# there will be blood

MENSTRUAL INEQUITY IN THE UNITED STATES

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Insights & Lessons Learned

## **OVERVIEW**

The menstrual movement began abroad when the media brought attention to student absenteeism caused by improper menstrual care.[1] Privileged individuals from Western nations sent aid to other countries,[2] but ignored rampant domestic inequity. Around 2015, activists highlighted the millions of Americans who lack access to proper menstrual care, otherwise known as "period poverty." In addition, "menstrual inequity" is a larger systemic problem in the U.S. that includes lack of access to products, hygiene, and education, and leads to the loss of socio-economic opportunities for all menstruators. Our team chose the United States as our boundary to bring awareness of the unacknowledged systemic inequity that harms people in need. This report covers how US institutions systemically perpetuate rooted stigma and oppressive, sexist structures that exacerbate menstrual inequity.

Not all menstruators are women. Non-binary individuals, transgender men, and people who are intersex and born with female organs can have periods. "Women/girls" will be used in this paper exclusively for research conducted with females, and "menstruators" will be used otherwise. "Menstrual health products" will be abbreviated as "MHPs."



Mental models of menstrual stigma will be highlighted in beige.

## **MOTIVATION**

Our team members have personally dealt with menstrual disorders, shame discourse, and secrecy at school. These are common experiences for millions of menstruators across the U.S. Despite our personal struggles, we acknowledge that we come from a place of privilege, as at-risk populations face major health consequences as a result of shame discourse. Stigma leads to societal silence on menstrual inequity, resulting in debilitating consequences for individuals. Our goals are to decrease stigma, normalize conversation about menstruation, and uncover systemic aspects of menstrual inequity that can be addressed through social action.

## RESEARCH METHODS

News articles, blogs, medical dissertations, research papers, books, government reports.

20+ in-depth interviews (researchers, activists, state legislators, non-profits, American Civil Liberties Union, gynecologists, lawyers, menstruators).

Key primary resources and guidelines utilized by menstrual activists and educators.

<sup>[1]</sup> Schmitt, Maggie. Personal Interview. 10 April 2020.

<sup>[2]</sup> Cotropia, Christopher. Personal Interview. 28 May 2020.

## CHALLENGE LANDSCAPE



## School Policies & Attitudes

Painful period cramps and symptoms are the most common inhibitors of student performance.[3] Policies prevent nurses from giving off-the-counter medication, so many students struggle to focus and leave early. Nurses may not be allowed to assist students with disabilities with their periods or even accompany them into the bathroom.[4] School policies exacerbate barriers to menstrual health for at-risk students. For example, Chicago's Noble Charter Schools' strict bathroom policies caused multiple infections for girls unable to change their products. Many students stained their uniforms and some received demerits for unsanctioned bathroom trips.[5]

## Absenteeism & MHP Access

While bathrooms are clean and prepped with toilet paper, towels, and soap, "75% [of nurses say] bathrooms are not well-stocked with menstrual products." [6] Two-thirds of students stress about not having MHPs at school, [7] which impedes their abilities to focus on schoolwork and perform well. [8]

In a study of 697 females, Cotropia emphasizes 92% needed MHPs at school, but only 42% went to schools that provided MHPs, most for a charge. 12.7% missed school altogether and double the amount leave early due to symptoms or inaccess.[9]

20% of teens struggle to afford MHPs.[10] Students who can't afford MHPs are "5.89 times more likely to miss school compared to those that could afford MHPs."[11] Many respondents were "ashamed,"[12] and scared of being negatively judged for not supplying their own MHPs. 73.6% were uncomfortable with approaching administrators for MHPs or assistance.[13]

#### Menstrual Education

79% of girls in the U.S. desire more education about menstrual health.[14] Most students aren't taught about periods because curriculum varies across school districts, and 21 states don't require sex education, where menstruation is taught.[15]

Sex education typically is taught by separating sexes,[16] leaving male-identifying menstruators and intersex individuals uninformed about their own bodies. Girls are taught secrecy, and boys become apathetic to the experience.

