menstruation was either in Year 5 or Year 6 (9-11-year-olds), with a few in Year 4 (8-9-year-olds). It is also worth noting that England's national curriculum guidelines for science at Key Stage 3 states that menstruation can be taught 'without mention of hormones'.61

In Northern Ireland, despite relationships and sexuality education being part of a revised statutory curriculum there is no uniform RSE provision, 62 only guidelines. Furthermore, the young people we spoke to said that their first lesson on menstruation was in Year 9 in secondary school, significantly later than in England. In Scotland the guidance on Relationships, Sexual Health and Parenthood (RSHP) education was updated in 2014, however it was not made fully compulsory for denominational schools. 63 In Wales, primary schools are not required to provide sex education as part of the basic curriculum, but can choose to do so at their discretion.

However, all maintained secondary schools are required to include sex as part of the basic curriculum. ⁶⁴ In December 2017, an expert panel published a report on the Sex and Relationships Education curriculum in Wales. It found gaps between what young people wanted to learn about sex and relationships, and what they are actually taught in school. It also recommended statutory, higher-quality, more inclusive SRE, with a greater focus on rights, health, equality and equity. The Education Secretary for Wales will publish a response in early 2018. ⁶⁵

The age of puberty and the start of menstruation are happening earlier and earlier in the Western world. 66 There have been a number of reasons cited for this: improved maternal health, better nutrition and increased affluence. However, this pattern is not universal, and girls and others who menstruate could potentially wait until the age of 18 for their first period. In our study, the mean age of the start of menstruation was 12; however, the youngest started at age 10 and the eldest at 16.

Multiple participants in Northern Ireland across age, school type and community told of having no idea what menstruation was when they first experienced it, causing extreme distress. The general consensus of participants from Northern Ireland was that

the initial shock of having their first period was negative, scary and unsettling. Those who started in primary school were especially unprepared. Monica, 15, explained that she was: "Like 'Oh my God, am I going to die!?' I didn't have a clue what was happening at all, I just felt like, what's happening! There wasn't anyone else in my class that knew and you were really embarrassed to ask." Her teachers didn't explain anything but called her mother to come and take her home, enforcing feelings of shame and secrecy.

For those who started later in England, there was also missing information. Leah, 17, said: "Also they should make it clear that your period might not start right away, the only lessons are in Year 5 and my period started in Year 11 – that's quite a long time to be sat there waiting with no information."

Across the board, many felt the initial education they received was inadequate, including Maria, 18: "We just watched this weird video in Year 6." Samaira, 17, said: "The first time I heard about it was in Year 6 and we were split into boys and girls to change for P.E., and the P.E. teacher said 'Oh by the way girls, if you need pads they are in the downstairs toilet', it was literally like 10 seconds that was it, there was no like 'a pad is for your period'. A lot of girls might have known, we just never got told anything officially."

For those who received education before starting their periods, there was still an element of shock and worry. Marie, 10, who attends an English primary school, said: "I feel physically prepared but I don't feel mentally prepared." This sentiment was echoed by many older students sharing stories of first periods: many knew where to get menstrual products in their home, or were even carrying them with them, but still felt scared and shocked. Tilly, 14, said: "I was about to go to sleep and then I saw it and I started crying, because I was scared."



INCLUDING ALL MENSTRUATORS

The transgender experience of menstruation was discussed and questioned openly in a number of schools. Young people generally showed a fairly good understanding of these issues and were open to discussing their personal experiences and asking questions.

The normalisation and acceptance of transgender, non-binary and young people with different sexual orientations within schools can be seen as a positive step. Their needs should also be taken into account with regards to sex and relationships education and menstruation education throughout the UK. This is especially important given that Stonewall's 2017 School Report found that of those surveyed, 'eight in ten trans pupils had skipped school'; and 'nine in ten trans young people have thought about taking their own life'. 69

The inclusivity of menstruation education was highlighted as an issue, particularly by menstrual researcher Chella Quint, founder, #periodpositive. She comments that separating genders for sex education "alienates transgender and non-binary kids, it alienates boys who deserve to know, and it alienates girls who need to see all genders' conversations about reproductive health happening in front of them, all in a safe space with ground rules. It completely deprives everyone of their rights if you separate them. Schools need to support anyone with a uterus. Period stuff is all genders' stuff and it's not detracting from the focus on girls to include people who menstruate who aren't girls - they are still experiencing the stigma of being menstruators and they are being excluded and being made invisible."

The majority of the female participants also talked to their mum or a female relative about periods, either triggered by having education in school, by them starting their period, or by their parents reading some of the signs that they were about to start.67 Sarah, 15, said: "It was fine but my mum had been talking about it just a few days before so that was a bit freaky, and I was a bit creeped out by it, and she had all the stuff ready." For many others, not knowing the signs or what to look for was an issue. Talking about discharge, Samaira, 17, told us: "I had no idea that had anything to do with your period so I was a bit like 'Hmmm, why is my period white?""

Key informant Emma Newton, a Healthy Schools Officer in England, reflects this from her own experience: "I think there's a lot of assumptions at high school about what they've done in primary. When we go into secondary schools to deliver something like contraception, we've sometimes had to take it right back to the puberty and period process."

In England, several young people commented that they had not received much education on the topic after initially learning about the biology of menstruation in Year 5. Ben, 18, said that: "In Year 7 you had the biology with the menstrual cycle with what day, but nothing else." This was a particularly prevalent view amongst male participants. And in Northern Ireland, all but one of the young people spoken to had learnt solely about menstruation in a science class, despite it appearing in guidelines for Relationships and Sexuality Education and personal development through Learning for Life and Work.

KNOWLEDGE GAPS

Although this study did not focus on the assessment of young people's knowledge in great detail, there were several gaps and misunderstandings that arose multiple times. A particular example is the lack of understanding around basic female genital anatomy.

A lack of awareness of one's body and of puberty can lead to distress when menstruation is presented in class. A key informant school nurse in Northern Ireland described the extreme reactions some girls had to the period talk: "It was amazing the number of young girls who started to cry. And two girls fainted one day, just at the thought that blood could come from there. It happened to me several times, even in first year. It just was all too much. They just had not had a clue, nobody had ever hinted to them that something like this could happen". This also highlights the need for education to be a joint effort between home and school, with support and information available in both places.

"I mean I was talking to an 18-year-old just the other day who didn't know she had three holes down there."

TINA LESLIE, FREEDOM4GIRLS

"It comes out between your thingy and your bottom."

GEMMA, 9

"Yeah, you need some kind of diagram, you know on 'Orange is the New Black' where she does that diagram, that was like the first time I have even seen it all laid out before."

JOY, 17

"They have all the body things in biology and there is like a full-on uterus with a fully-grown foetus in it, but I fully couldn't tell you at age 12 which hole that child is going to come out of."

KATIE, 17

Maria, 18, mentioned: "They keep them both so separate: the social side, like pain, the reality of having a period, and the scientific, they never seem to try and bring them together. You have your biology lesson to understand the biology of how a baby and embryo grows, your PSME⁶⁷ lessons about what to use, what sanitary products to use, but they never try and integrate them."

It has been shown that a focus on biology promotes knowledge which is disconnected from girls' own bodily experiences, and that including discussions of life experience and social context throughout a variety of classes is critical.⁶⁸ The focus on biology as an

abstract concept without explanation of how it relates to day to day life, feelings, pain and similar makes it challenging for girls who lack a familiarity with the body parts involved with menstruation to relate this information about anatomy to their own bodies. This was the case with participants in focus groups who did not have a good understanding of their own bodies. This was also echoed by nurses and health care professionals we spoke with in both England and Northern Ireland.

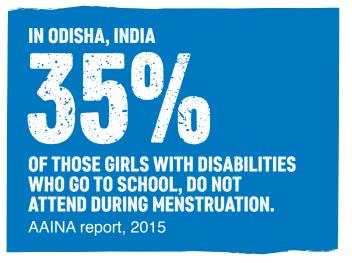
Fiona, 15: "I don't think they really give you enough information about it; they kind of just touch on it a little bit, you just have to learn from experience."

DISABILITY

Girls and other menstruators with disabilities can face particular challenges when managing menstruation. Approximately 7% of children in the UK have disabilities, 70 yet according to a 2010 survey conducted by Leonard Cheshire Disability, almost half (44.5%) of disabled people didn't receive any sex education at school,⁷¹ which suggests significant numbers of children with disabilities are not learning about menstruation. In addition, those with developmental disabilities such as autism, for example, may not be able to access appropriate education about menstruation, and may experience difficulties in communicating with those around them. Girls with autism may experience additional sensory issues around menstruation, such as sensitivity to the texture and material of

different menstrual products and anxiety around the unpredictable nature of cycles at the onset of menarche, and may need help managing this. Many autistic people also have alexithymia which means they struggle to explain and understand emotions. Communication difficulties mean that those supporting these girls have to interpret mood or pain by observed behaviour, and it is often difficult for families, carers and teachers to access appropriate information on this subject. Girls with severe physical disabilities have little choice of privacy, and many have bowel and urinary challenges too. A study in Odisha, India, found that of those girls with disabilities who do go to school, 35% do not attend during menstruation, compared with 20% of girls without disabilities.72





MENSTRUAL PRODUCTS AND THE ROLE OF CORPORATIONS

Amika George, young activist: "I think it's really awful that it's so enforced from such a young age and the fact that period product packaging is called things like 'Whisper' and 'Discreet', and subconsciously you're taking all of it in, and you're not doubting why it seems so embarrassing and you see it on TV, all these adverts, this blue liquid, the blue liquid doesn't exist, somebody needs to change that! ... It's just that message that periods are like this and only like this and this is what normal periods are, and you're just taught to panic when you don't fit that mould."

The large role that corporations play in menstruation education was an issue of concern for key informants and some of the young people interviewed. Corporations and adverts often reinforce menstrual taboos by framing menstruation as a hygiene crisis, something which is dirty and needs to be kept secret. A Tampax advert released this year named Short, Shorter, Shortest, is based around the concept of being able to wear what you want during your period, emphasising their new, discreet form of wrapping, and the word 'Shhhhh...' emblazoned across the screen.⁷³

There were many concerns amongst participants about corporations using schools to increase their share of a profitable market by sending free samples to schools, providing lesson plans on menstruation and

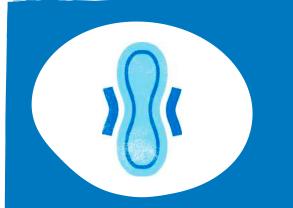
marketing to a captive audience. This can be seen as an easy, convenient option for resource-poor schools who often do not have the time to create their own resources.

Several key informants also mentioned stories of young people believing that periods are in fact *blue*, influenced by advertising campaigns. Blue liquid is still being used euphemistically in most advertisements today.⁷⁴

Melanie, 15, highlights the fact that menstrual stigma allows this to happen: "If other lessons were sponsored by things, like if a class was sponsored by the textbook, parents would be: 'I don't want my child being exposed to things like that', but again it's the thing about not talking about periods, it's 'Let the company do it: they know all about it'."

