



Cultural Traditions, Period
Poverty and Menstrual Health
Resources in Remote Indigenous
Communities in North America

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Introduction

Menstrual health is often overlooked and under-discussed; as a result, many people struggle to manage menstruation safely, comfortably, and with dignity. Period poverty, which refers to circumstances where people cannot meet their menstrual health needs, is one way in which this struggle is exemplified. More specifically, period poverty is a form of poverty marked by limited access to menstrual products, education, and proper sanitation, and it remains a significant, yet often neglected, public health and human rights issue across North America. Period poverty can be framed as a complex financial poverty issue that systematically and disproportionately impacts marginalized groups. For certain Indigenous communities in North America, period poverty intersects with historical and continuous systemic inequities, including but not limited to geographic isolation for Indigenous peoples living in remote communities, underfunded health and education systems, and the impacts of colonialism on Indigenous cultural practices and bodily autonomy. These challenges contribute to physical, mental health, social, and economic consequences for Indigenous peoples who menstruate.

Focused on rural Indigenous communities in the United States and Canada, this report examines the menstrual health challenges in Indigenous communities and the work being done to address those challenges. It begins by exploring menstruation-related rituals, traditions, and beliefs that have shaped Indigenous perspectives on menstruation in certain communities, and how such rituals, traditions, and beliefs have been impacted by colonization. It then considers the effects of period poverty on the individuals who experience it, including its physical and mental health effects, and the social and economic implications of missing out on professional, educational, and social opportunities due to period poverty.

Following an exploration of the impacts of period poverty, this report then summarizes the current menstrual health resources available to or directed toward Indigenous peoples in the United States and Canada. Such resources include government-funded initiatives, such as educational programs and initiatives to improve access to menstrual products, as well as the work of grassroots and nonprofit organizations to advocate, influence government initiatives, and address gaps in service, often in direct collaboration with Indigenous communities.

Finally, this report concludes with recommendations for strategies to address menstrual health challenges in Indigenous communities in North America.

Note on Terminology, Scope, and Limitations

For the purposes of this report, “North America” is defined as Canada and the continental United States of America.¹ The term “Indigenous” is used broadly and is intended to include Indigenous peoples in the United States who may generally identify as Native American, American Indian, or Indigenous American; and First Nations, Métis, and Inuit peoples in Canada.

“Indigenous communities” is similarly used broadly to refer to Indigenous groups, tribes, bands, or nations to which Indigenous peoples are recognized as belonging. Where possible and appropriate, the names of tribes, bands, and nations are used.

Indigenous communities throughout North America are incredibly diverse, as are the lived experiences and lifestyles of Indigenous peoples throughout Canada and the United States. The focus of this report is on Indigenous peoples who menstruate and who experience period poverty. Not all Indigenous peoples who menstruate experience period poverty, nor does period poverty exist in all Indigenous communities. This report draws upon current data to explore the issue of period poverty and its impact on Indigenous peoples and Indigenous communities, where it exists. While terminology throughout this report may be generalized for practical purposes, the diversity of cultures, histories, and lived experiences of Indigenous peoples in North America are recognized and acknowledged.

The contents of this report were primarily derived from literature-based resources, both historical and contemporary. As a result, the contents are not reflective of all Indigenous communities in North America. More information is available regarding period poverty in remote Indigenous communities. This report does not specifically consider or reflect the experiences of Indigenous peoples in cities or other locations.

The primary researchers and authors of this report are non-Indigenous. The purpose of this report is to contribute to the broader conversations about period poverty, and to highlight the menstrual health challenges experienced by Indigenous peoples in Canada and the United States. Based on the review of current literature, there has not been significant focus on how this issue impacts Indigenous communities.

Menstruation-Related Rituals, Traditions, and Beliefs of Indigenous Communities

Background

Menstruation is and historically has been highly respected by many Indigenous cultures.² Some Indigenous communities view menstruation and menstrual rituals as important for the wellbeing of a community, the earth, and as a “rite of passage to the spiritual.”³ For some Indigenous groups, the moon is a representation of a woman’s connection to the earth and the spiritual. The moon is connected to a woman’s sacredness and “governs the waters inside women.”⁴ The onset of a girl’s “moontime,” or menses, is a special time that marks the beginning of her transition into adulthood and womanhood.⁵ Girls are taught to be proud and not ashamed, as their families and communities celebrate them during a coming-of-age ceremony that will prepare them for the challenges of adulthood.

The tradition of celebrating menstruation during coming-of-age ceremonies was negatively impacted by the introduction of colonization.⁶ Ceremonies were discontinued or conducted in secret for the protection of the young women,⁷ but they have slowly been revitalized by community leaders dedicated to protecting the tradition.⁸ Despite centuries of misunderstanding, misinterpretation, and attempts to erase Indigenous traditions, the respect and honor accorded to girls and women in relation to their menses persists in North American Indigenous communities.

Indigenous Menstrual Ceremonies and Traditions

Menstrual ceremonies in Indigenous communities are deeply sacred and often kept private, leading to misunderstanding and varied interpretations by anthropologists. These ceremonies, often celebrated as rite-of-passage or coming-of-age events, mark a pivotal stage in adolescence when girls learn about power and responsibility.⁹ Upon completion of these ceremonies, community members hope that an initiate will feel a sense of security and “psychological solace” as they take on more responsibility and begin to fill their new roles in society.¹⁰ Though the ceremonies may differ in name or details, many emphasize similar values: the importance of responsibility; the health of one’s environment, body, mind, and spirit; and the hope for prosperity in the future.¹¹

It was common practice among several Indigenous groups that young girls experiencing their first menstruation would traditionally go to a moon lodge or similar structure to receive teachings on topics such as sexual health, parenting skills, basic life skills, and self-care.¹² In these lodges, the girls, or initiates, were cared for by older, wiser women.¹³ These wise women, referred to as “grandmothers,” were not necessarily related

to the initiate, but they held “the wisdom for the community’s children, grandchildren, great-grandchildren and so on A Grandmother holds traditional knowledge and wisdom and passes it on. . . .”¹⁴ Indigenous communities believed that only another woman who was older, cognizant of the power of menstruation, and possessed that power of her own could help control and direct another menstruating woman’s power.¹⁵

Girls of various North American Indigenous groups commonly engaged in seclusion and cleansing during their stay in these lodges or structures to celebrate their coming-of-age.¹⁶ Some ethnographers and anthropologists have interpreted these acts of selective seclusion as stigmatized social seclusion, but this perspective is narrow and does not encompass the full experience of menstrual seclusion.¹⁷ Women chose to isolate themselves to protect others from any negative consequences related to the power that they possessed while menstruating.¹⁸ Menstruation was the physical manifestation of that power.¹⁹ The power that menstruating women and girls possessed was believed to be so strong that it was capable of disempowering men, throwing “male power totally out of kilter,” and preventing objects from performing their usual tasks.²⁰ Isolation was meant to provide a space for the girl or woman “to concentrate on herself as a powerful being and to receive messages straight from the Creator.”²¹

In fact, women were believed to be “far, far ahead of men. . . .”²² Thus, while menstruation has historically been associated with pollution or dirtiness in Western cultures, Indigenous communities have viewed that “pollutant” as a form of power and cleansing.²³ These beliefs are enmeshed in the rite-of-passage ceremonies of various Indigenous groups.

Examples of Menstrual Traditions and Rituals from Indigenous Communities

Navajo²⁴ (Kinaaldá)

The Navajo community believes that Changing Woman, a female deity that embodies beauty, strength, generosity, and humanity, went through a multi-day puberty ceremony in the hopes that she would be a “Holy One” (deity) able to reproduce human children.²⁵ When her body began to transform so that she was able to bear children, the occasion was celebrated with the first puberty celebration, called Kinaaldá.²⁶ Changing Woman had four ceremonies, one for each of the first four times she had her period.²⁷ At least as of 2019, the four-day ceremony was an ongoing practice that symbolized Changing Woman’s first four periods.²⁸ It is when Navajo girls are believed to undergo deep spiritual, physical, and psychological changes before each girl accepts “her new formation.”²⁹

The preparation for one's Kinaaldá begins at an early age "[b]y virtue of being reared according to Navajo customs, traditions, and beliefs."³⁰ Kinaaldá is the final step in the rearing process, and it serves as a "way of giving meaning to the skills and values learned . . . in childhood."³¹ Kinaaldá lasts approximately four days but may take place up to two times to correspond with a girl's first and second menstrual cycles—the two most powerful cycles.³² Families prepare in the weeks shortly after a girl's first menstruation for this holy transition to adulthood.³³ The purpose of the Kinaaldá "goes far beyond the obvious sexual maturational and reproductive linkages"; it is a critical "personality-shaping event in a woman's life, and it is believed to set her life course."³⁴ Songs sung during this special time are about life and the future.³⁵

For the duration of this ceremony, young women are cared for and instructed by older women in the community. Girls are no longer secluded or isolated during Kinaaldá; however, they do participate in many other traditional activities from centuries ago.³⁶ Girls are dressed in special clothing to serve as "a visual cue of the girl's separation from childhood."³⁷ A girl's mother may bind her hair with a special thong made of buckskin or lion skin while songs are sung in her honor.³⁸ Tying the hair of a young woman is symbolic of a commitment to be present in the girl's life indefinitely.³⁹ She may also be painted in white clay and have her hair and jewelry washed with a yucca plant for purification.⁴⁰ Each girl is tasked with grinding corn in preparation for the overnight baking of the corn cake on the last day of the ceremony, when she is expected to stay awake and sing through the night.⁴¹ It is important that she approach corn grinding with dedication because her efforts in grinding the corn symbolize "her motivation and participation in her own identity-formation process."⁴² The corn cake is later baked in-ground as an offering to the sun, and it symbolizes fertility and life.⁴³

One Navajo woman recounted the details of her own Kinaaldá in an article that was published in 2000. Her paternal grandmother woke her for three consecutive days and encouraged her to complete a ritualistic run from east to west.⁴⁴ Her relatives came to her grandmother's home to prepare the ceremony and to bring her gifts of food, jewelry, money, and cloths.⁴⁵ She was fed only whole foods and was instructed to abstain from processed foods to promote health and keep her body sacred.⁴⁶ A mentor, known as the "Ideal Woman," who embodied the qualities of generosity, wisdom, strength of character, and respect, was chosen as a role model for the initiate.⁴⁷ The mentor massaged the young woman's body as a symbolic act of "molding" her into her new form.⁴⁸ The initiate and the other adult women, who were younger than the Ideal Woman, gave her their full attention and deep deference because she possessed revered knowledge.⁴⁹ On the final night of the ceremony, the initiate was blessed and sung into womanhood by a medicine man before she took her final run.⁵⁰ She described how her body was "celebrated[] and made ready for the role of a mature woman" for whom "reaching puberty was not a shameful, dirty, [or]

dreadful experience."⁵¹ Instead, she described being ushered into a society that valued her.⁵² These longstanding traditions are ongoing; Navajo women who underwent their own Kinaaldá have become "aunties" to younger girls, and have helped in supporting the next generations in their Kinaaldá ceremonies.⁵³

Hupa⁵⁴ ("ch'ilwa:l" or Flower)

Historically, a young Hupa girl's first menstruation was celebrated by a ceremony called a "ch'ilwa:l," meaning "they beat time with sticks."⁵⁵ This ceremony was intended to promote the "health, happiness, and truthfulness" of the young woman throughout her life.⁵⁶ The "ch'ilwa:l," also known as the Flower Dance, lasted for three, five, or ten days.⁵⁷ The young woman was called the "kinahldung" (the young woman who has menstruated).⁵⁸ The kinahldung bathed in lucky bathing spots.⁵⁹ She wore blue jay feathers over her eyes and participated in ceremonial runs that demonstrated how she would navigate her life.⁶⁰ She also retreated to a precious, honored women's house, sometimes incorrectly referred to as a "menstrual hut."⁶¹ This space, called the "min'ch,"⁶² was the location where women gathered during significant events like miscarriages, births, and their periods.⁶³ However, after the genocide of the Gold Rush era, colonization, and policies enforced by the Bureau of Indian Affairs, the Flower Dance was rarely practiced.⁶⁴ Boarding schools "and other government programs" treated the dance as old, primitive, and linked to savagery.⁶⁵