- [3] Schmitt, Maggie. Personal Interview. 10 April 2020.
- [4] Strohl, Valerie. "When your special needs daughter gets her period." Friend ship Circle, 14 June 2012, https://www.friendshipcircle.org/blog/2012/06/14/
- [5] Rhodes, Dusty. "Feedback: Noble Charter Schools Story Hit A Nerve." NPF Illinois, 30 Apr. 2018, https://www.nprillinois.org/post/feedback-noble-charterschools-story-hit-nerve#stream/0.
- [6] "Survey of School Nurses Reveals Lack of Bathroom Policies and Bladder Health Education." Society for Women's Health Research, 26 Nov. 2018, https:// swhr.org/survey-of-school-nurses-reveals-lack-of-bathroom-policies-and-bladder-health-education/.
- [/] "State of the Period: The Widespread Impact of Period Poverty on US Students." Thinx; PERIOD, https://cdn.shopify.com/s/files/1/0795/1599/files/State of-the-Period-white-paper\_Thinx\_PERIOD.pdf?455788. PDF File.
- [8] Cotropia, Christopher. "Women's Reproductive Health." Women's Reproductive Health, vol. 9 (Forthcoming), 25 Mar. 2019. Social Science Research Network (SSRN), https://papers.ssrn.com/sol3/papers.cfm?abstract\_id=3313413. [9] Cotropia, Christopher. "Women's Reproductive Health." Women's Reproductive Health, vol. 9 (Forthcoming), 25 Mar. 2019. Social Science Research Network (SSRN), https://papers.ssrn.com/sol3/papers.cfm?abstract\_id=3313413.
- [10] "State of the Period: The Widespread Impact of Period Poverty on US Students." Thinx; PERIOD, https://cdn.shopify.com/s/files/1/0795/1599/files/ State-of-the-Period-white-paper\_Thinx\_PERIOD.pdf?455788. PDF File. [11] Cotropia, Christopher. "Women's Reproductive Health." Women's Reproductive Health, vol. 9 (Forthcoming), 25 Mar. 2019. Social Science Research Network (SSRN), https://papers.ssrn.com/sol3/papers.cfm?abstract\_id=3313413. [12] Cotropia, Christopher. "Women's Reproductive Health." Women's Reproductive Health, vol. 9 (Forthcoming), 25 Mar. 2019. Social Science Research Network (SSRN), https://papers.ssrn.com/sol3/papers.cfm?abstract\_id=3313413. [13] Cotropia, Christopher. "Women's Reproductive Health." Women's Reproductive Health, vol. 9 (Forthcoming), 25 Mar. 2019. Social Science Research Network (SSRN), https://papers.ssrn.com/sol3/papers.cfm?abstract\_id=3313413. [14] "State of the Period: The Widespread Impact of Period Poverty on US Students." Thinx; PERIOD, https://cdn.shopify.com/s/files/1/0795/1599/files/State-of-the-Period-white-paper\_Thinx\_PERIOD.pdf?455788. PDF File. [15] "Sex and HIV Education." Guttmacher Institute, 1 May 2020, https://www.guttmacher.org/state-policy/explore/sex-and-hiv-education.

## **CORPORATIONS**

#### MHP MANUFACTURERS

Beyond school, the main public outlet for learning about menstruation is through corporate advertising.[17] Corporations have a conflict of interest in controlling the MHP market and promoting disposable products. A menstruator uses approximately 14,000 tampons.[18] Monopolies like P&G earn sizable profits, making approximately \$2,000 from a loyal customer.[19] The global market for tampons in 2019 was 2.86 billion dollars, and will reach 4.07 billion in 2024.[20]

The ecological impact is significant. The U.S. discards about 12 billion pads and 7 billion tampons each year.[21] Plastic applicators for tampons aren't recyclable and contribute to waste found in oceans.[22]