Andrea Cowans, from Leeds City College, agrees "I am slightly cynical about the involvement of the big manufacturing companies in terms of providing the samples for schools, which looks like they are doing the schools a favour but actually it's just about them building brand loyalty, so I do feel really sceptical about that."

A Northern Irish vice principal explained the pressure felt to allow commercial companies into school: "It is so tempting to bring people in because the trainers are often engaging,



SEVERAL KEY INFORMANTS MENTIONED STORIES OF YOUNG PEOPLE BELIEVING THAT PERIODS ARE IN FACT BLUE, INFLUENCED BY ADVERTISING CAMPAIGNS.

and students like a break from same old same old teachers, but they of course promote disposable protection only, and of course their aim is a captive audience. We can't afford to turn down the free supplies, though we keep them for emergency requests rather than handing them out as if we were recommending them." When asked if they thought that educators have enough information and resources to deal with educating about menstruation, the vice principal responded that they thought commercial providers dominated and that there is a need for a broader approach.

Among the girls and young people spoken to, the most commonly cited menstrual products were disposable menstrual towels, panty liners and tampons. These were mentioned in every focus group, and although some girls raised questions about the practical use of tampons and others had not tried them before, all had been in contact with or seen disposable menstrual products. The ways in which the participants gained knowledge about the range of products varied, but most cited school or family members when learning about disposable menstrual products.

Much less common was detailed knowledge around reusable menstrual products; however, menstrual cups or period pants were mentioned in five of the eight English focus groups, and four girls (17 and 18 years old) in the study were using menstrual cups. YouTube was cited as the main educational platform to learn about

reusable menstrual products both in the UK and Northern Ireland. However, the girls recognised the lack of knowledge and acceptance around these products. Maria, 18, commented that: "I was talking to people yesterday who hadn't heard of a menstrual cup before and were really surprised. They went 'isn't that a bit gross that you reuse that every time?'; there's still a lot of stigma around the use of cups."

This stigma is concerning given that safe disposal of menstrual products poses an increasing environmental problem. Menstrual pads are packaged separately in plastic, lined in plastic to reduce leaking, and made with nonbiodegradable, petroleum-based polyacrylate super-absorbent polymer gels. Tampons are made from rayon, polypropylene and polyethylene. Even tampons made from organic, vegan, fair trade, sustainably made, 'natural first grade' or 'fragrance, bleach and rayon-free' cotton, such as 'Cottons', 'Organyc', 'Sustain Natural' and 'Natracare' are sold with individual non-biodegradable plastic applicators. 75,76 The lack of education and access to information about reusable products as a result of stigma and taboo surrounding menstruation has a significant impact. Each menstruating person will use up to 250 pads or tampons every year. This equates to 3,750 million to dispose of in Britain each year, 77 plus about 300 million plastic bags or boxes⁷⁸ and about 1,500 million plastic tampon applicators. These pads, tampons and applicators take at least 800 years to decompose, or release toxic gases if burnt.⁷⁹



"I WAS TALKING TO PEOPLE YESTERDAY WHO HADN'T HEARD OF A MENSTRUAL CUP BEFORE AND WERE REALLY SURPRISED. THEY WENT 'ISN'T THAT A BIT GROSS THAT YOU REUSE THAT EVERY TIME?'; THERE'S STILL A LOT OF STIGMA AROUND THE USE OF CUPS."

Maria, 18

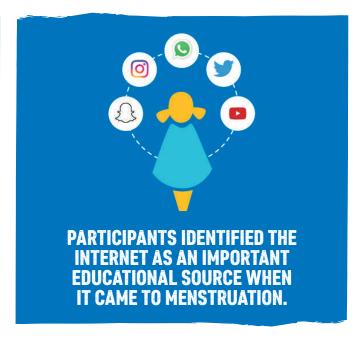
THE IMPORTANT ROLE OF THE INTERNET

"But I think our generation with the internet, it's a really positive thing that you can educate yourself that way."

PIA, 23

Participants identified the internet as an important educational source when it came to menstruation. Alongside being used to find out about alternative products, it can also be used as a platform for attempting to resist and challenge traditional norms about menstruation, through online interactions with peers on forums, blogs and social media.80 Online, some girls are talking openly about menstruation, providing peer support and offering validation of experiences as online chat rooms provide an anonymous space to talk about taboo subjects. Samaira, 17, mentioned that she "watched this YouTuber who made a video about all alternative period products, she tried them all... there were knickers that had pads in them, all sorts...I think YouTubers are so good, they have a platform for education." Hannah Witton was cited by several groups as an influencer who broaches this topic on YouTube.81 However, Chella Quint, menstrual researcher, #periodpositive, highlights that although "YouTube is a good source and there are great resources out there", there is also a need "to vet the resources" to ensure that factual knowledge is being transferred to young audiences.

Girls and young people also mentioned Snapchat, BuzzFeed, period tracker apps and online articles as useful ways to explore and learn about menstruation. Kellie, 15, discussed reading about the lived experience of menstruation online: "I remember reading one about just how much blood you lost." This real-life information is what girls felt their menstrual education was lacking, and the internet was viewed as a space for learning and sharing experiences. Eimear, 16, explained that learning about the facts online "makes me feel more comfortable".



However, there was also an awareness of the internet as causing worry and distress around menstruation Aine, 12, told us that: "It can also be quite negative, and you can look up periods and find out all these scary stories." Additionally, some portrayals of periods on social media were seen to reinforce stereotypes about menstruation. which were criticised by some, including Ivy, 15: "I think it's kind of a good thing and a bad thing [seeing things on social media] because yeah, most girls do like chocolate and junk food when they're on their period, but sometimes they just need support in a different way rather than just buying them whatever they want; some girls just want a cuddle."

The boys spoken to in this study had also been exposed to menstrual discourse through social media, and had seen or engaged with comments or posts about menstruation on these platforms which were interpreted as derogatory. Sam, 15: "What I've seen is that it's quite negative, like scrolling through Facebook, I've seen a couple of posts and they're quite negative." On the other side of this, the same participant had seen BuzzFeed articles: "Some things where it says you should try to help out more, stuff like that."





WHO ARE GIRLS AND OTHER YOUNG PEOPLE TALKING TO ABOUT MENSTRUATION?

"I think your mum's experience affects you."

ROHA, 17

The young people interviewed in this report highlighted the importance of their mothers, sisters and other female relatives as sources of information and support about periods. However, this depended on the nature of their relationship, and a small number of participants mentioned embarrassment, shame or awkwardness while speaking to family members. The relationships that young people have with their parents can affect their experiences of menstruation. In the case of Beth, 15, her father is intolerant of her leaking and does not allow her to use: "white towels, certain towels, my Dad goes mad, he says: 'You can find a washing machine, you can deal with it'."

However, nearly all participants cited their female peers as important to discuss, share and learn about periods with. For young men there were not many people they felt they could discuss menstruation with.

Evan, 15: "Other than my sex education teacher, no one really. In my family if it happens my sister just takes the day off and my dad just says: 'Yeah your sister's feeling unwell...' Me and my dad both know what it is but we prefer not to talk about it because it gets a bit awkward."

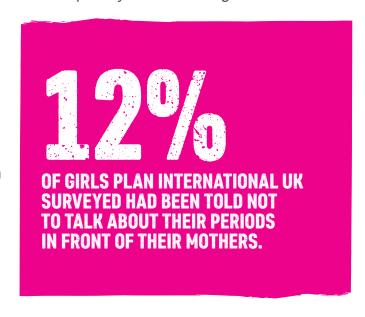
With regards to girls communicating with men and boys about menstruation, the answers were varied. Many mentioned that they don't talk to men or boys about menstruation.

Whilst discussing a boy in their class who makes jokes about periods,

Fiona, 15, commented: "He is kind of one of the reasons people don't talk to the boys, the perfect figure of why we don't talk to the boys about it."

However, the same participant Fiona, 15, attempted to break down stigma and build understanding of periods within her relationships: "I talk to my boyfriend about it, and my brother, just so that they get more aware of what's happening and stuff instead of just going 'What's happened to you?'; they are understanding." This was observed generally across groups of young people aged 16 and above, who felt more confident about sharing their experiences of menstruation with men.

Mutual awkwardness and embarrassment were stated as the main reasons as to why girls did not speak to boys about menstruation, in addition to the fear of being teased or bullied about going through puberty. Charlotte, 10, shared her worries: "I don't know if I can talk to my male friends, I think they'd laugh – they don't know about it so I'm worried they would laugh. They would feel really awkward and I wouldn't want to put my friends through that."



These narratives were similar across all focus groups: the notion that menstruation was a topic for women, and that men and boys alienate themselves and are alienated from conversations around periods and female puberty.

The involvement of parents in formal education was suggested by many focus group participants. Ella, 17, told us: "I think it's important to get parents involved; although I didn't have like a sit down talk, I got lots of tips about it: 'Do this' or 'You need to change it regularly'. But I think if you don't have that culture at home, like [your] mum giving you tips, and things like giving you pain relief, at that age you don't really have the money to go buy stuff... So encouraging that culture at home when you're starting could be helpful." It was worrying to find that 12% of girls Plan International UK surveyed had been told not to talk about their periods in front of their mothers and 11% had been told not to talk about them in front of their fathers.

The attitude of a school towards menstruation can hugely influence the attitude of the young people within that school. While conducting the focus groups during this research, No More Taboo observed several different school cultures and environments. They found very contrasting views among teachers; however, this was not always reflected in students' views.

In one school, whilst setting up a room for a focus group, No More Taboo witnessed a teacher ask the group of females outside: "What are you all doing here?" One student answered: "We're doing a survey about menstruation and periods, Miss" and the teacher said "Ohh no, I don't think we need to be talking about

OF GIRLS PLAN INTERNATIONAL UK SURVEYED HAD BEEN TOLD NOT TO TALK ABOUT THEIR PERIODS IN FRONT OF THEIR FATHERS.

that in the hallway!" The participants told us they were shocked by her reaction.

In contrast, at the primary school No More Taboo attended, the teacher was keen that we answer as many questions as possible, as their students had been asking so much since they had been taught about menstruation a few weeks previously. She was very keen to hear feedback and see what they could improve on. The environment in this school was supportive and this was echoed by the students. Gemma, 9, said: "You should tell a teacher you trust, and then they can help you."

Only one group mentioned an external organisation coming in to teach about periods, and they seemed unclear on what they had covered. There is agreement amongst those that No More Taboo spoke to for this report that schools should create an open and healthy environment in which consistent, sustained and accurate information is given to all children about menstruation. The work of schools in this regard can be complemented by the engagement of external organisations, but not replaced.



HOW DO YOUNG PEOPLE WANT TO LEARN ABOUT MENSTRUATION?

"They [boys] suffer for it [lack of education about menstruation]. I mean these men could have daughters in the future if they grow up and they won't know how to react, they could have friends and sisters. They also need to be educated because there's men around us when we have our periods – we don't get separated out."