In May of 2001, the first public flower dance in generations was held for a young woman named Kayla Rae in the Hoopa Valley in northern California.⁶⁶ Kayla's ceremony involved the traditional running, and she donned a traditional blue jay veil that covered her face.⁶⁷ Her veil was used to protect others since the community believed her to be extremely powerful during her menstruation.⁶⁸ The veil also prevented her from looking back or too far forward, encouraging her to focus on the present.⁶⁹ During the days, Kayla was visited by elders who gave her advice, engaged in prayers, and taught her songs.⁷⁰ She also spent time bathing in the river and steaming with herbs.⁷¹ Kayla's ceremony closely mirrored the flower dances of the past and encouraged the Hupa community to reclaim their coming-of-age ceremonies, which continue into the present day.⁷²

One Citizen Potawatomi Nation mother described the more recent flower dances of her daughters, who are of Hupa and Yurok descent, which also incorporated aspects of the Anishinabe Berry Fast.⁷³ Traditionally held after a girl's first period, the ceremony now occurs at various ages—often between 15 and 17.⁷⁴ The girls approached their ceremonies with excitement.⁷⁵ In preparation for their ceremonies, the girls fasted and secluded themselves from social media, phones, and unnecessary distractions.⁷⁶ They ate a maximum of two small meals a day and, over time, limited their consumption solely to acorn water.⁷⁷ Seven aunties and seven uncles and/or brothers were chosen to participate,⁷⁸ and by virtue of that participation, pledged to support the girl throughout her life.⁷⁹

The girls were taught life lessons tailored to what each young woman was currently experiencing in her life.⁸⁰ Common themes include health,⁸¹ and the importance of fasting.⁸² They were focused, determined to endure the challenging days ahead, where they would dance all night in front of other community members.⁸³ Years later, participants described the process as something that has become more dear to them as they have aged.⁸⁴

In early October 2025, a young Hupa woman and her family hosted the last flower dance of the season in Humboldt County, California.⁸⁵ Her ceremony lasted three days, and it was a labor of love from the entire community. Community members cooked, baked, and served attendees; fed the fire to keep it burning for three straight days; cared for and fed the kinahldung;⁸⁶ warded off wandering animals; and kept the space clean.⁸⁷ Members of the community camped on the reservation grounds in trailers or bundled up in tents with blankets, staying up all night to keep the ceremony running.⁸⁸

Women dressed in maple bark skirts, hats woven into detailed patterns,⁸⁹ and polished necklaces, and lined up outside of the min'ch before entering the ceremonial space, where the kinahldung sat with the medicine woman and her grandmother.⁹⁰ The ceremony began with four prayer songs.⁹¹ All ceremony participants stood to face the east and then the west as the opening prayers were sung.⁹² Then the opportunity was opened to any participant who wished to serenade the kinahldung.⁹³ As the songs were sung, women used sticks to hit the ground, the walls of the min'ch, or any solid surface to keep tempo.⁹⁴ Each round lasted an hour.⁹⁵ Each song was sung three times, increasing in volume upon repetition.⁹⁶ For two nights, the kinahldung faced the inner wall of the min'ch, covered by a blanket, while she was prayed over and serenaded for five one-hour rounds by women community members.⁹⁷ On the third night, the men joined the women in the min'ch, in the space closest to the fire, dressed in traditional garb to join in serenading the kinahldung.⁹⁸ On that night, both men and women openly traded songs back and forth throughout the night.⁹⁹ The ceremony ended as the sun rose; the blanket was removed from the kinahldung's head, and she completed a series of ceremonial runs.¹⁰⁰ The kinahldung was now a woman in the eyes of her community members.¹⁰¹

Ojibwe¹⁰² (Berry Fast)

Traditionally, the Ojibwe community considered menstruating women to be powerful. Their power was so strong that some believed that menstruating women had visions and premonitions and that the process of releasing blood from a woman's body was a powerful medicine.¹⁰³ Bleeding helped to "slough off" any experiences that were stressful, negative, or painful.¹⁰⁴ As a result, menstruating girls stayed in small, secluded wooden houses ("moon lodges") where they were encouraged to reflect, focus on their power, and learn from visiting elders for the duration of their period.¹⁰⁵

Menstruation in the present-day Ojibwe community "can be a healthy time of rest, regeneration, and recognition of [women's] important roles as life givers and community leaders."¹⁰⁶ Now, many Ojibwe girls who have reclaimed traditional practices stay in their homes, but practice forms of seclusion and fasting.¹⁰⁷ Beginning at menarche, Ojibwe girls undertake a "berry fast," which entails refraining from eating strawberries (also known as "heart berry" or "Ode'imín") for a year.¹⁰⁸ Ojibwe girls refrain from eating the berries, but take on the responsibility of tending to the plants as a way to develop a deeper relationship with Mother Earth.¹⁰⁹ It is a "beautiful and intentional year-long consideration of the power of womanhood."¹¹⁰

During the year of the berry fast, girls meet with older women who instruct them on life skills and sexual health.¹¹¹ "The ceremony starts out with a big feast in the spring, where girls come together with their female family friends as well as women who are to play the traditional role of 'auntie' to them. . . . The girls then hear from each of the aunties who have assembled, who encourage and talk to them about some of the challenges they will face, both during the fast and as they enter the world as women."¹¹² At the end of the year after their first period, "they come back to the circle of aunties, and are sent out on to the land for twenty-four hours to fast. When they complete the fast, they are bathed in cedar-drenched water, dressed in their finest" clothing.¹¹³ A feast is held for the entire community during which the girls receive gifts and are reintroduced to the community as young women.¹¹⁴ The girls are served strawberries and other berries to break their "berry fast."¹¹⁵ After that, the young women are recognized as leaders by their peers.¹¹⁶

Métis (Moon Time and Self-Reflection)

The Métis are a group of constitutionally recognized Aboriginal peoples in Canada.¹¹⁷ Unfortunately, not much has been written about Métis menstruation practices. However, anecdotes from texts suggest that the Métis community held similar beliefs about menstruation as many of the other Indigenous tribes. For example, "[a] moon time lodge was not for seclusion . . . but for deep self-reflection, rest, and creative space where" a Métis woman could "connect to [her] power . . ."¹¹⁸ In the Métis culture, women who "were on their time" were tasked with going to the moon lodge to pray "so that any negativity could be filtered through their blood and back into the ground," neutralizing the negativity through Mother Earth.¹¹⁹ Additionally, men were taught to allow a woman space when she was on her "moon time" because "men are not to interfere with the female's relationship with the energy of the moon . . ."¹²⁰

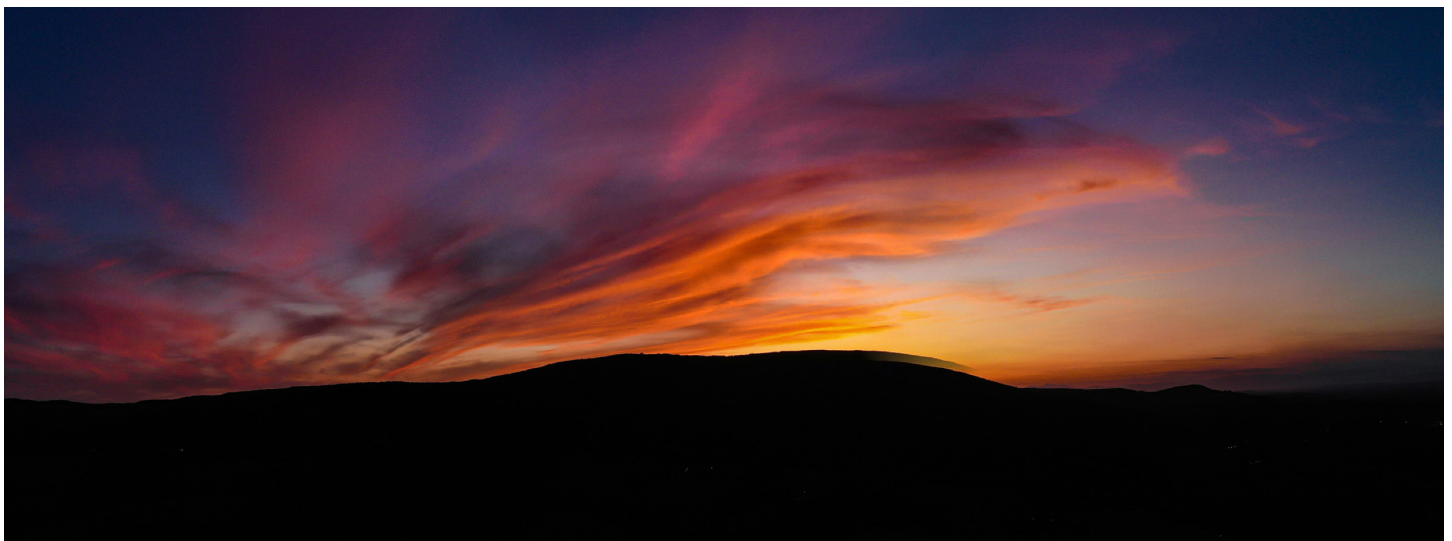
Western Perceptions of Menstruation, Impact on Menstrual-Related Rituals, and Traditions of Indigenous Communities

Despite Indigenous communities' positive perceptions of menstruation, some ethnographers have claimed that Indigenous women were oppressed, shunned, and devalued because of their periods.¹²¹ Because the dominant view of Indigenous societies was based on how European explorers and colonizers understood menstruation, it was difficult to understand the complexities and richness of Indigenous culture.¹²² Indigenous author, professor, and activist Paula Gunn Allen noted: "[Indigenous] women in general have not been taken seriously by ethnographers or folklorists, and explorations that have been done have largely been distorted by the preconceptions engendered by a patriarchal world-view, in which . . . women are perceived as oppressed, burdened, powerless, and peripheral."¹²³ Menstrual ceremonies have also been critiqued as having the alternate goal of socializing young women into their "appropriate" societal roles.¹²⁴ These misplaced perceptions devalued Indigenous girls and women, and what was once known as powerful became seen as dangerous.¹²⁵

The root cause of this change is tied to colonialism. "Following th[e] genocide of Native people, federal, state, and local governments passed policies and laws aimed at assimilating Native people primarily through molding them into an ideal of Western, Christian, heteropatriarchal norms."¹²⁶ State-funded boarding schools that sought to "assimilate" Indigenous children were physical manifestations of the negative rhetoric surrounding Indigenous culture.¹²⁷ Additionally, the introduction of the Indian Education Act in 1972 in the United States made it a crime punishable by imprisonment to engage in any Indigenous "festival, dance or other ceremony."¹²⁸ Indigenous culture was heavily diluted and attacked during this time.

Anecdotes from women who attended residential schools in the 1930s, 1940s, and 1950s include stories of girls who were required to spread their underwear on the palm of their hands so an authority figure could see if they were dirty.¹²⁹ Another woman who attended a boarding school in the 1950s said that the nuns decided to stop providing sanitary supplies at night, causing some girls to bleed onto their sheets.¹³⁰ In the morning, the girls were forced to hold the sheets up for inspection and were beaten and/or sent to scrub the stains out of the soiled sheets.¹³¹ Some girls were routinely beaten for several days out of each month.¹³² Other anecdotes include nuns shaving the head of a young girl, calling her dirty, and sending her to bed; and stories of girls being forced to wear their soiled underwear on their heads as they went to the washroom.¹³³

Associate Professor Cutcha Risling Baldy, a scholar of Indigenous feminisms, asserted: "[m]enstruation is conceived as a 'curse' in Western culture, and Indigenous menstrual customs [that viewed these practices as celebratory] aggrieved settlers."¹³⁴ "It was from this mindset that a scholarly record of menstrual studies and menstrual discourse was built with a rhetoric and analysis that rendered Native people, their cultures, and their philosophies as oppressive to women and based in a theorized universal menstrual taboo."¹³⁵ For example, American anthropologist Thomas Buckley, best known for his ethnographic research of the Yurok tribe, wrote in the 1980s that a menstruating Indigenous woman was presumed to spoil a man's luck and ability to gain wealth, and negatively impact a man's psychic and spiritual life.¹³⁶ In his recounting, women thus isolated themselves and bathed in river waters that were polluted by corpses, dogs, and aborted fetuses.¹³⁷ Buckley's views were common and often echoed by other ethnographers and anthropologists who did not fully comprehend the intricacies of menstrual practices in Indigenous cultural ceremonies. The beauty and respect that once surrounded this sacred time for Indigenous girls was damaged, and these once sacred practices were inaccurately recorded in history books as proof of negative Indigenous views toward menstruation.