Corporations ingrain norms such as impurity, discretion, and femininity in advertising.[23] "Feminine" labels misidentify transgender men and non-binary individuals, leading to gender dysphoria.[24] Nathan James, a transgender man, stated, "the way people talk about menstruation makes me feel as if my body isn't good enough for what I feel I am. It contributes greatly to my depression, dysphoria, and self-hatred".[25]

#### CORPORATE ENVIRONMENT

Shame discourse from school carries into professional environments. Menstruation was historically used as a reason to keep women from entering the workplace. [26] Absenteeism and underperformance caused by menstruation symptoms are due to strict break times and inflexible eight hour work days that have been designed around men. [27] This excludes non-males from workplaces by forcing them to keep moving or leave completely.

<sup>[17]</sup> Quint, Chella. Personal Interview. 5 March 2020.

<sup>[18]</sup> Olsen, Hanna Brooks. "How Much Does a Period Cost, Anyway?" Medium Medium, 16 Oct. 2017, https://medium.com/s/bloody-hell/how-much-does-a-period-cost-anyway-6a2263828ae3

<sup>[19]</sup> Olsen, Hanna Brooks. "How Much Does a Period Cost, Anyway?" Medium, Medium, 16 Oct. 2017, https://medium.com/s/bloody-hell/how-much-does-a-period-cost-anyway-6a/263828ae3

<sup>[20] &</sup>quot;Global lampons Market 2020: Research by Business Opportunities, lop Companies report covers, Industry Outlook, Progression Status." MarketWatch MarketWatch, Inc., 13 May 2020, https://www.marketwatch.com/press-release global-tampons-market-2020-research-by-business-opportunities-top-companies-report-covers-industry-outlook-progression-status-2020-05-13?tesla=y. [21] Dillon, Anna. "Planet-Friendly Periods." Edited by Hannah Black, Stanford Magazine, Stanford University, June 2017, https://stanfordmag.org/contents/planet-friendly-periods.

<sup>[22]</sup> Dillon, Anna. "Planet-Friendly Periods." Edited by Hannah Black, Stanford Magazine, Stanford University, June 2017, https://stanfordmag.org/contents/planet-friendly-periods.

<sup>[23]</sup> Elmhirst, Sophie. "Tampon Wars: the Battle to Overthrow the Tampax Empire." The Guardian, Guardian News and Media. 11 Feb. 2020. https://www.

theguardian.com/society/2020/feb/11/tampon-wars-the-battle-to-overthrow-the-tampax-empire.

<sup>[24]</sup> Carnes, Cat. "Boys Who Bleed: Why Gender-Neutral Language Matters." Blood + Milk, Cora, 6 Apr. 2018, https://www.bloodandmilk.com/about/. [25] Carnes, Cat. "Boys Who Bleed: Why Gender-Neutral Language Matters." Blood + Milk, Cora, 6 Apr. 2018, https://www.bloodandmilk.com/about/. [26] Hilmantel, Robin. "Periods at Work: History of Employers Addressing Periods." Time, 3 Mar. 2016, https://time.com/4246662/period-policies-at-work/. [27] Hilmantel, Robin. "Periods at Work: History of Employers Addressing Periods." Time, 3 Mar. 2016, https://time.com/4246662/period-policies-at-work/.

## **☆ HOMELESS SHELTERS**

Showers and other facilities provided by shelters have time restrictions; residents may find no recourse if they get their periods outside of established hours.[28]

Men's shelters often have no access to MHPs for transgender men. Many transgender individuals avoid shelters due to harassment and rejection, which exacerbates risk for mental and physical health issues. [29]

## **III INCARCERATED POPULATIONS & PRISONS**

Prisons were originally designed as a space for men (Blakinger),[30] but women are the fastest growing segment of the population in state and local prisons (Sawyer).[31]

Asking for MHPs is often distressing for inmates. In federal prison, inmates may have to show their bloody pad to male staff members to determine if they "deserve" more supply.[32] Writer Chandra Bozelko reported that during her time in Connecticut prisons, correctional officers interrogated her with questions like "Didn't I give you a pad yesterday? How long is this one going to last?"[33]

If prisons don't provide sufficient products for free, inmates must work more hours to be able to afford products, but wages in prisons are in cents per hour. [34] On minimum wage, a box of tampons would be less than an hour of work. In prison, affording that same box would take around 14 days.[35]

If they can't afford MHPs, miss the weekly time window, or are refused more supply, inmates are forced to free bleed or makeshift unsanitary options, [36] with the possibility of getting a life threatening infection.