VIOLET, 17

Whether or not classes should be mixed was brought up in nearly every school. In particular, the young male participants wanted to know more, and young female participants agreed they should. Ben, 18, mentioned that he thinks: "It's sometimes embarrassing for a guy to not know about it, you don't want to seem stupid or step on any toes, I don't really feel like we were taught much about periods. We didn't really learn very much about periods in our sex education, very much about you, learning about yourself."

Ella, 17, agreed: "I think more for the boys, I think they need to understand it just as much as we do." And Esther, 18, pointed out: "We were separated in years 7 and 8, I don't know what the boys learnt!"

In general, the consensus was that males need to learn more about menstruation to help them understand what people who menstruate go through. For example, Esther, 18, said: "Also teaching you about ovulation pain... I know myself and other people who actually suffer from really bad ovulation pain and a lot of guys including my ex just didn't understand that." From Year 7 onwards, participants generally agreed that classes should always be mixed; however, Ed, 17, said: "It needs to be done in a way that will fit Year 7 boys: Year 7 girls and Year 7 boys are very different."

Plan International UK's experience is that separate 'safe' spaces are critical to allow girls the confidence to explore their concerns. However, these should occur in conjunction with integrated classes, for the reasons set out throughout this report. There were some calls for separate classes, particularly at primary school, from those we spoke to, with several girls at primary school expressing apprehension about learning alongside boys. Marie, 10, said: "Apparently the boys just laughed all the way through that but then the girls didn't really laugh that much, a couple of girls just sniggering. The boys laugh and we don't laugh: they'll say to us: 'Why are you not laughing, do you think it's serious?' and we'll be like: 'Yes, it is serious!" Charlotte, 10, agreed: "I don't wanna be with the boys." Tilly, 14, looking back at her primary education, said: "I was happy to be separated, because the boys make jokes and stuff like that."

When discussing what participants would have liked their menstrual education to cover, some key themes emerged. They wanted more information on the lived, experiential and embodied aspects of menstruation over biological, abstract information. This included information on different products and how to use them; how to deal with cramps and hormonal changes; and discussion on the variation and individuality of the menstrual experience. One group emphasised that they thought teachers should directly address menstrual shame. Pia, 23, said: "You just learn the science of it - we never addressed, no one ever said to me: 'Don't feel ashamed' just outright."

Participants stressed multiple times they wanted to know about "different ways to deal with it" and not just the science. They felt that practicalities should be addressed, like making it known who they can go to in school for menstrual products, as well as providing better access to facilities for washing. Increased



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awareness is also needed across all teachers not just those involved in teaching about sex and relationships - about the issues around menstruation, such as needing access to the toilet during class, lack of concentration and mood changes in students. In Northern Ireland this is addressed in the Council for the Curriculum. Examinations and Assessment (CCEA) Relationships and Sexuality Education primary guidelines, but this was not evident from participants' experiences. The emotional and personal aspects of menstruation also need to be addressed. Monica, 15, when asked what young menstruators should be told, responded: "Let them know that if they ever got, like, really sad for no reason at all, that's ok and that happens and stuff." While it is important to provide information about more than just the biology of menstruation to young people across the UK, the fundamentals of accurate, factual biology are also essential. A school nurse from Northern Ireland who provides puberty talks also highlighted the need for accurate biological information: "We were at the period talk for 12 year olds and there was a lack of information, and I think there still is a lack of appropriate information that deals with the biology, that doesn't come from a religious point of view. Because I don't think it should be taught in religious education because I do believe people put a slant on it: I do believe it has to be taught biologically."

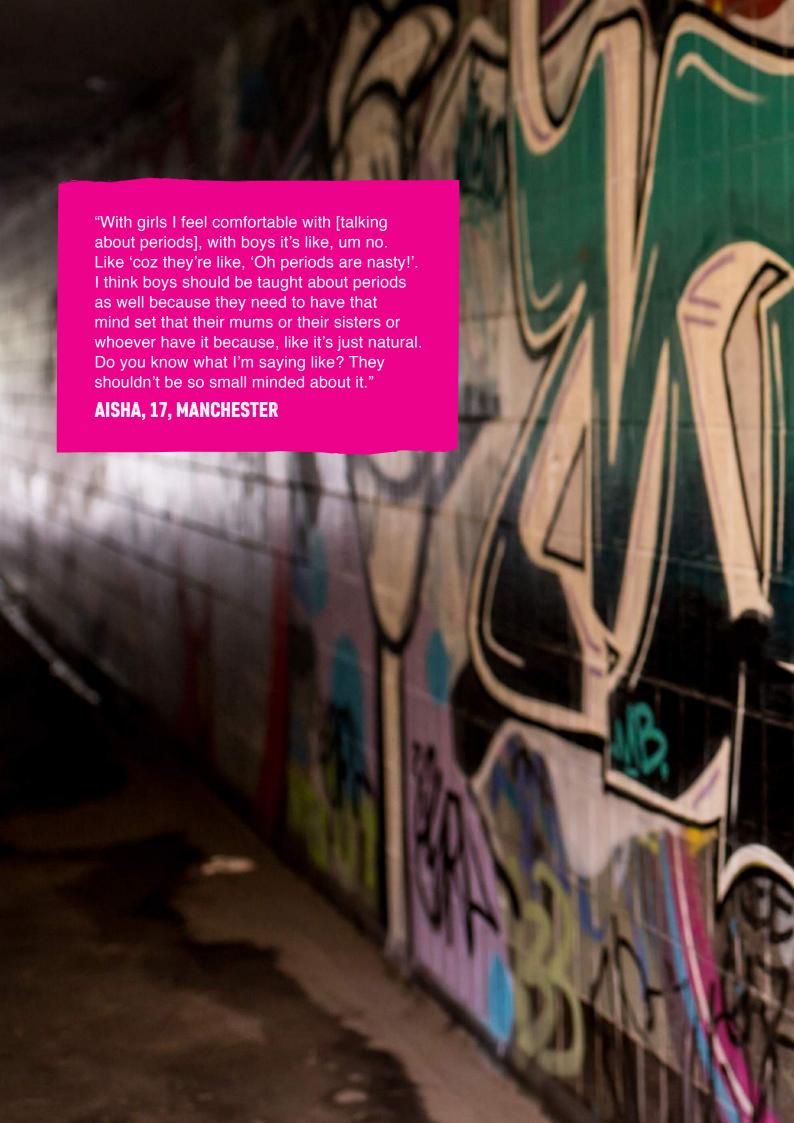
The importance of earlier menstrual education cannot be stressed enough. Aine, 12, said: "I think school comes in a bit late teaching about it. You have to learn yourself and there's a lot of girls not knowing anything about it." Education needs to begin in primary school, to avoid distress, trauma and the perpetuation of embarrassment and shame around menstruation.⁸²

The participants also emphasised the need for menstrual education to be an ongoing process, not just a one-off talk. This echoes the YouthAction report in Northern Ireland

"... I didn't have any education on it really, I remember when I first started bleeding I thought it was because I hit myself too hard. I remember texting my friend going, 'I'm bleeding out of my vagina. Is this normal? Like. what the f***?' She was like, 'You've started your period.' And I was like, 'That only happens to girls in later life. I didn't know that you could start your period at like 12 or 13.'I didn't know anything about it! Like I didn't know that it can affect your life negatively. I didn't know about the symptoms. I was not helped with any coping mechanisms for my period. I was just told that you bleed once a month and that's your eggs going out of your body, like that's all it was [my education1."

SUKEY, 19, LONDON

which also found that young women want to feel able to ask questions, and want classes to be holistic with no moral undertones.83 Rachael, 15, from Northern Ireland, felt reassured that the talk she received at school extended into discussions: "We had a one-off talk, when I was in P7, but then I had a female teacher a few days a week and she used to ask us if everything was ok and if we had any questions." Melanie, 15 felt that presenting menstruation in a one-off special talk contributes to the silence and shame of the topic: "It's very like, it's 'Women have periods, that helps them have babies, and that's our lesson done! OK, no one talk about it,' and it's not like 'menstrual cups' or 'women have cramps' or 'some women, you know get more pain, some get no pain', how long it lasts, there's no proper discussion about it, and that adds to the shame of it, it's like: 'This is what it is, that's us done, everyone avoid it now."





SECTION 2: THE IMPACT OF SHAME AND STIGMA

The impact of stigma and shame around menstruation is felt across many areas of young people's lives, from mental health, body image and self-esteem, to limiting activities and behaviours. It also acts as a barrier to communication and knowledge about bodies, and ways to care for them.

"There's one girl in school and she was like in a science lesson and she leaked on the chair and that she didn't realise so obviously when she got up out of the lesson and everyone else seen it and ... she proper like got humiliated. She didn't even come in for three years, she moved school."

ZARAH, 15, MIDDLESBROUGH

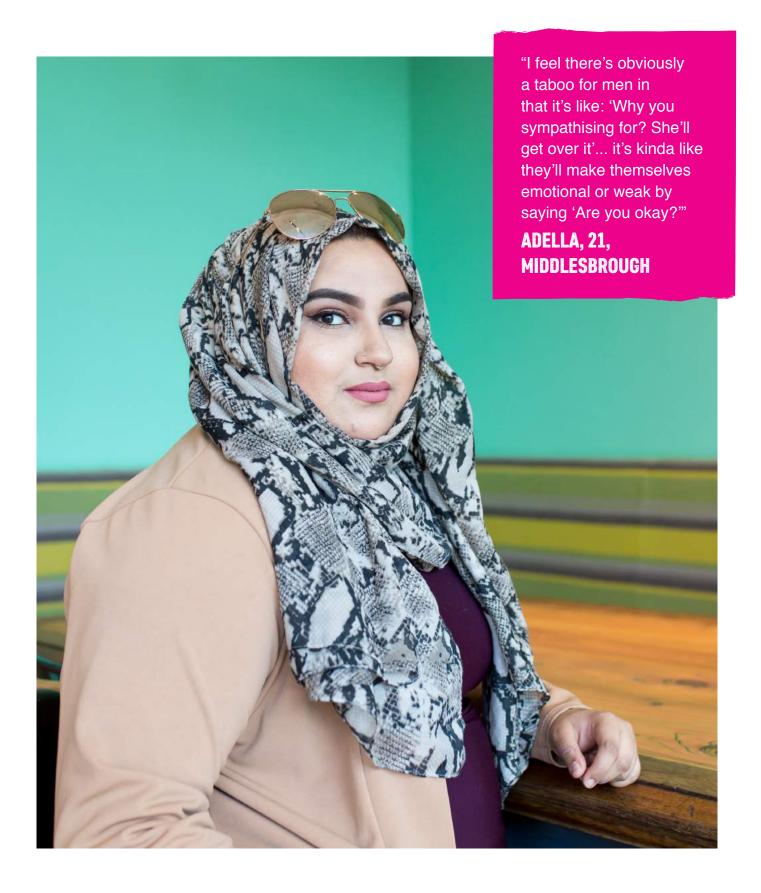
FEAR AND EMBARRASSMENT

Menstrual secrecy and concealment was a key theme among the girls we spoke to. The anticipation of encountering negative reactions and discrimination after a menstrual leak leads girls to actively change their behaviour; for example, avoiding white clothing or abstaining from certain activities such as swimming. Girls undergo a form of self-surveillance and discipline to hide menstruation. A fear of leaking was expressed across all groups, apart from the groups of boys. Participants in Northern Ireland used emotive language when discussing how they felt about it: 'insecure', 'embarrassed', 'ashamed', 'freak-out', 'afraid', 'scared', 'uncomfortable', 'terrifying'. Most participants, when asked in what situations they would feel embarrassed about leaking, said that they would only feel embarrassed if it happened in public. Even those who expressed positivity and acceptance towards menstruation and menstrual blood talked of feeling afraid of leaking before they had developed these attitudes. They also expressed feeling a sense of pressure from

society to feel ashamed, even though they now actively aim to subvert this. The trauma of staining clothing or leaking through underwear came through in multiple conversations, and it was deemed the most embarrassing event that could happen while menstruating.