Impacts of Period Poverty on Indigenous Communities

Colonialism and assimilationist policies in the United States and Canada created longstanding and systemic social and economic inequalities in Indigenous communities. In addition to policies that sought to eradicate the traditions and cultural practices of Indigenous communities, such as by criminalizing Indigenous ceremonies¹³⁸ and forcibly removing Indigenous children from their homes, some Indigenous communities were also relocated or isolated to reserves (in Canada) and reservations (in the United States). Depending on geographic location, the location of reserves and reservations also contribute to poverty in some Indigenous communities. In Canada, for example, poverty is common in Northern Indigenous communities due to a lack of resources, employment opportunities, and the high cost of living.¹³⁹

In Canada and in the United States,¹⁴⁰ period poverty,¹⁴¹ the lack of access to menstrual products, education, and sanitation facilities, disproportionately impacts Indigenous peoples.¹⁴² These challenges are exacerbated in remote communities where the lack of availability and the cost of menstrual products hinders access.¹⁴³ Transportation challenges coupled with significant distances between residential areas and healthcare facilities, community centers, and stores add to the negative impacts on Indigenous peoples in remote communities.

Specifically with respect to period poverty, a report published in 2021 by the United Way Period Promise Research Project in British Columbia, Canada, stated:

“Across all indicators of period poverty, including the negative impacts that are felt due to lack of access to products, Indigenous respondents and respondents living with physical and/or mental disabilities reported much higher rates of negative impacts. These groups are much more likely than the average of all respondents to struggle in purchasing menstrual products for themselves or their dependants, more likely to have had a period without access to menstrual products, and more likely to have been raised in homes where they were not given products by their parents or guardians. They are also more likely to miss or leave all categories of public life and indicate that access to free menstrual products improves access to their community.”¹⁴⁴

In the United States, the story is similar. Justice Necessary, a nonprofit organization based in Denver, Colorado, commissioned a study in 2022 to better understand the struggles of Colorado-based women in affording basic hygiene essentials, including access to menstrual products, diapers, and other hygiene needs.¹⁴⁵ A follow-up study was conducted in 2024.¹⁴⁶ The 2022 study found that 74% of respondents who are Native American, Indian, or Alaskan Native/Inuit struggled with access to basic hygiene products. The 2024 follow-up study found that 77% of Native American, Indian, or Alaskan Native/Inuit respondents faced period poverty.¹⁴⁷

This section examines the impacts of having to manage menstruation without proper supplies or access to clean water for hygiene management, including missing out on community and professional activities; the physical health complications associated with the improper use of menstrual products; and the impact of period poverty on an individual’s mental health and wellbeing.

Missing Out on School, Work, and Activities

Lack of access to menstrual products or hygiene facilities often forces some individuals who menstruate to miss out on community activities. It can preclude their ability to participate fully in activities or cause them to leave the activities early.¹⁴⁸ This results in missed educational, professional, and social opportunities.

In Canada, some organizations have conducted surveys to understand how limited access to menstrual products affects people who menstruate, including whether menstruation prevents them from attending community events.

The United Way Period Promise Research Project, a collaboration between the United Way and British Columbia’s Ministry of Social Development and Poverty Reduction, conducted an in-depth study on period poverty in British Columbia, with findings published in January 2021.¹⁴⁹ The Period Promise Research Project gathered research data from two sources – through 12 community-led nonprofits across British Columbia, and through a public-facing survey available on the United Way’s Period Promise website.¹⁵⁰ All of the participating community organizations served Indigenous (First Nations, Inuit, Métis) peoples in British Columbia.¹⁵¹ Of the survey participants, 9.55% identified as First Nations, Métis, or Inuit.¹⁵²

As part of the research, participants were asked whether they ever experienced isolation or restrictions in attending school, work, or community events, or had to leave such activities due to menstruation-related challenges, including lack of access to period products.¹⁵³ The majority of respondents confirmed that they were likely to miss out on school, work, community, or social events due to a lack of access to menstrual products. The project found that respondents who identified as Indigenous were the most likely to have missed community engagement opportunities due to limited access to menstrual products.¹⁵⁴ In response to the statement “When I don’t have access to menstrual products I am more likely to stay at home than go out,” on the scale of 1 (strongly disagree) to 5 (strongly agree), respondents who identified as Indigenous responded on average with a rating of 4.39, with the most common response being 5.¹⁵⁵ Missing or leaving community engagement opportunities, the project stated, “. . . translates to missed

opportunities to learn, earn an income, contribute to or benefit from their community, or enjoy a healthy social life for no reason other than an uncontrollable function of their body.”¹⁵⁶

With respect to missing out, the Period Promise Research Project concluded:

“Limited access to menstrual products has a substantial impact on people’s day-to-day lives, with a substantial number of respondents indicating that they had missed school, work, community events, and social events because they did not have menstrual products. Even accounting for the inherent self-selection bias in the survey, it is clear that period poverty acts as a substantial barrier to work, education, and a healthy community connection for people in our province.”¹⁵⁷

Moon Time Connections, which is a national Indigenous-led period equity group in Canada and part of True North Aid, along with the University of Saskatchewan, conducted a survey of people who menstruate who are 15 years of age and older, living in remote, northern communities in Canada. Moon Time Connections published its report in 2022 (the “Moon Time Connections Report”).

With respect to missing out due to a lack of access to menstrual products, the Moon Time Connections Report considered whether respondents missed the following categories of activities: school, events, exercise, work, medical appointments, and a category of “other.” The Moon Time Connections Report conveyed the following findings:¹⁵⁸

- 73% of Indigenous respondents said that they have had to miss at least one type of activity.
- 29% of Indigenous respondents in remote communities said that they missed one type of activity; 27% said they missed two types of activities; and 18% said that they missed three to five types of activities.
- When responses were assessed based on the age of the respondent:
 - Indigenous respondents under 30 years of age were most likely to miss school (47%), exercise (41%), and work (29%).
 - Indigenous respondents 30 years of age or older were more likely to miss work (42%), exercise (42%), and events (24%).

Mental Health

A lack of access to menstrual products and/or clean water for menstrual hygiene management has been linked to negative impacts on mental health and wellbeing. Period poverty may also negatively impact the mental health and wellbeing of individuals experiencing it; period poverty has been directly linked to anxiety and depression.¹⁵⁹ In the United States, the Justice Necessary 2022 survey found that 55% of all respondents self-reported that their “mental health suffered” due to a lack of access to menstrual products.¹⁶⁰ This increased to 60% of all respondents in the 2024 survey.

Justice Necessary found that those numbers increased to 71% for respondents identifying as Native American, Indian, or Alaskan Native/Inuit.¹⁶¹

The Period Promise Research Project asked respondents whether having access to menstrual products had a positive impact on their quality of life. The vast majority of respondents answered in strong agreement; of the 158 respondents that identified as Indigenous, the average response on the scale of 1 (strongly disagree) to 5 (strongly agree) was 4.3, with 5 being the most common response.¹⁶²

The Period Promise Research Project noted that reusable menstrual products may provide people who menstruate with “a better sense of preparedness and control over their period, substantially reducing some of the negative impacts that periods can have on people living in poverty.”¹⁶³

However, sustainable and reusable alternatives require clean, sanitary water to maintain.¹⁶⁴ Given the many communities that do not have access to clean water, reusable menstrual products may not be a convenient or viable option. In Canada, many reserves have experienced long-term drinking water advisories, meaning there is a lack of clean, safe drinking water that is easily accessible. For example, 35 long-term drinking water advisories are currently active in First Nations communities across Saskatchewan, Manitoba, Newfoundland, and Ontario¹⁶⁵; the Neskantaga First Nation in Ontario has been under a boil water advisory for 30 years.¹⁶⁶

Physical Health

According to a Plan International Canada survey conducted in 2022, 22% of all respondents who menstruate reported that they have had to ration or use products longer than they should due to a lack of access to menstrual products.¹⁶⁷

In the Justice Necessary 2024 study, 75% of women reported using substitute products (such as toilet paper, napkins/tissues, paper towels, cloth, and socks) during their period in the last year, and 48% extended the use of period products beyond recommended times to conserve supplies.¹⁶⁸

Rationing menstrual products, using menstrual products improperly, or using substitute materials can cause infections or other medical problems.¹⁶⁹ Using materials like paper towels or soiled pads also places individuals at a heightened risk for urogenital infections, such as urinary tract infections and bacterial vaginosis. Using such materials has also been associated with skin irritation, vaginal itching, and white or green discharge.¹⁷⁰ Using menstrual products longer than intended, known as “stretching products,” places individuals at higher risk of experiencing urinary tract infections and toxic shock syndrome, which is a potentially fatal condition.

In addition, a lack of access to menstrual health education can lead individuals to dismiss or ignore symptoms related to serious reproductive health issues, including endometriosis, polycystic ovarian syndrome, or blood clotting disorders.¹⁷¹

Menstrual Health Resources for Indigenous Peoples in North America

Indigenous peoples experience disproportionately high rates of period poverty in both the United States and Canada, manifesting in limited access to menstrual products, inadequate menstrual health education, and insufficient sanitation facilities. In both countries, Indigenous populations are more likely than non-Indigenous populations to experience negative impacts from period poverty, including missed educational, professional, and social opportunities, as well as adverse mental and physical health outcomes.¹⁷²

Despite these similarities, the United States and Canada have adopted distinct policy and programmatic approaches to addressing period poverty in Indigenous communities. In the United States, federal initiatives such as the Indian Health Service (IHS) and the Bureau of Indian Education (BIE) provide indirect support for menstrual health through broader healthcare and educational services, but there is a notable absence of targeted federal funding or mandates specifically addressing menstrual product access for Indigenous peoples. Nonprofit organizations, such as The Kwek Society and Running Strong for American Indian Youth, distribute menstrual products and provide education in partnership with Indigenous communities.¹⁷³

In contrast, Canada has implemented a more centralized and coordinated response. The federal government, through departments including Indigenous Services Canada (ISC) and Women and Gender Equality Canada, has launched targeted initiatives to provide free menstrual products in First Nations schools on reserves and in northern communities. The Menstrual Equity Fund, administered by Food Banks Canada, supports the distribution of menstrual products and the scaling up of education and awareness activities nationwide, with specific attention to Indigenous and remote communities. Nonprofit organizations, such as Moon Time Connections and the Native Women's Association of Canada, further supplement these efforts by distributing products and delivering culturally relevant menstrual health education.

United States

Federal Programming

In the United States, there is a notable gap in federally funded initiatives specifically targeting access to menstrual health products, education, and other resources for Indigenous peoples who menstruate. However, while direct support is limited, there are several federally funded programs that indirectly support these access initiatives, including the IHS and the BIE.

The Indian Health System

The Indian Health System is a comprehensive network that includes the IHS, Tribal facilities, and Urban Indian Organizations.¹⁷⁴ The IHS plays a crucial role in providing healthcare services to Indigenous and Alaska Native populations, as there is a treaty basis and federal obligation on the part of the United States to provide healthcare to Indigenous populations.¹⁷⁵ Notably, 60% of IHS appropriations are controlled by tribes.¹⁷⁶ The IHS provides services to 2.8 million Indigenous peoples in 574 federally recognized tribes.¹⁷⁷ While the IHS does not have a specific mandate regarding menstrual health, its broad healthcare services encompass general health needs, which can include menstrual health as part of women's health services overall.