## **GOVERNMENT**

Legislation dedicated solely to menstruation often doesn't get passed. The Menstrual Equity Act of 2017-2018 and 2019 were comprehensive federal proposals that sought to make MHPs more affordable, but haven't been able to pass Congress.[37][38] Passed bills with period policies lack guidelines because legislators slip provisions under larger bills. The First Step Act mandates that federal prisons provide free, quality MHPs to menstruating inmates.[39] MHP access is outlined with only three sentences under this act and has no operational or accountability measures to make sure that free MHPs are regularly distributed.[40]

The legislators who passed the Learn with Dignity Act in Chicago didn't collaborate with schools, resulting in little change in MHP access.[41] Unfunded mandates like these provide no accountability, but introduce the issue to lawmakers for future iterations.[42]



## **HEALTHCARE**

## **Menstrual Suppression**

Birth control methods are the primary treatment for menstrual complications, but are considered a luxury item under many insurance plans.[43] 82% of teens aged 15-19 who take the pill use it for non-contraceptive purposes, [44] but birth control has its own stigma. The assumption of sexual activity prevents many young adults from using menstrual suppression even when having issues with heavy bleeding.[45]

For people with severe disabilities, access to education and attending school becomes difficult without menstrual suppression.[46] Inaccess hurts transgender men as well, with one study finding that 64% take hormonal supplements for menstrual suppression, contraception, or both.[47] For transgender men who menstruate, inaccess to trash bins within men's bathroom stalls and sounds from using MHP may "out" them, risking violence from discrimination.[48]

## Health Research

A major critique in medical research is underrepresentation of women as test subjects. "80 per cent of drugs are withdrawn from the market due to unacceptable side-effects on women." [49] This failure to address women's health includes a lack of menstruation research. In a study with 2,500 pediatricians, many held gaps in menstrual knowledge, resulting in the inability "to identify abnormal menstrual patterns and comprehensively evaluate patient health." [50]

84.1% of a 408 participant survey reported symptoms of menstrual pain.[51] This study and numerous others emphasize a need for extended research. Lack of quantitative research also makes it difficult to convince non-menstruating legislators to empathize with an issue they believe doesn't affect them.[52]

## **ENDOMETRIOSIS...**

affects approximately 1 in 10 menstruators, with a third of patients facing infertility and most experiencing chronic pelvic pain. [53] Individuals lose on average 6.3 hours per week of workplace productivity due to symptoms. [54] As research remains underfunded gynecology surgeon Dr. Sawsan As-Sanie stated, "[M]ore than half of endometriosis patients had been told by health care providers that nothing was wrong with them." [55]

## **HEALTH & SAFETY IMPLICATIONS**

Menstruators believe period pains can't be treated, and don't make others aware of their pain. They don't know what symptoms to look out for, so they don't go to their doctors for excessive bleeding and cramps. [56] Women perceiving their own pain as unimportant normalizes all menstrual pains, causing menstrual and underlying bleeding disorders to go undiagnosed. [57]

If menstrual health is not properly maintained, consequences can include: UTIs, Hepatitis B, increased risk of cervical cancer,[58] and TSS.[59] Not identifying these conditions early can lead to complications such as infertility, hysterectomies, and death.[60] Pre-existing mental health conditions can be worsened,[61] causing already vulnerable individuals to be at risk.

[49] Roussy, Kas. "Women's period seen as barrier to medical research" CBC, CBC/Radio-Canada, 6 June 2016, https://www.cbc.ca/news/health/sport-exercise-menstrual-cycle-1.3618140.