A large proportion of the worry and embarrassment around menstruating in the school environment stemmed from the anticipation of adverse reactions from boys. In several focus groups, girls voiced their concerns about boys making jokes about them while they were on their period. Ruby, 10, said: "Umm... they'll laugh at you, and they'll probably tell everyone that: 'Oh, she has her period.' Yeah, they take the mickey."

Boys themselves identified girls' experiences in the classroom that could have been embarrassing or upsetting. Cory, 15, mentioned that he had "heard it when people laugh, this was at the start of the year, she said: 'Sir, can I go to the toilet?' and he said: 'Why? You went a couple of minutes



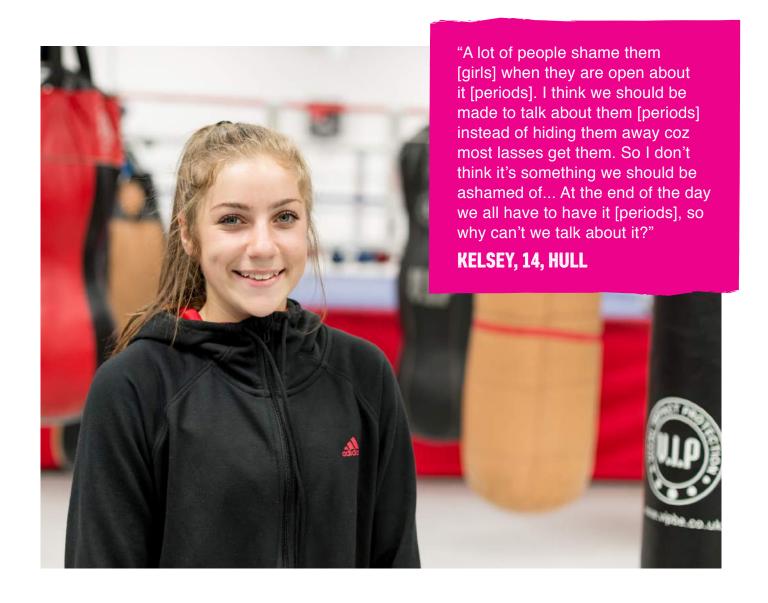
ago,' and she just said: 'Oh, I'm on my period,' and everyone started laughing."

One focus group in Northern Ireland discussed the need to hide all evidence of menstruation around boys, especially if you want them to find you attractive. Adverts feed into this as they stimulate angst in teenagers, promoting their product to enable girls to handle their menstrual cycle while continuing to be attractive and wary of offending.

SELF-ESTEEM AND BODY IMAGE

Plan International UK's report on girls' rights in the UK has highlighted that concerns and pressures around body image are a significant barrier to many aspects of girls' lives and deeply rooted in gender-based discrimination.84 Girls often note that they feel different when menstruating: their confidence drops, and they become self-conscious, with mental health implications.85 Emphasis on the outer body as opposed to the inner health of the body was referenced by girls in one focus group in Northern Ireland, who discussed feeling unattractive while menstruating, bloating, acne, not feeling like going out or wearing tight clothes, having low confidence and this influencing their body image. It is also important to ask what the mental health

impact is of the internalised shame of feeling a normal bodily function is dirty. Melanie, 15, articulated the connection between body image and menstruation: "I used to be really negative about my body image [...] like when I started to see how much I talked negatively about my body, and I saw how much periods were tied into that. When you are younger you are quite sensitive to that anyway, and then if people are telling you to hide it, then you think this is clearly something to be shameful about [...] And I won't embrace that, even though the fact it's not talked about it means clearly it is something to be ashamed about. But even at my point now where I'm like: 'Everyone be proud of it!' I'm still kind of a bit like, there's still notions in my head."



IMPACT ON SPORT AND EXERCISE

One restriction that was discussed in the majority of the focus groups was the ability to participate in or compete in a sport. Many young people referenced the fact that they felt that they could not wear white trousers and that they would be anticipating leaks as the main reasons for avoiding sport. Monica, 15, gave an example: "I do trampolining so that's really hard. If we have competitions, sometimes I get really scared about going on and then I wear really baggy tracksuit bottoms and I take them off really quickly to do the routine, then I pull them back on really quickly."

There was a common assumption among many participants that girls and others who menstruate should not go swimming while on their period, and even those who understood that this was not true said that they would still feel uncomfortable going swimming in case they leaked in the water. While it is important to stress that girls and others who menstruate do not have to carry on with their everyday activities and that rest is important, it is also imperative that young people are educated about how to manage menstruation, in all eventualities, and are not restricted from everyday physical activity and sport.

Participation in schooling and school attendance were highlighted as major issues. For example, in each group from Northern Ireland, there was at least one girl who missed school every period. Rachael, 15, explained: "I do because I get really sick and I vomit, and I like sit on the bathroom floor and cry, I get really sick. So, I have [missed school]." Participants noted fainting, vomiting, migraines, and severe cramps as some of the effects of menstruation that they experienced.

However, the experiences described were different in the English focus groups,

"It's that kind of attitude: 'Oh you should just carry on with it', and for a lot of women that's a big struggle."

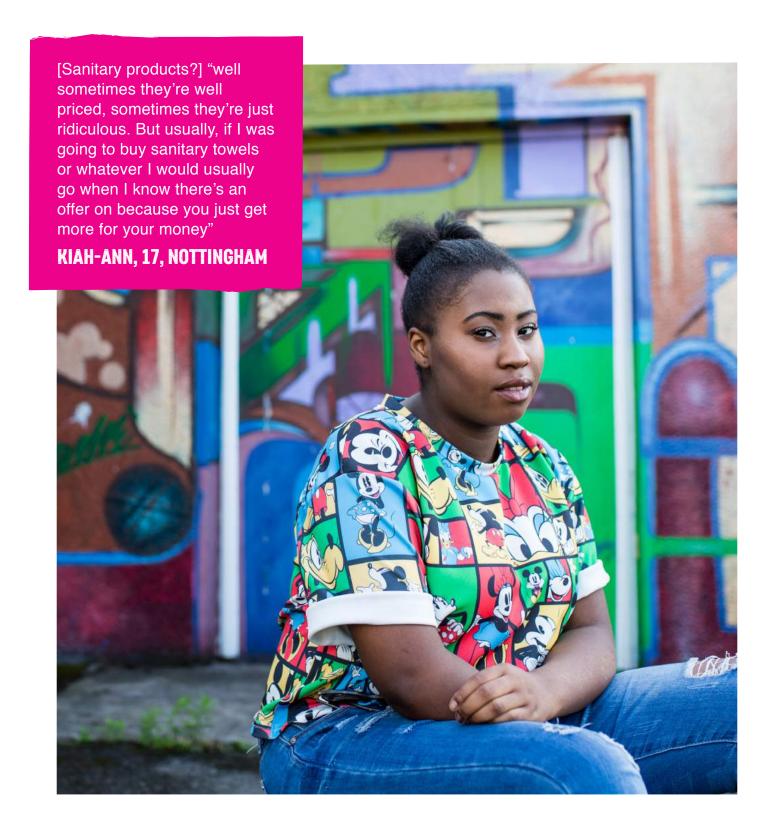
PIA, 23

with many participants telling us how they were expected to attend school and take part no matter how ill they felt; only a handful mentioned ever missing school due to menstruation. Tilly, 14, told us that she had never missed school: "No, my mum won't let me." Despite the evidence that those who experience painful and debilitating periods are restricted from participation in everyday life, there is a gendered expectation that they should carry on with life with no time for rest or selfcare. Melanie, 15, noted that people say to her "If [I am] not doing something: 'Why are you not doing that, you are a woman, you should be able to deal with that.""

Many focus group participants noted that adverts often portray people maintaining a high level of activity while menstruating, and that this made them feel bad about themselves. In one focus group, participants spoke about advertisers' assumptions that all women are impacted by menstruation in the same ways, and that all women must keep going. They noted a pressure to feel ashamed of their cramps, and guilt for resting and taking time for self-care. A school nurse from Northern Ireland, when asked what she saw as the main challenges for young people who menstruate, replied: "The need to conform to normal life. Girls just don't have a chance: they need to be part of sports teams and there's no such thing as 'I'm not well for a day or two' or whatever. I've seen girls in swimming teams being like: 'Oh no I can't take my period, I'm in a competition': it's all of that they have to keep going with, on top of a hectic amount of school work."

Girls want to be taken seriously – their pain, and their experiences of their own bodies – and have their voices heard. Yet many girls and women never go to the doctor for help and advice regarding period pain or other gynaecological symptoms, due to shame, fear of being dismissed, or because they think there's

'nothing they can do'. 86 Studies consistently show that women's pain is taken less seriously by medical professionals, with menstruation rarely given serious medical consideration in research. 87 Participants in all focus groups noted how frustrated they felt when adults didn't take their pain and their experiences seriously.



MENSTRUAL MANAGEMENT IN SCHOOLS

The material management of menstruation was highlighted as an issue within schools by participants. The most frequently cited barrier to adequate menstrual management was the ability to access toilets within lesson or exam time. Claire. 15, commented that: "During lessons they tend to stop you going to the toilet and then you have to explain to them in private: 'Oh I'm on my period. Can I go to the toilet please? It's important.' It's still no. If you are really uncomfortable they still won't let you go; you just have to like hold it in until the end of the lesson. Then if you have another lesson you have to try and go to the toilet as quickly as possible and it's impossible to get there."

These challenges were also recognised by male participants like Evan, 15: "If it was a girl teacher you'd kinda have to explain it, with a guy teacher you just have to say: 'Well I really need to', but they might not let you." Younger students who had not yet started menstruating were also aware of these difficulties, as Ruby, 10, explained: "Also what happens if you're in a lesson and your period kicks in and you ask the teacher if you can go to the toilet and they don't let you, and they'll be like: 'NO you have to wait, you have to wait', but you don't want to tell them in front of the whole class? They're like: 'No you have to keep learning, you have to wait to go to the toilet.""

There seemed to be a general concern raised in all focus groups about the inability to go to the toilet when needed due to strict restrictions on leaving the classroom or exam hall. This fed into participants' fears and insecurities about staining their clothes while at school. These fears and insecurities could lead to girls being distracted in class and exam situations, hindering their learning process and their ability to achieve highly in their academic work. Chella Quint, #periodpositive, highlighted the importance of challenging the current culture around toilet use and access in schools: "Schools need to be persuaded that this is one of the most important things they can do - not a bolt on or an extra. They fundamentally need to change the way that menstruation is managed in school. They need to let kids go to the toilet whenever it's needed."