Additionally, the IHS has launched new sanitation facility construction projects.¹⁷⁸ These projects will increase Indigenous communities' access to WASH (Water, Sanitation, and Hygiene) facilities. This includes providing "homes and communities with essential water supply, sewage disposal and solid waste disposal facilities" by environmental engineers assigned to an IHS Area Office.¹⁷⁹ The Administration for Children and Families has found that Native American households are 19 times more likely than non-native households to lack indoor plumbing. Navajo residents are 67 times more likely to lack access to running water than other Americans.¹⁸⁰ In 2022, the United States Congress appropriated \$3.5 billion under the 2022 Bipartisan Infrastructure Law to the IHS to "build the infrastructure necessary to ensure a safe supply of drinking water, reliable sewage systems and solid waste disposal facilities."¹⁸¹ This project is currently ongoing, and progress can be tracked via an online interactive map.¹⁸²

The Bureau of Indian Education

The BIE is a federal department that funds and provides education to Indigenous and Alaskan native students.¹⁸³ In 2025, the BIE requested \$1.5 billion in appropriations, an increase of \$119.5 million from the previous fiscal year's appropriation.¹⁸⁴ The BIE supports elementary, secondary, and post-secondary educational establishments, including tribally controlled and bureau-operated schools.¹⁸⁵ The BIE serves approximately 40,000 students, with a majority of those being controlled and operated under Tribal governments.¹⁸⁶ The BIE's funding is primarily directed toward educational services, infrastructure, and support programs for Native American students.

The BIE has not explicitly allocated funding for menstrual health education, including initiatives to address period poverty. Instead, the funding is directed toward educational services and integrated support programs. For instance, the BIE's budget for behavioral and mental health services is not a separate line item but is integrated into various initiatives. An

example of this is the Safe and Secure Schools program, which includes provisions for behavioral health services to address the mental and emotional wellbeing of students, thereby creating a safe learning environment.¹⁸⁷

Menstrual Equity for All Act

The Menstrual Equity Act for All is a legislative attempt to address menstrual health at the federal level.¹⁸⁸ Re-introduced in the U.S. House of Representatives on May 29, 2025, and sponsored by Representative Grace Meng of New York, the bill has not yet been passed by Congress.

The Menstrual Equity for All Act would expand access to menstrual products through federal programs and prohibit states and localities from taxing retail sales of a range of menstrual products. It would also require Medicaid to cover the cost of menstrual products. This could significantly impact Indigenous populations, as The National Council of Urban Indian Health found that as of 2020, approximately one-fifth of Indigenous peoples and Alaska Natives (over 1.8 million people) were covered by Medicaid.¹⁸⁹

There is a clear gap in federally funded initiatives specifically targeting menstrual health for Indigenous women; existing programs administered by the IHS and BIE provide indirect support. The Menstrual Equity for All Act represents a legislative effort to address menstrual health more comprehensively, which could benefit Indigenous populations significantly were it to be passed and enacted.

State Programming

According to the National Center for Education Statistics, there are 426,000 Indigenous and Alaskan Native students enrolled in public elementary and secondary schools.¹⁹⁰ The National Indian Education Association estimates that 93% of all Indigenous and Alaskan Native students attend public schools in the United States.¹⁹¹ Individual states have adopted various strategies to address period poverty, which can generally be categorized into four distinct approaches: 1) states that require period products in schools and provide funding, 2) states that mandate the provision of products without funding, 3) states that offer funding without a requirement, and 4) states that have not addressed the issue at all.¹⁹² There are currently 23 states that take the fourth approach and have not addressed the issue of providing period products in school.¹⁹³ The following are examples of states that fall into the other three categories.

Menstrual Product Mandate with Funding Available

New Mexico is among the five states in which the largest proportions of American Indian and Alaska Native students attend public schools.¹⁹⁴ New Mexico appropriated \$3 million for the purchase and installation of menstrual product dispensers and the distribution of menstrual products across public schools statewide.¹⁹⁵ Under New Mexico state law, menstrual sanitary pads and tampons must be made available at no charge in all women's and gender-neutral bathrooms, as well as at least one men's bathroom, in every public middle and high school.

It is unclear, based on the text of the legislation, whether New Mexico's 45 BIE-operated and tribally controlled schools receive funding from this appropriation.¹⁹⁶ However, despite the state's large number of tribally controlled schools, New Mexico public schools serve more than 31,000 Indigenous students.¹⁹⁷

Product Mandate with no Funding Available

Washington is an example of a state that mandates the provision of menstrual products in public schools. Indigenous and Alaskan Native students make up approximately 25% of Washington's student population in 57 schools across the state.¹⁹⁸ Washington's law applies to school districts, charter schools, state-tribal schools, and private schools serving grades 6-12, as well as higher education institutions.¹⁹⁹ However, Washington does not provide funding for schools to fulfill this mandate. These institutions are required to self-fund to make menstrual products available in all gender-neutral and women's restrooms. State Tribal Education compact schools are not funded nor operated by the BIE; instead, they are operated under the terms of a state-tribal education compact. Currently, there are eight state-tribal compact schools operating in Washington.²⁰⁰

The types of menstrual products that must be made available include menstrual single-use pads, tampons, or similar items. While the mandate requires schools, including state-tribal schools, to bear the cost of supplying these products, it also allows schools to seek grants or partner with other organizations to comply with the law. This provision offers a pathway for schools to secure additional resources, but this is an added burden to schools since the law itself does not fund the mandate.

Funding Availability with No Mandate Attached

North Carolina has established the Feminine Hygiene Products Grant Program, which enables schools to apply for grants of up to \$5,000 every fiscal year to provide students with access to menstrual products at no cost to them.²⁰¹ For the 2023-2024 academic year, there were 15,276 American Indian/Alaskan Native students enrolled in North Carolina's public schools. North Carolina's Department of Public Instruction contains an office of Indian Education that collaborates with schools, districts, tribal communities, and state agencies. The State Board of Education reported that for the 2023-2024 school year, it received 149 applications from various school districts and charter schools.²⁰² A \$250,000 funding limit meant that only 64 applicants, 42% of those seeking grants, were able to receive funding.

The awardees in North Carolina reported using the grants to purchase not only products such as pads and tampons, but also "educational materials on puberty." Schools in North Carolina reported that the grants have aided students in staying in school during their menstrual cycles as well as supporting educational opportunities for maintaining good hygiene to reduce instances of infections.

Nonprofit-Funded Initiatives

Nonprofit organizations in the United States are increasingly stepping in to address funding shortfalls for menstrual health initiatives within Indigenous communities, implementing targeted programs and engaging in educational efforts.

One such example is The Kwek Society, which is operated by Indigenous women and focused on Indigenous community needs.²⁰³ The Kwek Society is working to end period poverty among Indigenous communities in the United States while celebrating individual dignity, agency, and success.²⁰⁴ The Kwek Society supplies a variety of menstrual products to meet the diverse needs of people who menstruate.²⁰⁵ It distributes period products via community-sewn and donated Moon Time Bags and Auntie Bags containing disposable products and also offers reusable pads, menstrual cups, and cotton underwear.²⁰⁶ These products are distributed through and in connection with local schools and community organizations located across the United States.²⁰⁷

The Kwek Society reports that by the end of 2025, it had distributed 5.3 million menstrual products. The Kwek Society works with school partners in 22 U.S. states.²⁰⁸ While The Kwek Society's primary work is with schools, it also supports community-based programs, including for example, Indigenous-run summer youth camps. The Kwek Society now supports over 240 schools and organizations, reaching an estimated 32,000 people who menstruate.²⁰⁹ The Kwek Society also partners with schools to stock their nurses' offices and libraries with puberty education books when these are requested by school administrators, respecting local needs and decision-making around puberty education.²¹⁰

Another initiative is led by the nonprofit organization Running Strong for American Indian Youth, which administers the Wičičhaǵa Strong Program.²¹¹ This program, operational as of May 1, 2024, derives its name from the Lakota language, translating to "they all grow, they thrive, they prosper, they are the generation."²¹²

Through the Wičičhaǵa Strong Program, Running Strong distributes period products at local schools and community centers, specifically targeting remote and underserved Indigenous communities. The Wičičhaǵa Strong Program also distributes thousands of feminine hygiene kits, which include supplies beyond tampons and pads. Additionally, the program provides women with essential knowledge about managing their periods, works to dismantle the stigma surrounding menstruation, and promotes positive conversations about menstrual health.²¹³

The Kwek Society and the Wičičhaǵa Strong Program are making strides in addressing period poverty within Indigenous communities in the United States. It is likely that there are grassroots efforts in local Indigenous communities engaging in similar initiatives that do not have an online presence or whose efforts are more localized. For example, Project Distributing Dignity provides menstrual products to students on reservations in South Dakota.²¹⁴

Canada

Federal Programming

The Federal Government of Canada has implemented a number of initiatives to improve access to menstrual products for people who menstruate, particularly in recent years following the recommendations of the House of Commons Standing Committee on the Status of Women and the publication of its 2023 report, "Let's Talk About It, Period: Achieving Menstrual Equity in Canada" (the "Canada Report").²¹⁵

The Canada Report made the following recommendations specifically with respect to Indigenous peoples in Canada:

1. The Government of Canada should consult with Indigenous peoples to address period poverty and accessibility, particularly in northern communities where limited access to menstrual health products is common.
2. The Government of Canada should ensure funding for First Nations and First Nations-designated education organizations to procure the quantity needed as well as the desired type of free menstrual health products, including reusable and sustainable products, for students both on and off reserves.
3. The Government of Canada should ensure all First Nations communities have reliable access to clean water and safely lift, as soon as possible, all long-term drinking water advisories on public systems on reserves in Canada.

The Government of Canada has implemented some of the recommendations, outlined in further detail below, along with other initiatives implemented at the federal level.

Sexual and Reproductive Health Fund

The Sexual and Reproductive Health Fund (the "SRHF") is a Canadian federal healthcare fund, aiming to strengthen the healthcare system and related support for under-served community members that may face discrimination from the healthcare system. The SRHF also works to remove other barriers and challenges resulting in unequal access to sexual and reproductive health services.²¹⁶

With respect to Indigenous communities specifically, the SRHF has supported the following projects:²¹⁷

- Centre for Sexuality – The SRHF has supported the project "Increasing access to [sexual and reproductive health] information, resources and care for under-served communities." This project allows the Centre for Sexuality to add an online component to their Relationship and Sexual Health Education Program. It also supports content development specifically addressing the needs of First Nations youth, in partnership with two First Nations communities in Treaty 7 territory.²¹⁸
- Native Women's Association of Canada – The SRHF supported a Native Women's Association of Canada project supporting culturally safe and trauma-informed sexual and reproductive healthcare for Indigenous women, girls, Two-Spirit,²¹⁹ transgender, and gender-diverse people.²²⁰

- Provincial Health Services Authority Indigenous Health – The SRHF also supported British Columbia’s Provincial Health Services Authority Indigenous Health project: “reproductive, sexual and gender health and care: anti-Indigenous racism and Indigenous youth wellness.” Provincial Health Services Authority Indigenous Health continues to support work across the Provincial Health Services Authority to eradicate anti-Indigenous racism and discrimination, promote cultural safety, and respond to legislative obligations and provincial commitments to Indigenous peoples in British Columbia.²²¹

Menstrual Equity Fund

Women and Gender Equality Canada, a department of the Government of Canada, launched a national pilot project, the Menstrual Equity Fund, in September 2023. Food Banks Canada was selected to administer the pilot project, which is intended to address period poverty in Canada. The Menstrual Equity Fund’s main objectives are to (a) “test a national approach to provide free access to menstrual products to diverse low-income communities across Canada,” and (b) “increase education and awareness on people’s knowledge of menstrual products, good practices, and period stigma.”²²²

Since the pilot began, almost 400 pilot site locations have been selected with representation in all provinces and territories across Canada. Disposable product supplier, reusable product supplier, and distribution partnerships have been established, and six menstrual health organizations across Canada were selected to scale up their education and awareness activities.²²³ The Menstrual Equity Fund also supports the initiative of Indigenous Services Canada (ISC) to provide funding for free menstrual products in First Nations schools on reserves and in federal schools across Canada, as well as providing funding to Indigenous partners and the territorial and provincial governments for Northern schools.²²⁴

Indigenous Services Canada (ISC)

Indigenous Services Canada (ISC) is a department of the Government of Canada that is responsible for policies relating to Indigenous peoples in Canada. It is tasked with working collaboratively with partners to improve access to high-quality services for First Nations, Inuit, and Métis. ISC’s mandate is “to support and empower Indigenous peoples to independently deliver and address the socio-economic conditions in their communities.”