[50] Singer, Miram R., et al. "Pediatricians' knowledge, attitudes and practices surrounding menstruation and feminine products". International Journal of Adolescent Medicine and Health, vol. 33 (Forthcoming), 11 Mar. 2020, https://doi.org/10.1515/jiamh-2019-0179

[51] Grandi, Giovanni, et al. "Prevalence of menstrual pain in young women: what is dysmenorrhea?." Journal of pain research, vol. 5, 2012, pp. 169-74, doi:10.2147/ JPR.S30602

[52] Patel, Anya. Personal Interview. 29 May 2020.

[53] Mostafavi, Beata. "Experts: Research Gap Stalls Improvements in Endometriosis Care." Michigan Health Lab, Regents of the University of Michigan, 10 May 2019, https://labblog.uofmhealth.org/industry-dx/experts-re search-gap-stalls-improvements-endometriosis-care.

[34] Mostafavi, Beata. "Experts: Research Gap Stalls Improvements in Endometriosis Care." Michigan Health Lab, Regents of the University of Michigan, 10 May 2019, https://labblog.uofmhealth.org/industry-dx/experts-research-gap-stalls-improvements-endometriosis-care.

[55] Mostafavi, Beata. "Experts: Research Gap Stalls Improvements in

Endometriosis Care." Michigan Health Lab, Regents of the University of Michigan, 10 May 2019, https://labblog.uofmhealth.org/industry-dx/experts-re-search-gap-stalls-improvements-endometriosis-care.

[56] Karchmer, Kirsten. Personal Interview. 19 March 2020

[57] Ballard, Karen, et al. "Fertility and Sterility." Fertility and Sterility, vol. 86, no. 5, Nov. 2006, pp. 1296–1301, https://www.fertstert.org/article/S0015-0282(06)03522-9/abstract.

[58] Sarma, Bhaswati. "5 Health Risks of Poor Menstrual Hygiene." Heyday Natural Personal Care, 10 Dec. 2018, https://www.heydaycare.com/5-health risks-of-poor-menstrual-hypiene/.

[59] "Toxic shock syndrome." Mayo Clinic, Mayo Foundation for Medical Education and Research, 18 Mar. 2020, https://www.mayoclinic.org/diseases-conditions/toxic-shock-syndrome/diagnosic-transfunct/dec-20355390

[60] "The Unequal Price of Periods: Menstrual Equity in the United States." American Civil Liberties Union & Period Equity, American Civil Liberties Union https://www.aclu.org/sites/default/files/field\_document/111219-sj-periodequity. pdf. PDF File.

[61] Leonard, Jayne. "Depression during period: Everything you need to know." Medical News Today, Healthline Media UK Ltd, 15 Jan. 2020, https://www.medicalnewstoday.com/articles/327490#menstrual-related-mood-disorders.

# **SOLUTIONS LANDSCAPE**

## DISTRIBUTION

Nonprofits such as PERIOD and Chicago Period Project distribute menstrual supplies to at-risk populations (homeless, low-income, refugee status).[62] These nonprofits fill the role of government because welfare programs like WIC don't permit users to spend their Electronic Benefit Transfers on MHPs.[63] However, nonprofits have varying scopes of influence and power. Many are limited to their local communities and depend solely on donations to fund their product distribution. Although thousands of vulnerable menstruators are receiving aid, thousands of others aren't.

Donating over 200 million pads to over 50 countries and 65 other partner charities, P&G has shown commitment to providing disposable MHPs worldwide.[64] While their support helps menstruators in need, P&G and companies like them pose a conflict of interest by profiting off of disposable-dependent consumers.

## **INNOVATION & SUSTAINABILITY**

New companies like Thinx target socially-conscious consumers by reducing environmentally harmful menstrual waste through their products. [65] However, MHP innovation has been noticeably lacking as a whole. For those prioritizing sustainability, menstrual cup variations are most common, but at an average of \$30, this price is steep for many consumers. [66] Also, many cultures don't accept vaginally inserted MHPs due to taboos. [67]

<sup>[62]</sup> Bell Samantha Personal Interview 9 March 2020

<sup>[63] &</sup>quot;The Unequal Price of Periods: Menstrual Equity in the United States."