Not only is access to toilets important for proper menstrual health management, but a lack of proper toilet facilities such as lockable doors, hot water and soap, and bins for used menstrual products, 88 was also cited as a problem by some focus group participants.

Beth, 15, told us: "There's only like two sanitary bins in the whole of school," and Ivy, 15, agreed: "At the beginning they didn't have any at all, I saw some [pads] on the floor, because there was literally nowhere else to put them." There were also concerns in this school about unisex toilets and boys having to see menstrual waste.

"I'm in school now and we're not allowed to go to the toilet at all – even if you have a reason you're not allowed to go to the toilet unless you have a note from the doctor, like not even from your parents, you have to go to the doctor... People like walk out of class and stuff ... it's like proper affecting people's learning and school and the government isn't seeing that."

ZARAH, 15, MIDDLESBROUGH



A LACK OF PROPER TOILET FACILITIES SUCH AS LOCKABLE DOORS, HOT WATER AND SOAP, AND BINS FOR USED MENSTRUAL PRODUCTS, WAS CITED AS A PROBLEM BY SOME FOCUS GROUP PARTICIPANTS.

Some primary schools across the country were mentioned for their lack of preparation to handle proper menstruation management, and criticised for not accommodating the needs of children who start menstruating early. For instance, resistance was seen by Emma Newton, Healthy Schools, regarding a girl who started her period while in Year 6. Her school suggested: "She can always go to the disabled"

toilet if she needs to." This kind of unsupportive action can further isolate young people who may already be feeling 'different' because they have started menstruating before their peers.

These negative experiences clearly show that changes need to be made so that all menstruators are accommodated within the school environment.



MANAGING MENSTRUATION WITHIN A RELIGIOUS CONTEXT

Religious traditions and cultures across the world dictate a variety of activities that are prohibited during menstruation. Constraints in activity due to religious belief were anecdotally recounted by several participants in the study.

In Northern Ireland, research has found that "sex, bodies and female bodily functions are seen as shameful, embarrassing and therefore to be hidden. This is particularly germane for all things relating to menstruation".90 In an interview with a school nurse the differences between Northern Ireland and the rest of the UK, were highlighted. She said: "Yes, it's much more conservative [in Northern Ireland]. And it's all very hush, hush and we don't talk about those things and there is an expectation that the families will deal with that kind of thing, and they just don't talk about it at home. And people are shocked if you [give them sanitary products], they want you to hide them when you give them to them, it's sad."

She continued: "Some schools wouldn't allow us to use the 'p' word or the 'v' [vagina] word [...] We had to say 'down below', we had to censor all the slides. We went to one particular school in town and the principal was adamant that we didn't say the 'v' word! So where you put the sanitary towel, where the tampon went, where the blood came from, dear help the children, it was up to their own imagination. But other schools wanted us to talk about the entire anatomy. And it really was down to the principal of the school, what their thinking was on it."

The use of tampons was brought up as a contentious issue in several different religious contexts. In Northern Ireland, this was seen across both Catholic and Protestant participants and in all cases referenced a moral judgment placed on tampons, relating to sexual maturity due to inserting them in

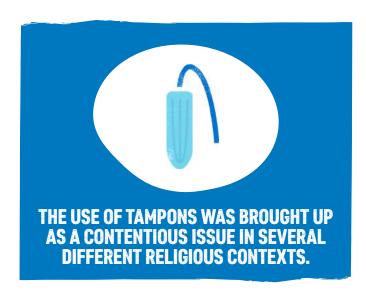
the vagina. Nicola, 13, and Janet, 14, had been told by their mothers that they were too young to use tampons; this was also reflected by older participants with a Muslim or Hindu religious and cultural background. When asked whether she thought there was a huge stigma around using tampons in Northern Ireland, a school nurse replied: "Oh huge, yes, oh yes. Some mums would say: 'Don't you dare tell them about tampons.' Possibly that's a little around virginity, and if you don't tell them any more about that orifice they won't experiment and they aren't going to realise anything else about it. There were some parents very adamant that the girls could not be told about tampons [...] it was too much related to sex."

While menstruation is an indicator that the body is preparing itself to be able to reproduce, the myth that first menstruation means girls are ready for sexual intercourse and pregnancy is problematic, as complications during pregnancy and childbirth are the second largest cause of death for 15-19-year-old girls globally.91 In any conservative society in which sexuality and sex are very much taboo subjects, this myth becomes a problem. Participants from Northern Ireland expressed the impact of these attitudes on their health and wellbeing. For some girls, the contraceptive pill is an option presented by their GP for controlling painful periods, but multiple participants described how they were not allowed this because it is also birth control. Monica, 15, explained how she went on the pill, as advised by her GP, but was then taken off it: "My mum, you see, it's also contraception and my mum's really religious, so she was just like: 'No, you can't be on that any more', so I had to come off." Experiences like this indicate that the negative social norm that girls who are prescribed the pill are sexually promiscuous, or will become so, still exists.

Many of the restrictions in Muslim, Hindu or Jewish contexts centred around praying, fasting, touching religious scriptures and interacting with men. In some schools, these beliefs were seen to be accepted, and went unchallenged. For example, Nazirah, 15, when asked how she felt about not being able to pray while menstruating, answered: "It's not something we avoid. It's something we are not allowed to do." Udoola, 15, spoke about fasting in reference to her dad: "Even when you are fasting, I go: 'Oh I'm not fasting today,' and then he won't call me for like seven or eight days." Nija, 15, commented: "When we are at [the] mosque, we can't touch or pray from the Quran and we can't fast either."

However, in other schools, these beliefs were followed at home, but notions of impurity, dirt and pollution were contested, and seen as outdated and misogynistic. Roha, 17, commented: "I'm Muslim and when you are on your period you are not meant to fast, you're not allowed to go to the mosque, you're not allowed to pray [...] I think it's because you are not meant to pray on your period because you're dirty and you can't talk to God when you are in that state or something like that. It all stems from it. Religion is what started everything in a way, you know if we have that in our minds for so long it's hard to change, but we should."

Jewish participants spoke of similar ideas of entrenched religious taboos and unquestioned differences between ancient religious scriptures and their interpretation in a patriarchal society. Faye, 17: "Well basically at my Mum's synagogue, it's more orthodox even though its reformed, so it should be more progressive. She wrote an article for the newspaper at the synagogue saying it [not touching the Torah] was ridiculous and it wasn't really a religious thing; she wrote about the medieval fear of blood, and, often coming from the culture, misogynistic practices." Rebecca, 17, said: "Yeah it's not actually written in the Torah or part of any scripture, it is just the patriarchal thing pervading through the religion when it



really shouldn't be. That's why masorti and reform are changing the way that we pray and the way that we act, when it is still following the religion it is just updating it for modern times."

Despite these modern challenges to some of the traditional cultural practices surrounding menstruation, it can be difficult to negotiate with religious beliefs and practices. Sara, 17: "It's hard because obviously if you are religious that's something that you believe in and you believe you are doing it for God. If we can [learn] in mosques, temples or wherever people go for worship, if they are being educated there it should be something more normalised and people should talk about it rather than [say]: 'Oh you can't come here, it's forbidden.'"

Young people highlighted the need to learn about social aspects of menstruation and the diversity of practices, taboos and beliefs across the world. Joy, 17: "My family is loosely Catholic, and until two or three years ago I had no idea that different religions treat periods differently. I think that needs to be part of your initial education about periods: actually, everyone's family is going to have a different reaction to it. I think you need to be aware other people are having different experiences due to their culture or religion."

Amika George, a young activist, said: "People are so closed-minded and you assume that your experience and your period is the same as everyone else's, but it's not."

POSITIVELY FIGHTING SHAME AND STIGMA

Young people also discussed the different ways that they have developed a positive attitude towards periods, either being seen to be breaking the taboos and conceiving of menstruation in a different manner, or actively embracing menstruation. In one focus group, we heard about boys giving their girlfriends a helping hand while they were on their periods. Sam, 15, said to another male student: "To be fair, don't you carry extra pads for [your girlfriend]?" Cory, 15, replied: "Yeah, normally I do."

Boys were accepting of the fact that their knowledge was flawed in regard to menstruation, but were willing to learn more to become more supportive of their female peers. Paul, 15, said: "We don't know everything but we know enough to know how it is and how it affects girls, and in some ways help out when we can." Others acknowledged that although they would prefer not to see blood, there was no reason to stigmatise girls for menstruating. lan, 15: "It's not something you'd want to see but I wouldn't say it's disgusting because it just happens, you can't control it." Some boys did not believe in menstrual seclusion or restrictions on activities while menstruating.

Sam, 15: "No, that's like restricting it, especially when you can't help it. ... But it's up to you, it's not up to other people."

The positive attitudes that girls mostly ascribed to menstruation were associated with the notion of growing up and maturity. Maisie, 10, shared that she was "a bit excited because then I know I'm starting to grow up, I'm looking forward to growing up". However, this excitement diminished as the girls got older. Nazirah, 15, found: "I thought I'd be seen as a woman and proper mature, but that didn't really happen: it's just painful and annoying!"

Amika George, a young activist, spoke to us about the power of social media and its ability to dissect and break down menstrual taboos at a quicker rate: "I think because of social media in the last few years things like periods and other taboo topics are becoming less embarrassing. If you think about gay rights, people used to keep so hush hush, but in my generation, in this decade, people are breaking taboos left right and centre, it's such an empowering feeling. If periods are the next thing that becomes completely normalised it would be amazing."



PERIOD POVERTY IN THE UK

The affordability of disposable menstrual products and the relationship between price and quality was mentioned by a number of participants. Most participants in this study were regularly attending school and relied on their parents to buy them menstrual products each month. However, little was said about their parents' ability to pay for these items. An exception is Claire, 15, who commented that: "The price range is just ridiculous and my dad doesn't like paying for them."

The issue of not being able to afford sanitary wear, now widely known by the phrase 'period poverty', was broached by a number of key informants with varying views on the subject. Tina Leslie, Freedom4Girls, recounts her experience of the issue, saying that she had heard that: "Girls have been bringing sanitary towels in for their friends because they can't afford them. I've heard that some schools are charging for sanitary products, around 10 or 20 pence, and that money could go towards food, lunch money or the bus fare home. I've heard of girls just missing school."

According to the charity the Trussell Trust, 1,182,954 three-day emergency food supplies were provided to people in crisis, of this 436,938 went to children across the UK. 92 And information from the Trussell Trust in Scotland indicated that thousands of women and girls also required free access to menstrual products. 93

Emma Murray, North West Bristol Foodbank, told us that women struggle to afford menstrual products, particularly if they are having to support a household of girls or other young people who menstruate. She said that: "People have asked us for toilet rolls and sanitary towels, especially if they have three or four girls in their family, because that is a big expense and they have real difficulty trying to deal with that on top of the cost of food." She mentioned that taboos surrounding menstruation may be holding women back from asking about menstrual products in foodbanks due to embarrassment and discomfort.