Indigenous Services Canada has provided funding for free access to menstrual products in First Nations and First Nations-designated education organizations on reserve.²²⁵ Since 2021, Indigenous Services Canada has also engaged with Indigenous partners in Northern Canada, and their territorial and provincial governments, to identify organizations that are “best placed to receive funding and provide free menstrual products in northern schools.”²²⁶

Menstrual Health and Occupational Health and Safety Legislation

Effective December 15, 2023, federally regulated employers in Canada are required to provide menstrual products, including clean and hygienic tampons and menstrual pads, in each bathroom (including every female, male, and all-gender bathroom). Employers must also provide a covered container for the disposal of menstrual products in all bathroom stalls and bathrooms that have only one toilet.²²⁷

Federally regulated employers in Canada make up a minority of employers in Canada. They include employers in the public sector (namely, Parliament and the federal public service) and employers operating in industries within the federally regulated private sector.

First Nations band councils and Indigenous self-governments are generally also considered federal employers, to which the menstrual product requirements would apply.²²⁸ However, not all Indigenous organizations are federally regulated – many are provincially regulated, such as child and family services, health and medical services, and economic development services. This means that the federal requirement to supply menstrual products in all bathrooms does not apply in the workplaces of all Indigenous organizations.

Educational Programming

Generally, in Canada, education falls under provincial and territorial jurisdiction. However, where there is oversight of a school’s administration by a First Nations band council, education will fall under federal jurisdiction.

Many Indigenous children attend provincially or territorially funded schools. In Ontario, for example, the Ministry of Education reported that more than 80% of Indigenous students attended provincially funded elementary and secondary schools, based on enrollment data in October 2015.²²⁹ More recently, and taking a broader look across the provinces, the Assembly of First Nations reported that in 2021, approximately 32% of First Nations students (not including Inuit and Métis students) attended school in the provincial school system, and 65% attended a First Nations-operated school.²³⁰

Public schools subject to provincial or territorial jurisdiction across Canada typically include educational programming on health and physical education as part of the public-school curriculum. Some First Nations schools may also follow the provincial or territorial public education curriculum.²³¹

For example, in Ontario, the health and physical education curriculum for grades 1 to 8 includes mandatory education with respect to menstruation.²³² School boards may have a policy allowing students to be exempted, at their parents’ request, from instruction related to human development and sexual health, which teachers must follow.

Similarly, in Manitoba, the kindergarten to grade 12 physical education and health education curriculum includes specific learning outcomes related to menstruation and menstrual health.²³³

On reserve, First Nations and organizations designated by First Nations are responsible for managing and delivering education programs and services for students who live on reserve. Indigenous Services Canada provides funding for students on reserve who are enrolled in and attend an eligible elementary or secondary school program.²³⁴ There are some self-government and education legislation efforts that also contribute to the operation of First Nations educational institutions.²³⁵

The extent to which funding is directed specifically to sexual and physical health education, whether for Indigenous students in Indigenous-operated schools or public/private schools, is unclear. Further information regarding the integration of curricula focused on menstrual health specifically, including the teaching of traditional cultural practices and beliefs, within Indigenous-operated schools or public/private schools, is not readily available.

Provincial/Territorial Programming

Menstrual Product Access in Schools (see Appendix A)

In British Columbia,²³⁶ Nova Scotia,²³⁷ Prince Edward Island,²³⁸ and New Brunswick,²³⁹ free menstrual products are provided to students in public schools. Through collaborations with private corporations, provincial governments, and/or community organizations, free menstrual products are also available to students of select schools in Alberta,²⁴⁰ Saskatchewan,²⁴¹ Manitoba,²⁴² Ontario,²⁴³ and Newfoundland and Labrador.²⁴⁴

Yukon

As part of the ISC's initiative to provide free menstrual products in schools operated by First Nations, ISC has partnered with the Yukon Government and Council of Yukon First Nations (CRFN) to ensure that menstrual products are distributed to Yukon First Nation Communities and Non-Governmental Organizations.²⁴⁵ From 2022 to 2023, ISC provided CAD \$525,000 in funding to CYFN to implement the project in Yukon. The Yukon government also provided CAD \$100,000 in funding from 2021 to 2022 to help CYFN administer this initiative in Yukon schools.

Northwest Territories

The Northwest Territories is included in ISC's initiative to provide free menstrual products to schools operated by First Nations on reserves and in federal schools.²⁴⁶

Nunavut

In Nunavut, ISC provided CAD \$821,489 to Nunavut Tunngavik Inc. to purchase, maintain, store, and distribute supplies to schools and organizations that run youth programming in Nunavut communities.²⁴⁷ Nunavut Tunngavik Inc. is the legal representative of the Inuit of Nunavut under the Nunavut Agreement, which is a land claims agreement.

Nonprofit-Funded Initiatives

Moon Time Connections is a national Indigenous-led period equity group in Canada operating under the umbrella of True North Aid, dedicated to supporting Indigenous individuals across Turtle Island by ensuring access to menstrual products and providing essential menstrual education. The organization includes four chapters: Saskatchewan, Ontario, Manitoba, and British Columbia.²⁴⁸

Through these chapters, Moon Time Connections has developed partnerships with over 120 northern Indigenous communities and has shipped over 4 million period products to a wide range of recipients, including high schools, elementary schools, midwifery organizations, healthcare centers, Friendship Centres, shelters, food banks, and community programs in remote areas across Canada.²⁴⁹

Beyond product distribution, Moon Time Connections places a strong emphasis on menstrual education. The organization offers the "Moon Time Facilitator Training Program" for Northern community members, equipping local leaders with the knowledge and skills to support menstrual health in their communities. Additionally, Moon Time Connections hosts Chapter Leads in Northern communities to deliver "Moon Time 101" presentations and presentations on period inequality in Northern communities for the general population. These educational initiatives are designed to foster open dialogue, reduce stigma, and empower Indigenous communities with culturally relevant information and resources.²⁵⁰

The Native Women's Association of Canada (NWAC) is a national Indigenous organization that advocates for the rights and wellbeing of Indigenous women, girls, Two-Spirit, transgender, and gender-diverse people.²⁵¹ In 2023, NAWC signed an agreement with Citron Hygiene to disseminate an initial donation of 5,000 menstrual products. This initiative is part of a broader program by Aunt Flow, in which for every ten products sold, one is donated to communities in need. In Canada, the program is managed by Citron Hygiene, with NWAC serving as a distribution partner to ensure that donated products reach Indigenous individuals who face barriers to access.²⁵²

In addition to these organizations, there are likely Indigenous-led groups and community initiatives that address period poverty at the local level. These may not be formal nonprofits but are often grassroots efforts led by Indigenous peoples.

Recommendations

The following recommendations for Indigenous menstrual health interventions, to help alleviate period poverty, are informed by interviews with Indigenous peoples, interviews with professionals who work alongside Indigenous communities, and current research. These broad recommendations are intended for policymakers, funders, and organizations seeking to advance menstrual health in North American Indigenous communities.

Prioritize Community-Led Approaches

Most importantly, efforts to address period poverty in Indigenous communities should be led by Indigenous peoples themselves.²⁵³ Funding and resources should be directed to Indigenous organizations and grassroots initiatives, enabling them to design and implement menstrual health programs that reflect the unique cultural, social, and geographic realities of their communities. Community leadership will ensure that solutions are tailored to local needs, respect traditional knowledge, and will foster trust and empowerment among community members. Indigenous communities have experienced “one and done” interventions that erode trust.²⁵⁴ Funding models should prioritize long-term partnerships and capacity-building initiatives within Indigenous communities.²⁵⁵ By centering Indigenous voices in decision-making, interventions are more likely to be effective and sustainable.

Ensure Broad, Consistent Access to Menstrual Products

Menstrual health interventions must prioritize the dignity and preferences of the people who menstruate.²⁵⁶ This includes providing a range of quality menstrual products, including both disposable and reusable options, so that individuals can choose what works best for them.²⁵⁷ Product distribution should be consistent, reliable, and sensitive to local circumstances.²⁵⁸ For example, reusable products may not be practical where clean water access is limited.²⁵⁹

Consistent product distribution could be achieved through additional government funding accompanied by governmental or school board mandates requiring that all schools serving a significant number of Indigenous students supply free menstrual products. Funding and resources should be directed to the schools themselves and/or to Indigenous organizations and grassroots initiatives, enabling each recipient to design and implement menstrual health programs that reflect the unique cultural, social, and geographic realities of their communities.

Address Infrastructure Barriers

Infrastructure challenges, specifically the lack of running water, electricity, and adequate waste disposal, directly impact menstrual health management.²⁶⁰ For example, some homes in rural communities have limited access to water, and residents may have to travel to central stations or community centers to fill water jugs for the week.²⁶¹ Water is a precious resource, and there is a reluctance among members of some Indigenous communities to use water for activities considered to be a lower priority, like washing reusable menstrual products. This can lead girls and women to depend on disposable products, which may not be easily accessible due to high costs or a lack of availability within a reasonable distance.²⁶² Investment in critical infrastructure, including water facilities, is necessary for menstrual health, particularly in remote communities.²⁶³

Support Community-Led, Culturally Sensitive Menstrual Health Education

Menstrual health education equips young people with accurate information to understand their bodies, challenge stigma, and make informed choices. When learners receive clear, age-appropriate guidance on the menstrual cycle, hygiene, pain management, and when to seek care, they are better able to safeguard their health and participate fully in school, work, and community life. Menstrual health education also supports mental and emotional wellness alongside physical health. In Indigenous communities, educational approaches should be community-led, emphasizing local authority and cultural competence. Interventions should prioritize providing adaptable educational resources that schools and communities can use as they see fit.

Support the Revitalization of Traditional Ceremonies

There is a vibrant, ongoing revitalization of traditional menstrual ceremonies and teachings in many Indigenous communities.²⁶⁴ Funding should be made available for community events, regalia-making, and ceremony expenses, recognizing that hosting such events is costly.²⁶⁵ Some federal, state, and provincial governments already provide grant-based funding for programs and projects related to the revitalization of Indigenous languages, arts, and heritage.²⁶⁶ Ideally, such funding should be expanded, and grants should be awarded for programs and projects related to menstrual health ceremonies and teachings. The application process for such funding should be transparent and accessible, and Indigenous communities should be proactively informed of its availability.

Improve Data Collection and Research

Lastly, despite the impact of period poverty on Indigenous communities across North America, there remains a significant lack of comprehensive research dedicated to this issue. The current body of literature is limited in scope, often failing to capture the unique challenges faced by Indigenous peoples who menstruate. There is a lack of comprehensive data on Indigenous menstrual health, particularly regarding rural versus urban populations and the impact of interventions.

Research should examine not only access to menstrual products and sanitation facilities, but also the broader social, economic, and historical factors that contribute to period poverty, including the legacy of colonialism, systemic underfunding, and the disruption of traditional menstrual practices. Addressing this gap in the literature is essential for informing policy, guiding resource allocation, and supporting the design of community-driven solutions.