American Civil Liberties Union & Period Equity, American Civil Liberties Union https://www.aclu.org/sites/default/files/field\_document/111219-sj-periodequity.

<sup>[64] &</sup>quot;Helping Girls Throughout the World" Always, Procter & Gamble, https://always.com/en-us/about-us/girl-empowerment-throughout-the-world-with-always.

<sup>[65]</sup> Brannagan, Toni. "Taking an Eco-Friendly Approach to Tampons." Thinx, Thinx, Inc., 23 Jan 2019, https://www.shethinx.com/blogs/thinx-womens-health/eco-friendly-approach-tampons.

<sup>[66]</sup> Olsen, Hanna Brooks. "How Much Does a Period Cost, Anyway?" Medium Medium, 16 Oct. 2017, https://medium.com/s/bloody-hell/how-much-does-a-period-cost-anyway-6a2263828ae3.

<sup>[67]</sup> Gandhi, Kiran. Personal Interview. 30 March 2020.

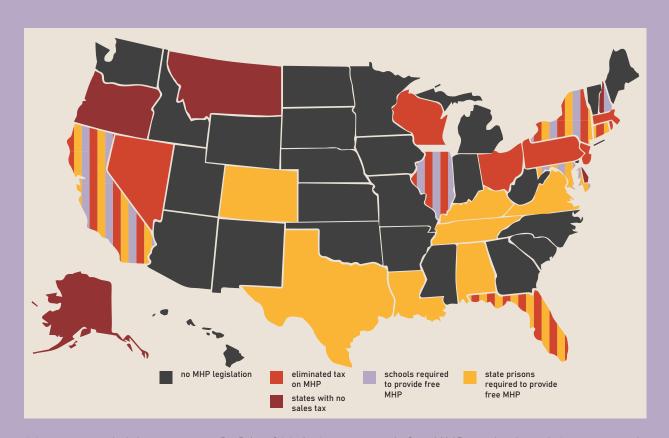
## ADVOCACY

Radical activism created menstrual movements that systemically proliferated into new media and journalism, which then led to policy shifts and product innovation. Individuals speaking out were most notable in 2015. Kiran Gandhi free bled to remain comfortable while running the London Marathon. [68] #PeriodsAren'tAnInsult rose after Donald Trump retorted at Megyn Kelly. [69] However, these reactionary movements were temporary and lacked sustainable action. Words must move off social media into actionable and informed goals, such as The Free Periods movement in the UK where they set a timeline to provide free products in all schools.[70]

In the U.S., nonprofits speak with legislators to improve menstrual equity and abolish the tampon tax.[71] Still, it's common for legislators to not respond when contacted by menstrual non-profits. [72]

## REGULATION & ENFORCEMENT

Under the coronavirus spending package, period products can be purchased under health and/or flexible savings accounts.[73] Menstruators with these accounts can buy menstrual products without being taxed on them.[74] This policy supports those with HSA accounts, but not all employees are offered these benefits. HSA accounts are mostly affordable for higher-income professions, [75] thus, low-income individuals who find the tax most burdensome aren't benefiting.[76]



20 states repealed the tampon tax.[77] As of 2019, 4 states provide free MHP to schools, and 13 states provide free MHP to state prisons.[78] Because the IRS doesn't classify MHPs as medical devices, they remain taxed with few states inconsistently legislating its removal.[79] Prisons often ration insufficient MHP supply per individual or fail to provide free products in a timely manner.[80] Because prisons aren't required to report information on MHP distribution,[81] policy effectiveness can't be measured.