We understand poverty in the UK to mean relative poverty. Poverty can be understood primarily as a lack of money and not having what others have for a decent quality of life. However, it is not just the condition of being without adequate food, money etc. but goes beyond material things; living in poverty can affect the way a person is treated and how they feel. It can mean feeling powerless and excluded, leading to a loss of dignity and self-esteem.⁹⁴

It has been well documented that women, and that includes young women, are more likely to be responsible for managing the household budget, even if men control the overall household finances. Wanting to protect loved ones from the effects of poverty can mean women are more likely to go without things for themselves. It is because of this that they have been described as the

"I do think pads should be free because they're purely needed with girls, 'coz it's a natural thing, like every girl will end up having her period at some point in their life and not everyone can afford 'em."

SOPHIE, 14, HULL

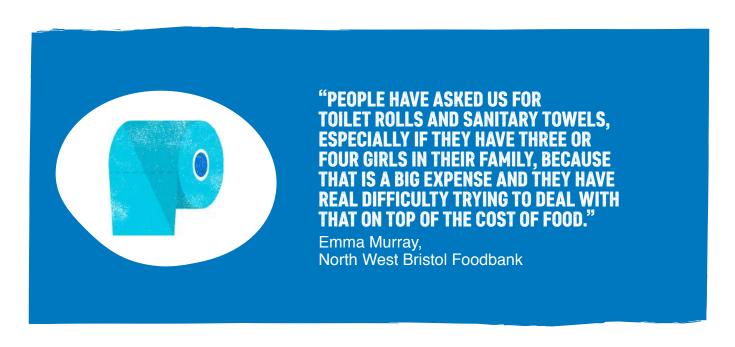
'shock absorbers' of poverty. 96 Ridge 97 found that younger girls were very aware of and understanding about their parents' financial circumstances and therefore limited what they asked for out of the household budget. "By striving to protect their parents from the painful awareness of how poverty is impacting on their childhood they engaged in a range of strategies, including the self denial of needs and desires, moderation of demands and self exclusion from social activities."

The example of one pupil, who started her period aged 11, and who told BBC Radio Leeds in 2017 that she had taped toilet roll to her underwear and missed school every month because she couldn't access sanitary protection shows clearly the difficulties some girls face: "I wrapped a sock around my underwear just to stop the bleeding, because I didn't want to get shouted at," she said. "I once Sellotaped tissue to my underwear. I didn't know what else to do... I didn't get any money because my mum was a single parent and she had five mouths to feed, so there wasn't much leftover money in the pot to be giving to us." "98"

Plan International UK's survey on menstruation⁹⁹ found that one in 10 (10 per cent) of girls have been unable to afford sanitary products. It also found that:

- One in seven girls (15 per cent) have also struggled to afford sanitary wear.
- One in seven girls (14 per cent) have had to ask to borrow sanitary wear from a friend due to affordability issues.
- More than one in ten girls (12%) has had to improvise sanitary wear due to affordability issues.
- One in five (19%) of girls have changed to a less suitable sanitary product due to cost.

In October 2017 Plan International UK also co-hosted the first ever UK Period Summit with No More Taboo and Freedom4Girls addressing shame, stigma, education. health and period poverty in its many different forms. 100 We asked attendees to map, wherever possible, their case study evidence of period poverty to allow us to create the first ever map of period poverty. What we heard was a series of stories from across the UK, not concentrated in one region or city. We found that a large number of activists on this matter had been inspired to act due to their own period poverty or the plight of someone they knew. We heard from grassroots individuals who were trying to help family and friends, 101 and from







larger organised groups like local political parties, foodbanks¹⁰² and supermarkets, who were collecting sanitary wear for girls and women in their local area. Examples are emerging like the 'Monthlies' project in Whitehawk Foodbank, Brighton. 103 We also heard how certain groups, for example homeless women¹⁰⁴ and asylum seekers and refugees, 105 were particularly vulnerable and had specific needs that needed addressing. The summit also highlighted the importance of being aware of likely further stigma and discomfort for the one in four homeless young people who identify as LGBT+.¹⁰⁶ From this figure we can assume there will be some who are trans or non-binary menstruators facing additional barriers.

Concerns regarding the affordability of menstrual products have often been dismissed in public discussions, as an outcome of girls wishing to be seen with the cooler brands. Furthermore, the question of quality of those products at the cheaper end of the market has been rejected by some elements of the press. But research and anecdotal evidence indicate that product quality often impacts the ability to stay clean effectively and should be taken seriously as part of the wider issue of period poverty. In their 2017 research with homeless women. No More Taboo found: "Other participants we spoke to struggled with the relationship between quality and price. Although some sanitary products are available from discount

OF GIRLS HAVE BEEN UNABLE TO AFFORD SANITARY PRODUCTS

GIRLS HAVE ALSO STRUGGLED TO AFFORD SANITARY WEAR.

GIRLS HAVE HAD TO ASK TO BORROW SANITARY WEAR FROM A FRIEND DUE TO AFFORDABILITY ISSUES.

OF GIRLS HAVE HAD TO IMPROVISE SANITARY WEAR DUE TO AFFORDABILITY ISSUES.

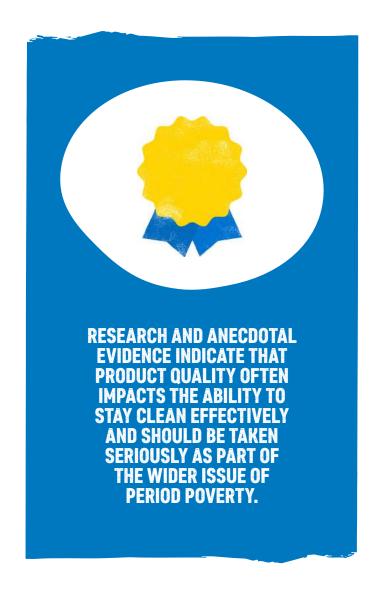
GIRLS HAVE CHANGED TO A LESS SUITABLE SANITARY PRODUCT DUE TO COST.

stores such as Poundland fairly cheaply, a client in a shelter in Leicester told us that she buys "as cheap as you can, really... but you don't want to go too cheap and go value cause then they just leak". 107

Therefore, while access to menstrual products is a key issue for girls in poverty, it is also important to consider shame when seeking to address period poverty. Russell and Darian demonstrate how income poverty leads to time poverty, stress and ill health from managing budgets that won't stretch. In addition, a particularly persistent theme that emerges is shame. Shame from poverty covers things like the challenge of not 'fitting in', to developing friendships, 108 to not having the right clothes, and not being able to go to certain shops and so on. 109 Very importantly, Ridge's study¹¹⁰ found that girls adopted protective strategies to hide their poverty, for example buying dinner separately from friends or not claiming their free meal at school. As we have already discussed in this paper, period taboos often lead to girls feeling shame about their bodies and menstruation. When this shame is combined with the shame associated with poverty, the experience can have disproportionately negative impacts on girls' lives.

When we combine these multi-layered challenges to managing on a small budget, and then bring in the well-established taboos and shame we know surround periods and menstruation, it becomes clear that struggling to manage one's period whilst experiencing poverty is very likely to be both challenging and a source of shame. Especially if young people lack accurate and practical information about menstruation management and their bodily cycles.

Recently there have been new ideas¹¹¹ to help tackle the fact that for too many



girls, dealing with their period each month is proving a tough challenge. Distributing products at school, including reusable products, could play a role in ensuring that no girl struggles to afford sanitary wear. But it must be ensured that the methods used do not exacerbate the existing stigma and taboo those living with poverty already face. There was significant agreement that the response to period poverty needs to be more nuanced in that distribution is only one part of a wider solution to a complex problem. Girls, parents and schools need comprehensive menstrual hygiene management education and training to help tackle the stigma and embarrassment around menstruation that, along with cost, are at the root of the problems girls are experiencing.

CONCLUSION

This research was born from a desire to respond to the issues girls across the UK raised as being important to them. Menstruation – the way that it is (or isn't) discussed, the stigma and myths that surround it, and the often poor quality information and education that are provided/available was one of those issues. This research. shows that the situation for girls and others who menstruate is not a positive one. Girls and boys are mirroring adults' internalised negative reactions to periods, framing them as unpleasant, and connecting them to lower mood, pain and weakness. We must also recognise that young people are not receiving the information they need to truly understand menstruation in the context of growing up.

The ever-present stigma and taboos that girls are facing impact significantly on how they experience and understand menstruation. Mothers are consistently expected to be the main sources of information about menstruation. Parents often feel unprepared, under-resourced and uncomfortable talking about menstruation, which can serve to reinforce the negative attitudes that surround the subject.

The taboos and lack of education surrounding menstruation have had a number of tangible, negative impacts on girls' day-to-day lives. The lack of knowledge and understanding about their own bodies, due to reaching first menstruation and puberty without sufficient emotional support and resources, has been found to negatively affect their future sexual and reproductive health. Another study has shown that negative attitudes towards menstruation by peers, and related sexual harassment, can affect girls' motivation to study, their self-esteem and their self-worth, which can lead to them having lower

ambitions and career expectations. The silence surrounding menstruation also leads to a lack of knowledge and choice among young people about reusable menstrual products, and therefore the possible options regarding their own bodies. The lack of information about both reusable products as well as how to dispose safely of non-reusable menstrual products, means that this remains an ongoing environmental concern.

This lack of support and education in schools for girls and others who menstruate, about menstruation, can also feed into school absenteeism, 114 and lead to menstruators missing out on activities such as sport, due to worrying about leaking, as well as potentially affecting their views about physical exercise in the future. 115

Additionally, the lack of knowledge about what counts as 'normal' in terms of menstrual health can lead to the late diagnosis of serious conditions such as endometriosis. polycystic ovary syndrome (PCOS), premenstrual dysphoric disorder (PMDD), 116 or gynaecological cancers. The menstrual cycle is also known to affect many chronic health conditions, such as anxiety, asthma, depression, irritable bowel syndrome, migraine and epilepsy, yet very few people are aware of this link. Due to this lack of information, a girl experiencing low mood may be prescribed antidepressants rather than being asked to track her cycle, and identifying a hormonal cause. In this way menstrual taboos are actually harming people's health and well-being.117

The young people we spoke to were clear: they want periods to become normalised, and not a topic of embarrassment or disgust. Evan, 15 said that "they [periods] shouldn't be seen as a



negative thing" and Sam, 15 suggested trying "to make it [menstruation] less embarrassing in a way, so that they [menstruators] feel less self-conscious about it". Maria, 18, illustrates the current disparities between the ways that menstrual blood and other forms of blood are perceived: "We're ok with seeing someone's body split open or corpses or blood [on

TV], but my God if a girl pulled a tampon out with some blood on – you would get so much hate. I think, if a TV show did that."

In order to achieve this aim of normalisation, it is clear that change needs to occur not just in schools but also in the home, and across society.