Endnotes

1. This report does not address period poverty in Indigenous communities in Hawaii.
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3. Cutcha Risling Baldy, *mini-k'wh'e:n (For That Purpose—I Consider Things): (Re)writing and (Re)righting Indigenous Menstrual Practices to Intervene on Contemporary Menstrual Discourse and the Politics of Taboo*, *Critical Methodologies*, 17(1) *Cultural Studies Critical Methodologies* 22 (2016), <https://journals.sagepub.com/home/csc>.
4. See Paul, *supra* note 2, at 81.
5. Joey-Lynn Wabie, *Rites of Passage for Algonquin & Ojibwe Female Adolescents: The Berry Fast Experience*, 1 (Master's Thesis, Laurentian University) (2011), <https://laurentian.scholaris.ca/server/api/core/bitstreams/d27294a9-7d70-426e-b854-657bd50bbac4/content>.
6. Interview with Katie Bowie, Citizen Potawatomi Nation member, via Zoom (Aug. 7, 2025) (stating that colonization has led to shame and embarrassment around these traditions); Mary Annette Pember, *Indigenous Culture Reasserts Women's Power Through Dance*, *YES! Magazine* (Sept. 27, 2018), <https://www.yesmagazine.org/issue/mental-health/2018/09/27/indigenous-culture-reasserts-womens-power-through-dance>.
7. Interview with Dr. Cutcha Risling Baldy, Assistant Professor, California State Polytechnic University Humboldt, via Zoom (Sep. 3, 2025) (sharing that young women used to be kidnapped and/or raped by settlers at these ceremonies, especially during the Gold Rush era from 1848 to 1855).
8. *Id.*
9. See Risling Baldy, *supra* note 3, at 17; *supra* note 7 (Dr. Baldy stated that building power is an important part of Indigenous culture. Many women have the power to grow the population and, thus, the future; therefore, they were considered powerful).
10. Maia Eversole, *Empowerment through Menstruation: An Examination of the Išnáthi Awí'chalowaŋpi Coming-of-Age Ceremony for Lakota Girls*, 8 J. of Undergraduate Res. in Anthro. 48 (2024), https://uca.edu/sociology/files/2024/10/JURA2024_PROOF_2.pdf.
11. *Id.*
12. Kim Anderson, *A Recognition of Being: Reconstructing Native Womanhood*, 166 (2000); Mary Annette Pember, "Honoring Our Monthly Moons": *Some Menstruation Rituals Give Indigenous Women Hope*, *Rewire News Group* (Feb. 20, 2019), <https://rewirenewsgroup.com/2019/02/20/monthly-moons-menstruation-rituals-indigenous-women/>; see Wabie, *supra* note 5, at 53.
13. Paula G. Allen, *The Sacred Hoop: Recovering the feminine in American Indian Traditions*, 254 (Beacon Press 1986).
14. See Wabie, *supra* note 5, at 40.
15. See Allen, *supra* note 13, at 254.
16. See Risling Baldy, *supra* note 3, at 22.
17. See Wabie, *supra* note 5, at 9.
18. *Id.*
19. See Anderson, *supra* note 12, at 38.
20. See Allen, *supra* note 13, at 47.
21. See Wabie, *supra* note 5, at 10.
22. See Anderson, *supra* note 12, at 74.
23. See Wabie, *supra* note 5, at 9.
24. The Navajo, also known as the Diné, are an Indigenous people of the American Southwest. They are the largest American Indian tribe in the United States.
25. Bazhnibah, *Kinaaldá: Coming of age in Traditional Diné Ceremony*, *Navajo Times*, July 2, 2021, <https://navajotimes.com/opinion/essay/kinaalda-coming-of-age-in-traditional-dine-ceremony/>.
26. Vivian Meza, *How a Navajo Girl Comes of Age in Traditional Kinaaldá Ceremony*, *Arizona Central*, May 31, 2019, <https://www.azcentral.com/story/news/local/arizona/2019/05/31/how-navajo-girl-comes-age-traditional-kinaalda-ceremony/1300291001/>.
27. *Id.*
28. *Id.*
29. *Id.*; see Bazhnibah, *supra* note 25.
30. Carol A. Markstrom & Alejandro Iborra, *Adolescent Identity Formation and Rites of Passage: The Navajo Kinaaldá Ceremony for Girls*, 13(4) *J. of Res. on Adolescence* 411 (2003).
31. *Id.*
32. See Markstrom & Iborra, *supra* note 30, at 410; Flora Bailey & Leland Wyman, *Navaho Girl's Puberty Rite*, 6(1) *New Mexico Anthropologist* 3 (1943), https://digitalrepository.unm.edu/nm_anthropologist/vol6/iss1/3.
33. See Meza, *supra* note 26.
34. See Markstrom & Iborra, *supra* note 30, at 408.
35. See Markstrom & Iborra, *supra* note 30.
36. See Markstrom & Iborra, *supra* note 30, at 412; Laura Tohe, *There is No Word for Feminism in My Language*, 15(2) *Wicazo Sa Review* 106 (Autumn, 2000), <https://www.jstor.org/stable/1409467>.
37. See Markstrom & Iborra, *supra* note 30, at 413.
38. See Bailey & Wyman, *supra* note 32, at 5.
39. Interview with Alta Mitchell, Alcohol and Drug Abuse Counselor, Wingate High School, via Zoom (Aug. 13, 2025).
40. See Markstrom & Iborra, *supra* note 30, at 414.
41. *Id.*; see Mitchell, *supra* note 39 (Fathers have actively participated in ceremonies by starting the fire to bake the corn cake. Tasks like digging and fire starting are performed by male relatives—uncles, cousins, brothers, and fathers).
42. See Markstrom & Iborra, *supra* note 30, at 416.
43. *Id.* at 415–16.
44. Tohe, *supra* note 36, at 106.
45. *Id.*
46. *Id.* at 106-07; *supra* note 39 ("stating that during Kinaaldá, participants are not allowed to have sweets and may only eat fresh food").
47. See Tohe, *supra* note 36, at 106.
48. *Id.*
49. See Markstrom & Iborra, *supra* note 30, at 414.
50. See Tohe, *supra* note 36, at 106.
51. *Id.*
52. *Id.* at 107.
53. Julie Bielenberg, *Kinaaldá, A Navajo Coming-Of-Age*, *Spoke & Blossom* (Fall 2024), <https://www.spokeandblossom.com/stories/2024/10/18/kinaald-anavajo-coming-of-age>.
54. The Hupa are an Indigenous tribe in northwestern California.
55. See Risling Baldy, *supra* note 3, at 26 (to "beat time" means to keep pace by knocking a stick or stick-like instrument against a solid surface).
56. Charles Woodruff, *Dances of the Hupa Indians*, 5(1) *American Anthropologist* 59 (Jan. 1892), <https://www.jstor.org/stable/658770>.
57. Cutcha Risling Baldy, *The Flower Dancers: Reviving Hupa Coming-of-Age Ceremonies*, *N. Coast J. of Pol. People & Art* (Aug. 2, 2018), <https://www.northcoastjournal.com/news/the-flower-dancers-10229320>.
58. *Id.*
59. *Id.* (Men could bathe in that same place during separate times, suggesting that a menstruating woman could not have been seen as contaminated); see Risling Baldy, *supra* note 57, at 59 (Older sources have suggested that the girls wore headdresses made of sea lion tusks that had been glued to a buckskin band).
60. Xijie Luo, *Parties, Periods and the Patriarchy: Predecessors to the Modern-Day Period Party*, 3 *Eur. J. of Human. and Soc. Sci.* 44 (2022), https://ppublishing.org/media/uploads/journals/article/EJH-3_22_p39-47.pdf.
61. See Risling Baldy, *supra* note 3, at 26–27 (Anthropologists have described menstrual huts as isolated, cramped, dark structures hurriedly pieced together with leaves and bark. They were often portrayed as unpleasant places to visit, where women were sent to be shunned from society during menstruation. However, these structures were used for various types of important gatherings, like births and miscarriages, and it is unlikely that the Hupa would risk the health and safety of their women by placing them in unsanitary, uncomfortable, and poorly built structures).
62. See Risling Baldy, *supra* note 7 (Dr. Baldy stated that the word min'ch means a small, familiar place that is dear to you. They were well-kept homes, not huts, and they were considered to be lucky spaces. Unfortunately, since the Gold Rush era, no min'chs have been found or verified because min'chs left young women, under threat of rape and kidnapping from settlers, in an extremely vulnerable position).
63. See Risling Baldy, *supra* note 3, at 26.
64. See Risling Baldy, *supra* note 57; see Pember, *supra* note 6.
65. *Id.*
66. *Id.*

67. *Id.*; Cutcha Risling Baldy, *Blue Jay Sings—The Revitalization of Women's Coming of Age Ceremonies and making Blue Jay Veils*, Blue Jay Veil, <https://www.nativewomenscollective.org/regaliastoriesbluejayveil.html> (last visited Sept. 2, 2025).
68. *Id.*
69. *Id.*
70. See Cutcha Risling Baldy, *supra* note 57.
71. *Id.*
72. *Id.* (Now, one to four dances happen annually in the Hoopa Valley. Young girls plan their Flower Dance years in advance and many do not know the time “when women and men did not come together to celebrate a girl and her first menstruation.”); see Cutcha Risling Baldy, *supra* note 7 (Among all tribes in the region of Northern California, there is a flower dance happening almost every weekend between May and October. Girls who cannot have their own, often due to cost, are welcome to participate in the ceremonies of others and play active supporting roles).
73. See Pember, *supra* note 6.
74. *Id.* (For older girls having their flower ceremony, the community has been split about whether the girl must be a virgin. Some indigenous community members feel that tradition requires that the young woman has not danced with men in ceremonies and that her virginity is intact since the ritual is also meant to present the young woman to the community. Modern perspectives do not require the virginity of the kinahldung or young woman).
75. *Id.* (noting that many young girls look forward to participating in the Flower Dance ceremony).
76. *Id.*
77. *Id.*
78. *Id.* (The ceremony is primarily for women, but now men are more involved. For example, if the girl's father is present, he accompanies his daughter on her ceremonial runs).
79. *Id.*
80. *Id.*
81. *Id.* (The girls are taught about the importance of running and its health benefits. In addition, they are taught about the great nutritional properties of acorns).
82. *Id.*
83. *Id.* (After her ceremony, the young woman is allowed to dance with men for the first time. Before her ceremony is complete, she is only allowed to dance with women and children).
84. *Id.*
85. Firsthand knowledge from field research and observation of a Hupa Flower Dance by Garanique Williams in Humboldt County, California, Oct. 3-5, 2025.
86. *Id.* (The kinahldung normally undergoes several days of progressive fasting leading up to the ceremony. By the end of the ceremony, she has been sustaining herself solely on acorn juice and huckleberry juice for a few days. Additionally, her grandmother(s) and other close “aunts” tend to her needs, keep her awake and energized, and organize any additional aspects of the ceremony—like face tattooing).
87. *Id.*
88. *Id.* (There are a number of men in attendance who helped carry items, tended to the fire, and helped with general logistics).
89. The hats are worn by women and symbolize a connection to the past.
90. *Id.*
91. *Id.*
92. *Id.* (Each of the five-round ceremony nights opens with a set of heavy songs. Each opening prayer song is sung for three rounds facing east, then the west. On the third night, both the men and the women each sing two heavy songs).
93. *Id.*
94. *Id.* (Hitting the min'ch “inspirits” it and invites the K'hena, revered spirits, to join the ceremony).
95. *Id.*
96. *Id.* (The Hupa say the first round of a song is sung for oneself, the second round is sung for the community, and the third round is for the K'hena, or spirits that inhabit the earth).
97. *Id.* (Each woman, young and older, prepared at least one song to sing as a part of this ceremony).
98. *Id.*
99. *Id.* (The final ceremony night usually consists of seven rounds that finish just as the sun begins to rise).
100. *Id.*
101. *Id.* (The young woman and her family were presented with gifts from community members at the end of the ceremony).
102. The Ojibwe live in the Great Lakes region of the United States and Canada.
103. Rosalyn R. LaPier, *How a Native American Coming-of-Age Ritual is Making a Comeback*, The Conversation (Feb. 10, 2020), <https://theconversation.com/how-a-native-american-coming-of-age-ritual-is-making-a-comeback-130524>; see Wabie, *supra* note 5, at 13 (“Women's cycles, or blood time, are considered very powerful medicine for women. It is during the moontime when women release that blood from their bodies that is most sacred.”).
104. See Pember, *supra* note 6.
105. See LaPier, *supra* note 103; see Pember, *supra* note 6 (“Ojibwe women traditionally secluded themselves in a moon lodge during menstruation Female friends and relatives ensured the menstruating woman was safe and fed, and they helped care for her family in her absence.”).
106. See Pember, *supra* note 6.
107. See LaPier, *supra* note 103; see Wabie, *supra* note 5, at 36-38.
108. See LaPier, *supra* note 103.
109. See Wabie, *supra* note 5, at 36-38.
110. See LaPier, *supra* note 103.
111. See Anderson, *supra* note 12, at 74.
112. Joey-Lynn Wabie, *Kijikwewin aji:sweetgrass stories with traditional Indigenous women in Northern Ontario*, 14(2) Int'l J. Of Indigenous Health (Growing Roots of Indigenous Wellbeing) 59 (Oct. 2019), <https://jips.library.utoronto.ca/index.php/ijih/article/view/31677/25173>.
113. *Id.*
114. See LaPier, *supra* note 103.
115. *Id.*
116. *Id.*
117. *Frequently Asked Questions*, Canadian Geographic: Indigenous Peoples Atlas of Canada, <https://indigenouspeoplesatlasofcanada.ca/article/frequently-asked-questions-metis/> (last visited Sept. 15, 2025).
118. See Paul, *supra* note 2, at 81.
119. Janice Gaudet & Diane Caron-Bourbonnais, *It's in Our Blood: Indigenous Women's Knowledge as a Critical Path to Women's Well-being*, 11(2) AlterNative: An International Journal of Indigenous Peoples 166 (Jan. 2015).
120. Leah M. Dorion, *Opikinawasowin: The Life Long Process of Growing Cree and Metis Children* 81 (Sept. 30, 2010) (Master's Thesis, Athabasca University), https://www.metismuseum.ca/media/document.php/13768.Dorion_traditional_child_rearing_2010_GDI.pdf.
121. See Allen, *supra* note 13, at 252; see Markstrom & Iborra, *supra* note 30, at 408.
122. See Risling Baldy, *supra* note 7.
123. See Allen, *supra* note 13, at 252.
124. See Markstrom & Iborra, *supra* note 30, at 408.
125. See Anderson, *supra* note 12, at 77 (Christian missionaries perpetuated a narrative that Indigenous spirituality was evil. Specifically, the power that women held through menstruation was an evil that needed to be controlled. During an increase in colonization, this rhetoric quickly became dominant, stripping Indigenous women of their power).
126. See Risling Baldy, *supra* note 3, at 23.
127. Jon Reyhner, *American Indian Boarding Schools: What Went Wrong? What Is Going Right?*, (57)1 J. of Am. Indian Educ. 58-78 (Spring 2018), <https://www.jstor.org/stable/10.5749/jamerindieduc.57.1.0058>.
128. See Wabie, *supra* note 5, at 1.
129. See Anderson, *supra* note 12, at 75-76.
130. *Id.* at 76.
131. *Id.*
132. *Id.*
133. *Id.*
134. See Risling Baldy, *supra* note 3, at 22.
135. *Id.*
136. Thomas Buckley, *Maturation and the Power of Women: Methods in Cultural Reconstruction*, 9(1) Am. Ethnologist 49-50 (Feb. 1982).
137. *Id.* at 50.
138. For example, see Wabie, *supra* note 5, at 1.
139. *Understanding Poverty in Indigenous Communities*, True North Aid, <https://truenorthaid.ca/understanding-poverty-in-indigenous-communities/> (last visited Apr. 25, 2025); *Poverty as a Social Determinant of First Nations, Inuit, and Métis Health*, N. Collaborating Centre for Aboriginal Health (Mar. 2020), <https://www.nccih.ca/docs/determinants/FS-Poverty-SDOH-FNMI-2020-EN.pdf>.
140. See, for example, *Addressing Period Poverty in Native American Communities*, Running