Some state policies are temporary. In California, the tampon tax is only repealed until 2023.[82] Access to free MHP in Georgia schools was a one time legislation that lasts only a year.[83]

The FDA has guidelines for MHP manufacturing corporations to provide warning labels on absorbency levels. [84] However, there are few ingredient standards set in place, and manufacturers are not required to completely list out ingredients on their packaging. [85]

<sup>[77] &</sup>quot;Tax Free. Period." Tax Free. Period., Period Equity & Lola, https://www.taxfreeperiod.com/.

<sup>[78] &</sup>quot;The Unequal Price of Periods: Menstrual Equity in the United States." American Civil Liberties Union & Period Equity, American Civil Liberties Union https://www.aclu.org/sites/default/files/field\_document/111219-sj-periodequity.pdf. PDF File.

<sup>.</sup> [79] Patel, Anya. Personal Interview. 29 May 2020.

<sup>[80] &</sup>quot;Menstrual Equity: A Legislative Toolkit." ACLU National Prison Project & Period Equity, American Civil Liberties Union, Dec. 2019, https://www.aclu.org/sites/default/files/field\_document/121119-sj-periodequitytoolkit.pdf. PDF File

<sup>[82] &</sup>quot;30 states have until Tax Day 2021 to eliminate their tampon tax." Tax Free. Period, Period Equity; Lola, 15 Apr. 2020, https://www.taxfreeperiod.com/blog-entries/were-demanding-that-30-states-become-tax-free-period-by-tax-day-2021.

<sup>[83]</sup> Prabhu, Maya I. "Georgia OKs providing menstrual products to low-incom girls, women." The Atlanta Journal-Constitution, 9 Apr. 2019, https://www.ajc.com/news/state--regional-govt--politics/georgia-oks-providing-menstrual-products-low-income-girls-women/8wRDKwffleuHFslCsg0TML/.

<sup>[84]</sup> Fetters, Ashley. "The Tampon: A History." The Atlantic, Atlantic Media

Company, 1 June 2015, https://www.theatlantic.com/health/archive/2015/06 history-of-the-tampon/394334/.

<sup>[85]</sup> Kounang, Nadia. "What's in your pad or tampon?" CNN, Cable News Network, 13 Nov. 2015, https://www.cnn.com/2015/11/13/health/whats-in-your-pad-or-tampon/.

Representative Carolyn Maloney introduced the Robin Danielson Act in 1997.[86] This would require manufacturers to be more transparent on the makeup of MHPs, and require the FDA to study "dioxins, synthetic fibers, and other additives," and independently test tampons to authenticate manufacturers' data. [87] This bill has failed to move past the floor nine times.[88]

## T

## **EDUCATION & RESEARCH**

Menstrual research is necessary to provide evidence-based standards. The Menstrual Hub is a well-used repository for research and materials shareable for educators.[89]

Although sex education is weakly enforced, the government generously supports nonprofits that provide comprehensive health educators to schools without trained teachers.[90] The Peer Health Exchange leans into training college students who are trusted mentors, tackling stigma and supporting low-income communities. [91]

Some programs start in early education without separating sexes to destigmatize learning about puberty. UNICEF and the Indonesian Ministries of Health and Education created a menstruation comic book that dramatically helped boys dispel harmful attitudes and a willingness to learn more about periods. [92]

[86] Fetters, Ashley. "The Tampon: A History." The Atlantic, Atlantic Media Company, 1 June 2015, https://www.theatlantic.com/health/archive/2015/06/history-of-the-tampon/394334/.

[87] "Statement by Congresswoman Carolyn B. Maloney upon Introduction of 'The Tampon Safety and Research Act of 1997." Rep. Carolyn B. Maloney, U.S Federal Government, 11 Nov. 1997, https://maloney.house.gov/media-center/press-releases/statement-congresswoman-carolyn-b-maloney-upon-introduction-tampon-safety-and-research. Press release.

[88] Kounang, Nadia. "What's in your pad or tampon?" CNN, Cable News Network, 13 Nov. 2015, https://www.cnn.com/2015/11/13/health/whats-in-your-pad-or-tampon/.

[89] "About us: What is the Menstrual Health Hub?" The Menstrual Health Hub. https://mhhub.org/about/.