RECOMMENDATIONS: THE MENSTRUAL MANIFESTO



Listen to girls and other menstruators

They are the experts on their own experiences and know what kind of education and information they want. Young people in England are currently campaigning in their thousands for high quality RSE, led by the Department for Education and delivered in their schools. Their ideas will guide the solutions we need. Young people must also be consulted when guidance is reviewed in Northern Ireland, Scotland and Wales. It is clear that there is an egregious lack of knowledge amongst girls and young people around menstruation and without their inclusion in the consultations currently under review, it is unlikely that new guidance will address this gap. In particular, young people living with poverty are often the most unheard: they need to be put at the heart of discussions about solutions and policy making on period poverty.



Change the conversation

We welcome the exceptional efforts made by a number of political leaders to end period poverty, shame and taboos. We now need more senior decision makers, elected politicians, and other leaders to become menstruation champions, to ensure the topic remains high on the agenda and that taboos are dissolved by making it an everyday subject.





Ensure real world education for all

All primary and secondary school pupils should have specific teaching on menstruation. Girls and boys should **be taught about menstruation in integrated classes** but also given the space to learn and **speak about menstruation separately**. This methodology should include all menstruators.

Menstruation should be taught regularly throughout the school year, every year and not limited to biology (although accurate biological information is critical) but also cover the physical, emotional, social and practical aspects, as well as ensuring that the needs of people with different abilities are catered for. It is essential to make sure that teaching materials emphasise the fact that everyone's period and experience of menstruation is unique, help identify healthy and unhealthy symptoms, and include the positive aspects as well as the challenges.

School policy and infrastructure must recognise the needs of girls and others who menstruate. Toilets should not be locked during the school day. The assurance of free access to toilets when menstruating is key to tackling anxiety, in particular over leaking, and must be allowed as part of healthy menstrual management within every school. Toilets within schools should include at least one toilet with a sink in the cubicle and have adequate provision of bins for disposable menstrual products; this should apply to unisex, accessible and boys' toilets as well as girls', to support all genders who menstruate. Furthermore, every school must support all teachers to be able speak about menstruation and puberty without embarrassment or shame. This can be enabled through widely available information, teacher training and the language used and promoted by senior leaders. Particular attention should be paid to accurate information and the removal of myths and shaming language.

The provision of online resources for parents is vital. In order to comfortably speak to and support their children on the topic of menstruation, knowledge gaps from parents' own education need to be filled and embarrassment and shame tackled in a safe environment. The information provided should include the respective features and benefits of each method of menstrual health management from a practical, health, financial, and environmental perspective.



End period poverty

Local Authorities, in discussion with local researchers and activists, should pilot P-card referral systems for those in period poverty. This model is based on the C-card scheme used widely to support condom distribution and safe use combined with good quality sexual health education and regular contract with a trained professional. Such systems should ensure that those girls and others who menstruate, who are finding it difficult to meet their menstrual needs are given education and training on menstruation management and access to a variety of products, and supported to tackle embarrassment and communication taboos that cause difficulties.

Our research highlighted the specific barriers faced by certain groups of people, those facing homelessness, those with disabilities and menstruators who may be non-binary or trans. Specific consideration should be given to these groups who face additional barriers when ensuring the provision of menstrual management education as well as access to menstrual products.



Companies act as part of the solution

Menstrual management product companies should agree to abide by a set of principles around their engagement in schools. These principles should ensure that the speakers provided by these companies are adequately trained to impart accurate information about biology, and social and practical matters. They should also give information about all available (both disposable and reusable) menstrual products.

All packaging for menstrual products should include information about the materials/ingredients used and the environmental impact of all parts of the product, including packaging and applicators. Information about a product's environmental impact should take into account all aspects of the production process and the extent to which the product will biodegrade, so that consumers can make informed choices.

The Advertising Standards Authority should work with advertising agencies, menstrual product companies and journalists to develop guidelines about the accurate and positive portrayal of menstruation. Young people should also be included in this conversation to ensure that the guidelines impact positively across all areas of their lives.

Media literacy training must be provided in schools to complement menstrual education across the curriculum, to help students understand the motives and themes underpinning advertising campaigns and online services promoting menstrual and other products.



Invest in research

A cross-government working group should be set up on menstrual health management, with a focus on investment in research and pilot projects on menstrual health management and quality menstrual education for all.

Investment by the UK government and devolved administrations in research that investigates the outcomes of menstrual policies and interventions adopted by local bodies as well as governments internationally is required. Specific research needs to be conducted into the experiences of adolescent menstruators and Menstrual health management in the UK.



APPENDICES

APPENDIX 1: INFORMANTS AND ADVISORY PANEL MEMBERS

Daisy Binnie BA Hons (Peace Studies)
PGCE is the Family Liaison Worker at a
school for 3-19-year-olds with severe learning
disabilities and profound or multiple disabilities.
The school uses advocacy to ensure every
child has a voice and no one is excluded.

Margaret Casely-Hayford was appointed Chancellor of Coventry University in May 2017. She is a champion of diversity and is a trustee and Chair of international development charity ActionAid UK, which works with some of the poorest people in the world, focussing particularly on woman and girls. She is on the Board of the Co-op as an elected nonexecutive, and is also a trustee of the Radcliffe Trust, one of Britain's oldest charities, which supports development of skills in classical music and traditional arts and crafts. Margaret is chairing a diversity review carried out by CILIP (formerly the Libraries Association) into the Carnegie and Kate Greenaway Medals. Margaret was a lawyer for over 30 years and has been a Government appointed nonexecutive director of NHS England, a trustee of Great Ormond St Children's Hospital Charity and of the Geffrye Museum from 2000 to 2008, and she is a member of the Women's Equality Party Steering Group.

Gabby Edlin is the founder of Bloody Good Period. She has a Masters in Applied Imagination in the Creative Industries and is a social innovation creative, activist and feminist. Her organisation provides period supplies for asylum seekers, refugees and others who can't afford them in the UK – her distribution network includes asylum seeker drop in centres, community groups catering for refugees, and foodbanks.

Janie Hampton is the founder of the World Menstrual Network, author of health and sex education books, curricula and reproductive health policy for UK DfID, and has 37 years' experience working in women's health across the world. As an international health planner for governments and NGOs in Africa, Bolivia, the Middle East and the South Pacific, she has demonstrated a strong commitment to the third sector, especially in relation to the empowerment of girls, in UK and sub-Saharan Africa. Her work has led to practical strategies for reproductive health, which remain UK government policy. She has worked on menstrual health projects in the UK, Zimbabwe and Malawi with the Girl Guides.

Pamela Hampton BA, MSc is a statutory social worker working with over 11s. Pamela has over 15 years' experience in the charity and public sectors working with children, young people and adults on issues such as rape, addiction, sex work, homelessness, domestic violence, HIV, mental health and criminal justice. She has previously worked as a trustee and counsellor for Womankind; a manager of a women's refuge; for ReThink; and as project manager for the Racial Equality Council and the Terence Higgins Trust.

Terri Harris is currently a Senior Research Associate, focusing on child marriage and refugee gender perspectives. She has previously focused on menstrual health in East Africa and the Middle East, providing reusable menstrual products to women in Muslim communities. She has co-authored a toolkit on menstrual health and Islam, and focuses on understanding menstrual health through the lens of religion and culture. She is also working to challenge period poverty in the UK with women who access foodbanks.

Danielle Keiser was responsible for helping drive the early success of international Menstrual Hygiene Day (28 May) for WASH United. Danielle is now the Co-Founder of

the Menstrual Health Hub (MH Hub), a global and interdisciplinary platform for menstrual health actors and practitioners. The MH Hub seeks to overcome geographical and thematic barriers to help professionalise a fragmented field and strengthen collective impact at the local, regional and global level.

Sally King is the founder of Menstrual Matters, a not-for-profit research and information hub about the role of the menstrual cycle, and hormonal medications, in ill health (www. menstrual-matters.com). The project also seeks to investigate the reasons why medicine, and wider society, continue to stigmatise the menstrual cycle (especially menstruation) and how this is linked to gender-based discrimination and health inequalities. Sally previously worked for Oxfam GB, Care International, and Amnesty International before starting a PhD in the sociology of medicine at King's College London.

Tina Leslie is a public health specialist at Leeds City Council and Founder of Freedom4Girls which campaigns for safe sanitary protection for all people in the world who menstruate. It provides a short-term solution to lack of sanitary protection for girls and women from low income families in Leeds and surrounding areas and encourages people in the UK to donate to foodbanks, women's and refugee agencies, by highlighting period poverty, lack of menstrual education, choice of products and environmental impact, and encouraging research in the UK.

Alethea Osborne, MA, MPhil (Oxon) in Modern Middle East Studies, focussed on menstrual taboos in Jordan: how women's perception of the menstrual process has been shaped by the global forces of modernity, medicalisation and neoliberalism. Alethea also worked with OxPolicy on a 2016 report on how menstruation is taught in schools in the UK and how this should be improved. Alethea also co-founded linguistic, medical, and legal support for refugees living in Calais. In 2016 Alethea worked in Zambia promoting sexual health

understanding and education. Currently, she is based in Jordan as a researcher for the Ammanbased think tank The Wana Institute. She is part of their human security team and focuses in particular on Countering Violent Extremism (CVE) in Jordan and neighbouring countries.

Cressida Peever is a playwright whose work focuses on women and the body. Her comedy 'Sex Education', deals with the treatment of sex education in UK schools and ran at the Edinburgh Festival Fringe in August 2017.

Chella Quint coined the phrase 'period positive', developed the idea of period positivity, and founded the #periodpositive campaign to address menstrual taboos, using comedy and design to challenge attitudes through unbranded education. A Sheffield-based comedian, artist, writer and former head of PSHE, she holds a Master's degree in education from Sheffield Hallam University. Chella was featured in Radio 4's A Bleeding Shame, and contributed a chapter on periods to Gemma Cairney's Open. Her education and training have been shared internationally, including through the Wellcome Trust, Sex Education Forum, Girlguiding UK and the Society for Menstrual Cycle Research (SMCR), and her work was shortlisted for the 2017 Pamela Sheridan Award. Recently, the #periodpositive project was selected by leading sexual health charities Brook and FPA as best practice in preparation for the new RSE curriculum. In October 2017, Chella's #periodpositive research and pilot school charter mark programme were accepted as a commission with Learn Sheffield, supported by Sheffield City Council, Sheffield Public Health, and included in the city's Young People's Sexual Health Action Plan to make Sheffield the first #periodpositive city in the UK.

Mandu Reid has 15 years of public sector experience, including at senior level, across a breadth of policy areas and disciplines. She is a qualified and accredited project, programme, and risk manager with a track record designing and delivering complex operations, developing

policy, and strategic planning. Her commitment to social justice and gender equality led her to found The Cup Effect (www.TheCupEffect.org), a charity focused on the relationship between menstruation and empowerment that seeks to raise awareness about menstrual cups and make them more widely available across the world. She is of dual Malawian/British heritage and was educated in Southern Africa. She has been a governor of a struggling inner London secondary school, is a fellow of the London School of Social Entrepreneurs, an RSA Fellow and member of the RSA's International Development Steering Group, and was invited to contribute to the Kenyan Government's Technical Working Group convened by the Ministry of Health to devise their national menstrual hygiene policy and strategy. Mandu also brought the Menstrual Manifesto idea to this report.