- Strong for Am. Indian Youth (May 11, 2023), <https://indianyouth.org/addressing-period-poverty-in-native-american-communities/>.
141. Period poverty “refers to the inability to afford and access menstrual products, sanitation and hygiene facilities and education and awareness to manage menstrual health.” *Period Poverty – Why Millions of Girls and Women Cannot Afford Their Periods*, UN Women (July 28, 2025), <https://www.unwomen.org/en/news-stories/explainer/2024/05/period-poverty-why-millions-of-girls-and-women-cannot-afford-their-periods>.
 142. See, for example, *Menstrual Health is a Public Health Crisis for Indigenous Youth*, Toronto Star (Oct. 13, 2022), https://www.thestar.com/opinion/contributors/menstrual-health-is-a-public-health-crisis-for-indigenous-youth/article_d8f3098b-1a61-52b7-a9c1-a8bdb9dc926d.html; *Impacts on Indigenous Peoples*, Statistics Canada, <https://www150.statcan.gc.ca/n1/pub/11-631-x/2020004/s7-eng.htm> (last modified Mar. 4, 2021).
 143. See, for example, Heather Lane, *An Assessment of Menstrual-Related Needs in Northern Communities*, Moon Time Connections and True North Aid (2024), <https://truenorthaid.ca/wp-content/uploads/2024/03/An-Assessment-of-Menstrual-Related-Needs-in-Northern-Communities-FINAL.pdf>.
 144. United Way, *United Way Period Promise Research Project Final Report 91* (Jan. 2021), https://uwbc.ca/wp-content/uploads/2023/01/Period_Promise_Research_Project_Final_Report_-_Errata_May_28_2021.pdf.
 145. *2022 Study on Women’s Period Poverty, Diaper Need, and Hygiene Poverty, Justice Necessary* (2022), <https://justicenecessary.org/the-need/2022-study-on-womens-period-poverty-diaper-need-and-hygiene-poverty/>.
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 147. *Id.*
 148. See United Way, *supra* note 144, at 68-79.
 149. *Id.*
 150. *Id.* at 14-17.
 151. *Id.* at 22.
 152. *Id.* at 39.
 153. *Id.* at 68.
 154. *Id.* at 72.
 155. *Id.* at 73.
 156. *Id.* at 90.
 157. *Id.* at 68.
 158. See Lane, *supra* note 143, at 11.
 159. Lauren F. Cardoso et al., *Period Poverty and Mental Health Implications Among College Aged Women in the United States*, 21:14 *BMC Women’s Health* (2021), <https://bmcmwomenshealth.biomedcentral.com/articles/10.1186/s12905-020-01149-5>; Ashley Rapp & Sidonie Kilpatrick, *Changing the Cycle: Period Poverty as a Public Health Crisis* (Feb. 4, 2020), <https://sph.umich.edu/pursuit/2020posts/period-poverty.html>; Bethany A. Caruso et al., *The association between women’s sanitation experiences and mental health: A cross-sectional study in Rural, Odisha India*, 5 *SSM Population Health* 257-266 (2018), <https://pmc.ncbi.nlm.nih.gov/articles/PMC6077264/pdf/main.pdf>.
 160. See Justice Necessary, *supra* note 145.
 161. See Justice Necessary, *supra* note 146.
 162. See United Way, *supra* note 144, at 78-79.
 163. *Id.* at 94.
 164. Interview with Eva Carney, Founder and Executive Director, The Kwek Society, and Citizen Potawatomi Nation citizen via Zoom (July 24, 2025) (Not all people living in poverty opt for sustainable and sensible alternatives, even if there is access to clean water, washers, and dryers to clean and sterilize reusable products. In her organization’s experience, new menstruators in particular gravitate to disposable products for their ease of use and because they do not need to be handled when soiled. Menstruators should always have the dignity of choice).
 165. *Drinking Water Advisories in First Nations: Active Long-Term Drinking Water Advisories*, Gov’t of Canada, <https://www.sac-isc.gc.ca/eng/1614387410146/1614387435325> (last modified Aug. 29, 2025).
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 167. *Menstrual Equity in Canada: Evidence of Testimony before the Standing Committee on the Status of Women, House of Commons Canada*, 44th Parliament, 1st Sess. (June 5, 2023) (testimony of Danielle Kaftarian, Operations Manager, The Period Purse), <https://www.ourcommons.ca/documentviewer/en/44-1/FEWO/meeting-71/evidence>; Plan International Canada, *Menstruation in Canada – Views and Realities* (May 2022), https://www.multivu.com/players/English/9052951-menstrual-health-day-2022/docs/ViewsandRealities_1653434611799-556425632.pdf.
 168. See Justice Necessary, *supra* note 146.
 169. Olivia Miller, *How Does Period Poverty Have a Negative Effect on Teenage Girls?*, *Global Development Commons* (2021).
 170. See Rapp & Kilpatrick, *supra* note 159; Julie Hennegan et al., *Measuring the prevalence and impact of poor menstrual hygiene management: a quantitative survey of schoolgirls in rural Uganda*, 6(12) *BMJ Open* 5 (Dec. 2016), <https://bmjopen.bmj.com/content/bmjopen/6/12/e012596.full.pdf>.
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 172. See *infra* Sections IV.A (United States) & IV.B (Canada).
 173. Mission of The Kwek Society: “The Kwek Society works to end period poverty in Indigenous communities in the United States while celebrating individual dignity, agency, and success. We provide Indigenous students and their peers, as well as certain Indigenous communities, period care items, including our moon time bags filled with supplies. We curate and share widely period education materials and traditional, Indigenous teachings about periods that center menstruators. And we work to shine a light on the inequities experienced by those we help.” *Ending Period Poverty*, The Kwek Society, <https://kweksociety.org/about/#mission> (last visited Sept. 19, 2025); *Mission of Running Strong for American Indian Youth: “We Put Youth First: Our focus on youth programs fosters change across age groups and entire communities. American Indian-Led: Our leadership is committed to preserving the traditions, languages and sanctity of American Indian communities. We Help Where Needed Most: Rather than coming into a community and announcing what we will do, we listen to what our partners tell us they need.”* *Running Strong for American Indian Youth*, <https://indianyouth.org/> (last visited Sept. 19, 2025).
 174. *Overview of Urban Indian Organizations*, Nat’l Council of Urban Indian Health, https://mcusercontent.com/97bf83f5514a3035e7978c5b2/files/be3ab7e0-fcd2-f274-57ec-abcbf0470a8c/UJO_Overview_NCUIH_D554_F.pdf (last visited Sept. 2, 2025).
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 185. *Id.*
 186. *Id.*
 187. *Id.* at BIE-OIEP-8.
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 203. See Carney, *supra* note 164.
 204. About, The Kwek Society, <https://kweksociety.org/about/#mission> (last visited Sept. 5, 2025).
 205. See Carney, *supra* note 164 (sharing that The Kwek Society supports BIE, tribally, and locally run K-12 public schools, tribally run community colleges, and a Native Nations university, along with some community run programs serving young people, several food banks, and a handful of organizations serving US Indigenous adults).
 206. *Id.*
 207. *Id.* (sharing that The Kwek Society earlier served menstruators in the United States and Canada but more recently is operating solely in the United States).
 208. The 22 states where The Kwek Society works are: Alaska, Arizona, California, Colorado, Iowa, Kansas, Maine, Michigan, Minnesota, Montana, Nevada, New Mexico, New York, North Carolina, North Dakota, Oklahoma, Oregon, South Dakota, Vermont, Washington, Wisconsin, and Wyoming. See School Partners, The Kwek Society, <https://kweksociety.org/school-partners/> (last visited Sept. 5, 2025).
 209. See Carney, *supra* note 164 (sharing that The Kwek Society is committed to expanding the number of entities supported and menstruators served); *Id.* (sharing that beyond distributing period products, “The Kwek Society shares traditional teachings and intends to continue to seek to collect and disseminate these and the moon time and Auntie bags so that those it supports are uplifted by their message that, through these Indigenous-grounded gifts, we are all related and in community together and that everyone behind The Kwek Society is excited to celebrate each moon time for the natural and exciting development it is.”).
 210. *Id.* (sharing that, in addition to menstrual education, The Kwek Society also shares on its website traditional teachings as well as with those it supports, not for the purpose of the broader culture to appropriate these teachings and traditions, but to learn from them).
 211. *WičhičaǵAstrong – “they all grow, they thrive, they prosper, they are the generation.”* Running Strong for American Indian Youth (Mar. 8, 2023), <https://indianyouth.org/wichicha%7%a7astrong-they-all-grow-they-thrive-they-prosper-they-are-the-generation/>.
 212. *Id.*
 213. *WičhičaǵAstrong – Empowering and Helping Native Young Women*, Running Strong for American Indian Youth (May 1, 2024), <https://indianyouth.org/wichicha%7%a7astrong-empowering-and-helping-native-young-women/>.
 214. The Project, *Project: Distributing Dignity*, <https://www.projectdistributingdignity.org/the-project> (last visited Sept. 5, 2025).
 215. House of Commons Canada, *Let's Talk About It, Period: Achieving Menstrual Equity in Canada*, Report of the Standing Committee on the Status of Women, 44th Parliament, 1st Sess. (Nov. 2023), <https://www.ourcommons.ca/Content/Committee/441/FEWO/Reports/RP12690894/feworp08/feworp08-e.pdf>.
 216. *The Sexual and Reproductive Health Fund*, Gov't of Canada, <https://www.canada.ca/en/health-canada/services/funding/sexual-reproductive-health-fund.html> (last modified Sept. 26, 2024).
 217. *Id.*
 218. The extent to which this program focuses specifically on menstrual health is not clear, nor is it clear which First Nations communities are part of the partnership; Treaty 7 includes Bearsapaw First Nation (Stoney); Chiniki First Nation (Stoney); Blood Tribe (Kainai Nation and Blackfoot); Piikani Nation (Blackfoot); Siksika Nation (Blackfoot); Tsuut'ina Nation (Sarcee); Wesley First Nation (Stoney) Calgary/Southern Alberta.
 219. “Two-spirit” refers to a person who identifies as having both a masculine and a feminine spirit, and is used by some Indigenous people to describe their sexual, gender and/or spiritual identity.” *Two-Spirit Community*, Re: Searching for 2SLGBT+ Health, <https://www.lgbtqhealth.ca/two-spirit-community> (last visited Sept. 5, 2024).
 220. *Reducing Harm, Empowering and Building Relationships Together: Supporting Culturally Safe and Trauma-Informed Sexual and Reproductive Healthcare (SRH) for Indigenous Women, Girls, Two-Spirit, Transgender and Gender-Diverse (IWG2STGD+) People*, Native Women's Association of Canada (Mar. 2024), https://nwac.ca/assets-documents/srh_training_toolkit_for_providers_-_en_-_website.pdf.
 221. *Indigenous Health*, Provincial Health Servs. Auth., <http://www.phsa.ca/our-services/programs-services/indigenous-health> (last visited Sept. 5, 2025).
 222. *Menstrual Equity Fund*, Food Banks Canada, <https://foodbankscanada.ca/menstrual-equity-fund/> (last visited Sept. 5, 2025).
 223. Community partners include: The Period Purse, Moon Time Connections, Free Periods Canada, Help a Girl Out (HAGO), Monthly Dignity, and Project AIM. *Education & Awareness Partners*, Food Banks Canada, <https://foodbankscanada.ca/menstrual-equity-fund/education-awareness-partners/> (last visited Sept. 5, 2025).
 224. *Menstrual Equity Fund*, Gov't of Canada, <https://www.canada.ca/en/women-gender-equality/funding/menstrual-equity-fund.html> (last modified Sept. 22, 2023).
 225. *Elementary and Secondary Education*, Gov't of Canada, <https://www.sac-isc.gc.ca/eng/1100100033676/1531314895090> (last modified Oct. 22, 2024). NOTE: More information is available through ISC regional offices; however, these offices do not have much information readily available online.
 226. *Indigenous Family Health*, Gov't of Canada, <https://www.sac-isc.gc.ca/eng/1571758376158/1571758630526> (last modified Apr. 30, 2024).
 227. Canada Occupational Health and Safety Regulations (SOR/86-304), Canada Labour Code, R.S.C. 1985, c L-2, § 9.17(3).
 228. When the administration of an Indigenous organization, such as a band council, is governed by the Indian Act, the Indigenous organization is considered federally regulated for the purposes of the Canada Labour Code. Federal jurisdiction may also apply to the delivery of municipal-type services on reserve (for example, policing, fire services, and healthcare providers) if the administration of the service is integrated with band council governance powers and administrative duties, or band council involvement is essential to the governance and administration of the service. If the municipal-type service is administered independently from the band council and to comply with provincial/territorial legislation, the service will likely be within provincial or territorial jurisdiction. See *Employment and Social Development Canada's Guide on Jurisdiction of Indigenous Organizations*, Gov't of Canada, <https://www.canada.ca/en/services/jobs/workplace/federally-regulated-industries/indigenous-organizations.html#h2.1> (last modified Oct. 26, 2023).
 229. *Strengthening Our Learning Journey: Third Progress Report on the Implementation of the Ontario First Nation, Métis, and Inuit Education Policy Framework*, Ontario Ministry of Education 19 (2018), <https://files.ontario.ca/edu-ieo-third-progress-report-en-2021-10-28.pdf> (citing preliminary OnSIS enrollment data for October 2015); *Still Waiting for Truth and Reconciliation: A Progress Report on Indigenous Education in Ontario's Publicly Funded Schools*, People for Education (Apr. 2023), <https://peopleforeducation.ca/wp-content/uploads/2023/04/Still-Waiting-for-Truth-and-Reconciliation-Progress-Report-On-Indigenous-Education-May30.pdf>.
 230. *K-12 Fact Sheet*, Assembly of First Nations (Aug. 2023), <https://afn.bynder.com/m/583fa08a55428449/original/K-12-Factsheet.pdf>.
 231. For example, Sakatcheway Anishinabe Elementary School in Grassy Narrows follows the Ontario curriculum.
 232. Memorandum from Ontario Prime Minister, Kate Manson-Smith to Directors of Education, Secretary/Treasurers of School Authorities and Senior Business Officials regarding Menstrual Equity Initiative: Continuing to Enhance Student Access to Free Menstrual Products in Ontario Schools (July 31, 2024), https://efis.fma.csc.gov.on.ca/faab/Memos/B2024/B12_EN.pdf; *Health and Physical Education*, The Ontario Curriculum, Grades 1 to 8 (2019), <https://preview-assets-us-01.kc-usercontent.com/fbd574c4-da36-0066-a0c5-849fb2de96e/db4cea83-51a1-458d-838a-4c31be56bc35/2019-health-physical-education-elem-PUBLIC.pdf>.
 233. *Access to Menstrual Products Initiatives in Manitoba Schools*, Manitoba Ed. & Early Childhood Learning, https://www.edu.gov.mb.ca/k12/cur/physhlth/docs/menstrual_products.pdf (last visited Sept. 5, 2025).