[90] Patel, Anya. Personal Interview. 29 May 2020

[91] "Our Solution." Peer Health Exchange, Peer Health Exchange, Inc., https://www.peerhealthexchange.org/our-solution.

[92] Pick, Liz. "Menstruation matters for boys as well as girls." UNICEF Indone sia, 26 May 2017, http://unicefindonesia.blogspot.com/2017/05/menstruation-matters-for-boys-as-well.html.

## **GAPS & LEVERS OF CHANGE**

## Lack of Research

is debilitating to menstruators' health and prevents people from seeing the need for menstrual equity.

Fund and support quantitative research measuring period equity and policy impact to convince legislators.

Integrate human-centered design when navigating stigma and sustainability in product innovation, getting feedback directly from users.

Include menstrual health questions into state and district education surveys.

Use more female subjects in health-related research to mitigate adverse effects of medication for women and implications of MHP ingredients to provide accurate medical insights.

## Lack of Standardization

causes a failure to provide comprehensive access to MHPs, hygiene, and education.

CDC should ensure menstrual provisions follow UNICEF's guidelines on menstrual health and hygiene from their WASH initiative.

Approve payment of period products under Electronic Benefit Transfers for low income people on welfare programs (WIC and SNAP).

Change IRS code for period products as "medical supply" to eliminate sales taxes on MHP nationwide.

Start using Title IX to address and enforce policies fixing menstrual inequity and resources in schools.

Test different experimental models using trained and trusted educators with puberty curriculum to encourage inclusion and empathy between menstruating and non-menstruating students.



## Limits in Operationalizing

prevent change from being sustainable and enforceable so that proposals actually deliver their promises and goals.

Rename "sex education" to "comprehensive health education" to remove focus on sex and abstinence.

 $\overline{\Psi}$ 

FDA should require ingredient labels on MHPs by passing the Robin-Danielson Act

Homeless shelters and donation guides should explicitly list the need for MHPs.

Use factual, evidence-based information when advocating and calling/emailing legislators.

Overcome high price misconception of providing MHPs to pass funded, long-term mandates, increasing accountability and distribution.

# Lack of Agency in Environment

is caused by those in power failing to acknowledge stigma, thereby limiting an individual's mobility and independence.

Hygiene facilities, such as bathrooms, showers, and laundry, should have flexible access, hours, and policies concerning menstruators (for schools, workplace, shelters, etc.)

Reduce interactions with authority figures when distributing free MHPs to decrease abuses of power differentials.

Corporate advertising and schools should be inclusive of non-women menstruators, and stop using gendered terms when referring to periods.

Hire and train more menstruators in administrative roles for malecentric environments. Prisons should look to the UN's Bangkok Rules to train correctional officers on the treatment of female prisoners, menstrual equity, and hygiene [93].

<sup>[93] &</sup>quot;The Bangkok Rules." United Nations Office on Drugs and Crime, https://www.unodc.org/documents/justice-and-prison-reform/Bangkok\_Rules\_ENG\_22032015.pdf. PDF File.

# **INSIGHTS & LESSONS LEARNED**

Many of our initial assumptions were challenged. Uncovering the severity of U.S. period poverty was jarring for our team because the issue has been focused on MHP access abroad. This false narrative that products are the solution hides the broader requirements of hygiene access and menstrual education that is prevalent here. Access must encompass products, hygiene, and education. Access working with destigmatization efforts can make a lasting systemic change. Systems thinking has taught us to dive beyond the surface of complex issues, and thereby deepens our empathy for those affected by them.

More encompassing is menstrual inequity, which is rooted in 3,000 years of stigma. Shame pervades society and is ingrained within sexist structures across institutions. Addressing tangential, oppressive systems, such as malecentric workplace policies and prison environments, are essential to tackling menstrual inequity. The most important lesson we've learned is that stigma is not fixed and can be unlearned. As individuals, we can normalize conversation and make actionable change to remind ourselves and others that menstrual equity is not a luxury, but a right.