Dr Kay Standing is a Reader in Gender Studies at Liverpool John Moores University. Her research interests are in menstrual health management programmes and reusable menstrual products. She is also part of the Tender national partnership network, working in schools to prevent domestic abuse and sexual violence amongst young people by promoting healthy relationships.

Robyn Steward is an autism consultant working in the field of aAutism as a trainer to professionals, and with individuals and their families. Robyn is author of 'The Independent Woman's Handbook for Super Safe Living on the Autistic Spectrum' (2013, Jessica Kingsley Publishers) which has sold over 2000 copies and has been translated into Russian. She has contributed to many other books and co-authored journal papers. She is a visiting research associate at the Centre for Research in Autism and Education. Robyn is currently working on a book for autistic people about periods. Earlier this year Robyn sent out a survey about periods and received 458 responses. Robyn presented her work in June at the Society for Menstrual Cycle Research conference in Atlanta. www.robynsteward.com Chloe Tingle has been working on period poverty since 2014, including on the taboo and stigma surrounding menstruation in Bolivia, Uganda and Nepal. With a Master's in Engineering Design, she focuses on problem solving technical elements of menstrual health. In 2015 she founded the social enterprise No More Taboo which currently focuses on tackling period poverty in the UK, drawing on her experiences overseas and work in the voluntary and third sector. Through this work she has developed educational and training resources, workshops and support systems for people living in period poverty as well as advocating for a more 'period-friendly' world with the general public by promoting the use of reusable sanitary products and breaking down the taboos that still exist here in the UK. No More Taboo also have an educational arm. teaching about menstruation in a school setting focusing on the 'real life impact' of menstruation.

Dr Karen Trewinnard BM FFSRH DGUM, FSRH (Faculty of Sexual and Reproductive Healthcare) trainer in sexual health, and medical appraiser. Dr Karen Trewinnard has worked for the NHS and independently in community sexual health for 35 years as a clinical provider, health educator and trainer. She has experience in the UK and many other cultural and multicultural settings. She is a Fellow of the FSRH and is currently the FSRH Wessex regional training advisor. She works as an independent sexual health care provider in the UK and trains nurses and GPs in aspects of sexual health. She also carries out voluntary work in sexual health education training with NGOs in Burma, Zimbabwe and India.

Shailini Vora upon joining No More Taboo as a Director, Shailini designed and conducted a research study with over 40 homeless women in the UK to understand in depth their needs and challenges when it comes to managing menstruation with limited financial and social resources. This research informed the development of a programme aimed at tackling period poverty, and alongside Chloe and the

team at No More Taboo, she delivered numerous workshops for vulnerable menstruators and training workshops for third sector practitioners. Alongside her work at No More Taboo, Shailini also writes and researches for other NGOs and academic institutions, and has been active in organisations campaigning against genderbased violence, structural inequalities facing ex-offenders and the global financial system.

Key informants

David Cooper and Beth Burke, Batley Girls' High School

Mr Cooper is the Co-Head of Batley Girls' School and is also a sociology teacher. Miss Burke is in charge of delivering PSHE to young people at Batley Girls' School and is a welfare officer. Both provide staff perspectives from within a girls' school.

Andrea Cowans, Leeds City College

Andrea Cowans is the Director of Student Life at Leeds City College. Leeds City College is one of the largest further education colleges in the UK with over 26,000 students. These students are from diverse backgrounds with 127 countries represented. The college specialises in apprenticeships and English as a second language. Andrea has recently introduced a 'Feminine Freedom Campaign' where any student can access menstrual products for free.

Mary Creagh, Labour MP

Mary Creagh is the Labour MP for Wakefield and has been a Member of Parliament since 2005. Her roles have included Shadow Secretary of State for International Development and Shadow Secretary of State for Environment, Food and Rural Affairs. She also has a particular interest in human rights and children's issues.

Amika George, young campaigner

At age 17, Amika started a campaign called #FreePeriods in response to news articles about period poverty. She is keen to see things change for young people in the UK.

Monica Lennon, Scottish Labour MSP

Monica Lennon has been a List MSP for Central Scotland since 2016 and is currently Shadow Minister for Inequality. She was also a member of South Lanarkshire Council from 2012-2017. Her interests include equality and social justice. She has brought the campaign to end period poverty in Scotland forward to the Scottish Parliament and has been part of a pilot scheme to provide free disposable menstrual products to over 1,000 women and girls in need through foodbanks in Aberdeen.

Emma Murray, North West Bristol Foodbank

Emma Murray is the manager at North West Bristol Foodbank in Lawrence Weston, Bristol. She became interested in the topic of reusable menstrual products while on a WASH trip to Kenya.

Emma Newton, Healthy Schools Officer

Emma Newton is a Healthy Schools Officer in Leeds. She has been involved with the teenage pregnancy team for over 12 years; however, this has now expanded to cover all health and well-being. Emma's role is delivering training to school staff and delivering sexual health training to wider practitioners; the main body of her work is around the delivery of PHSE sessions to children in secondary and primary schools.

Chella Quint (see p.56)

Paula Sheriff, Labour MP

Paula Sheriff is Labour MP for Dewsbury and has been a Member of Parliament since 2015. She is Shadow Minister for Women and Equalities and has also served on the Health Select Committee. Her most well-known campaign has been for the UK to abolish the tampon tax; she has also been instrumental in opening up discussion of menstruation in Parliament.

Craig Whittaker, Conservative MP

Craig Whittaker is the Conservative MP for the Calder Valley. He has been a Member of Parliament since 2010 and is currently an Assistant Whip. He has particular interests in education and children's issues and has also served on the Education Select Committee.

APPENDIX 2:

INFORMATION ABOUT THE YOUNG PEOPLE INVOLVED IN THE FOCUS GROUPS

In **England**, we visited schools in Bristol, Devon, London, Sussex and Yorkshire. We conducted eight focus groups: six groups were female only, one was male only, and one was mixed. We spoke to 64 young people in total: 56 females and eight males. The young people were between the ages of nine and 18. We visited two grammar schools, a technical college, a state primary school and two academies. Two of the schools were girls' schools and the rest were mixed. We talked to students from diverse backgrounds:

- Sexuality: heterosexual 82%, LGBTQ+ 6% and 'prefer not to say' or 'none' 12%
- Ethnicity: White British 49%, Asian British 40%, Black African British 5%, Mixed White and Asian British 1.5%, White British and Albanian 1.5%, White Ashkenazi Jewish 1.5%, White British, Australian, Latvian 1.5%
- Religion: 45% None/Atheist, 35% Muslim, 9% Christian, 5% Hindu, 3% Catholic, 3% Jewish
- Disability: 6% students disclosed that they had some form of disability.

Each focus group conducted was between 35 minutes and 1.5 hours and with a minimum of five participants and a maximum of 12. All quotes have been transcribed directly. The topics focused on were: experiences and confidence, education, culture and social norms, and menstrual products.

In Northern Ireland, four focus groups were conducted with between three to six girls in each. Ages ranged from 12-24. Interviews with key professionals were also conducted, including teachers, school nurses, an RSE teacher from a special education school, a school vice principal, representatives of CCEA (Council for the Curriculum, Examinations and Assessment) who wrote the RSE guidelines, Sexpression (http://sexpression.org.uk/ a student-led charity that facilitates sex and relationship lessons for young people), 118 Storehouse Foodbank, Home-Start, Women's Aid, the Green Party, and GenderJam (https://genderjam.org.uk/ a charity run by and for the young transgender community in Northern Ireland. 119 In Northern Ireland 20 young people participated in total: 17 through focus groups, one young trans man through GenderJam, and a young woman and a young man working on sexual health issues through Queen's University, Belfast.

School demographic breakdown for focus groups conducted in England

All statistics are from www.compare-school-performance.service.gov.uk

School	Location	Number of students and % female	Type of school	Ofsted	Pupil Premium (% of students)	Students whose first language is not English
The Henrietta Barnett School	North London	745 (100%)	Girls' grammar	Outstanding	4.5%	36%
UTC@Harbourside	Newhaven	82 (22%)	Technical college 14-18 years	Not available (too new)	29%	4%
Leeds East Academy	Leeds	663 (52%)	Mixed academy	Requires improvement	70%	23%
Batley Girls' High School	Dewsbury	1,227 (100%)	Girls' academy	Outstanding	34%	71%
Churston Ferrers	Torbay	971 (56%)	Mixed grammar	Outstanding	9%	2%
Ashley Down Primary	Bristol	419 (48%)	Mixed primary	Outstanding	9%	9%

APPENDIX 3:

FOCUS GROUP QUESTIONS FOR THOSE GROUPS CONDUCTED IN ENGLAND

General experience of periods

- 1. Can somebody tell me what a period is?
- 2. Five words/phrases to describe periods (either written on post-its or shout them out). Why did you pick those words?
- 3. Who thinks that periods are embarrassing and why?

Education/confidence

- 4. When did you first learn about periods and who taught you about them?
- 5. What have you learnt about periods at school? When did you learn this?
- 6. Where else have you learnt about periods?
- 7. Girls: How prepared did you feel for your first period?
- 8. What would you like to see change about the way periods are taught?
- 9. Who do you talk to about periods?
- 10. Who would you like to talk to you/who would you have liked to have talked to you about periods? [Possible card activity with options for younger groups e.g. friend, teacher, mum, dad, sister]
- 11. Who do you talk to in your family about periods? What do you talk about?
- 12. Girls: Which men or boys do you talk to about your period? What do you discuss with them? What do you think they think about periods?
- 13. Boys: Who do you talk to about periods?
- 14. Boys: How do you talk about periods with your male friends?
- 15. Boys: How do you act around girls when they are on their period?

Products

- 16. What products do you know about?
- 17. When did you learn about the products and who from?
- 18. Have you heard about menstrual cups or any different types of product to those discussed already? What do you think about them?
- 19. Girls: Do you have any worries or concerns about using the products you use?
- 20. Girls: What kind of products would you like to use?
- 21. Girls: Has there ever been a time when you didn't have a sanitary product? What did you use? What happened? Why didn't you have one?
- 22. Who would you ask if you didn't have a sanitary product?

Cultural taboos and social norms

- 23. What do you avoid or are you not allowed to do when you're on your period?
- 24. How much do you think religion or culture influence your feelings and attitudes about menstruation?
- 25. What sort of positive attitudes to periods have you seen/heard?
- 26. What sort of negative attitudes to periods have you seen/heard?
- 27. How do you think periods are portrayed in the media?
- 28. What would you like to see in terms of the culture and attitudes around periods?
- 29. What do you find challenging or difficult about having your period? What do you do about these issues? Does school support you?
- 30. What have you heard about periods that you're unsure of, or you don't think is true?

Conclusions

- 31. If you had one question about periods what would it be?
- 32. If you had some words of wisdom that you would give to your younger self about periods, what would they be?

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