234. *Education, First Nations Education Transformation*, Gov't of Canada, <https://www.sac-isc.gc.ca/eng/1476967841178/1531399315241> (last modified Oct. 29, 2024).
235. See *supra* note 230, at 2.
236. *Support Services for Schools Order*, BC Ministry of Ed. And Child Care (July 3, 2025), https://www2.gov.bc.ca/assets/gov/education/administration/legislation-policy/legislation/schoollaw/e/m149_89.pdf.
237. News Release, Gov't of Nova Scotia, Free Menstrual Products Available in Schools (Sept. 17, 2019), <https://news.novascotia.ca/en/2019/09/17/free-menstrual-products-available-schools> (could not find more up-to-date information).
238. News Release, Gov't of Prince Edward Island, Statement by Minister of Education and Early Years on the Last Days of Classes (June 28, 2023), <https://www.princeedwardisland.ca/en/news/statement-by-minister-of-education-and-early-years-on-the-last-day-of-classes>; Sara Fraser, *P.E.I. Government Promises Free Period Products in Schools*, CBC News (Nov. 26, 2020), <https://www.cbc.ca/news/canada/prince-edward-island/pei-free-period-menstrual-products-1.5818348>.
239. News Release, Gov't of New Brunswick, Menstrual Hygiene Products to be Available in Schools Across the Province (Jan. 10, 2022), https://www2.gnb.ca/content/gnb/en/departments/education/news/news_release.2022.01.0011.html; News Release, Gov't of New Brunswick, Free Period Products Now Available at Public Libraries (July 19, 2023), https://www2.gnb.ca/content/gnb/en/departments/post-secondary_education_training_and_labour/news/news_release.2023.07.0357.html.
240. *Period Promise in Schools*, United Way of the Alberta Capital Region, <https://www.myunitedway.ca/periodpromise/schools/> (last visited Sept. 5, 2025).
241. News Release, Gov't of Saskatchewan, Post Secondary Schools to Receive Menstrual Products for Students in Need (Sept. 25, 2024), <https://www.saskatchewan.ca/government/news-and-media/2024/september/25/students-in-post-secondary-schools-to-receive-free-menstrual-products#:~:text=Since%20the%20initiative%20was%20launched,for%20distribution%20starting%20in%20October>; News Release, Gov't of Saskatchewan, Saskatchewan and the Shoppers Foundation for Women's Health Continue Distribution of Period Products with Third Shipment to Schools and Post Secondary Institutions (Aug. 30, 2024), <https://www.saskatchewan.ca/government/news-and-media/2024/august/30/saskatchewan-and-the-shoppers-foundation-for-womens-health-continue-distribution-of-period-products>.
242. News Release, Gov't of Manitoba, Manitoba Government Announces Free Menstrual Products in Schools (Sept. 15, 2022), <https://news.gov.mb.ca/news/index.html?item=56301>; *Women and Gender Equity Manitoba: Access For All, Period*, Gov't of Manitoba, <https://www.gov.mb.ca/wage/access-for-all.html> (last visited Sept. 5, 2025).
243. News Release, Gov't of Ontario, Ontario Increasing Access to Free Menstrual Products in Schools (July 29, 2024), <https://news.ontario.ca/en/release/1004870/ontario-increasing-access-to-free-menstrual-products-in-schools>; see Memorandum from Manson-Smith, *supra* note 232, https://efis.fma.csc.gov.on.ca/faab/Memos/B2024/B12_EN.pdf.
244. Malone Mullin, *N.L. Handing Out Free Pads, Tampons En Masse – and For This Student, It's a Direct Response to U.S. Policies*, CBC News (Jan. 27, 2025), <https://www.cbc.ca/news/canada/newfoundland-labrador/nl-menstrual-products-1.7442472#:~:text=Newfoundland%20and%20Labrador%20is%20becoming,rhetoric%20in%20the%20United%20States>; News Release, Gov't of Newfoundland and Labrador, Ensuring All Students Have Access to Period Products in Schools (Oct. 25, 2021), <https://www.gov.nl.ca/releases/2021/exec/1025n03/>.
245. News Release, Gov't of Yukon, Council of Yukon First Nations, Indigenous Services Canada and Government of Yukon Working Together to Address Menstrual Equity in Yukon (July 27, 2022), <https://yukon.ca/en/news/council-yukon-first-nations-indigenous-services-canada-and-government-yukon-working-together>.
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247. Jane George, *More Free Menstrual Products to be Distributed Throughout Nunavut*, CBC News (Sept. 1, 2022), <https://www.cbc.ca/news/canada/north/free-menstrual-products-nunavut-1.6570028#:~:text=%22Period%20poverty%22%20is%20slated%20for,%24821%2C489%20to%20Nunavut%20Tunngavik%20Inc>; *supra* note 230.
248. Moon Time Connections, True North Aid, <https://truenorthaid.ca/project/moon-time-connections/#:~:text=Moon%20Time%20Connections%20is%20a,by%20providing%20vital%20menstrual%20education> (last visited Sept. 8, 2025).
249. *Id.*
250. *Id.*
251. *About Us*, Native Women's Ass'n of Canada, <https://nwc.ca/about-us> (last visited Sept. 8, 2025).
252. *Improving Access to Menstrual Hygiene in Indigenous Communities*, Cision (Aug. 14, 2023), <https://www.newswire.ca/news-releases/improving-access-to-menstrual-hygiene-in-indigenous-communities-829012090.html>. Note that this Article was written August 14, 2023, and while the program was to run with donations "with more to come in the future," no additional information was ascertained regarding whether NWAC is actively receiving donations or whether it is consistent.
253. See Carney, *supra* note 164 (sharing that there needs to be more than consultation with Indigenous communities; the solutions need to be driven by Indigenous people).
254. Interview with Andrea Groen, USA Country Coordinator, Days for Girls via Zoom (July 21, 2025) (sharing that while both government and nonprofit support could be effective, there exists the community's distrust of inconsistent or short-term interventions).
255. *Id.*
256. See Carney, *supra* note 164.
257. *Id.* (sharing that interventions must respect the dignity and preferences of individuals, offering quality, name-brand products that recipients recognize and therefore trust, where possible); see Pember, *supra* note 6.
258. See Groen, *supra* note 254.
259. *Id.* (sharing that most homes in the populations she engages with lack running water and, instead, residents must travel to central stations or community centers to fill water jugs).
260. *Id.*
261. *Id.*
262. See Risling Baldy, *supra* note 7 (Dr. Baldy stated that if you are looking for stores, outside of small convenience stores, this requires you to leave the reservation and go "out town," which usually means driving at least one hour away).
263. See Groen, *supra* note 254.
264. See Pember, *supra* note 6.
265. *Id.* (It is costly to host a traditional ceremony. Bowie herself received a grant from the California Alliance for Traditional Arts for one of her daughters' ceremonies).
266. See, for example, the First Peoples' Cultural Council in British Columbia, Canada, which receives funding from the provincial and federal governments, as well as the First Peoples' Cultural Foundation.

