Menstrual Health (MH) involves a range of factors, and is supported when people who menstruate have the ability to:

- Access accurate, timely information about the menstrual cycle, self-care, and hygiene practices.
- Care for their bodies so that their preferences, hygiene, comfort, privacy, and safety are supported. This includes access to a choice of effective, affordable menstrual materials, access to WASH infrastructure, and safe ways to clean or dispose of used materials.
- Access care for menstrual-related discomforts and disorders, including pain relief, self-care strategies, and access to health services.
- Experience a positive and respectful environment regarding the menstrual cycle, free from stigma or psychological distress.
- Decide if and how to participate in all spheres of life, free from menstrual-related barriers.¹

Because of these multiple and complex factors, our MH evidence base is ever-evolving. Here are some recent findings from surveys and studies around the globe:

- 1 in 10 menstruators surveyed in the UK aged 14-21 are unable to afford menstrual products according to a 2017 study by PLAN International.⁴
- 31% of study participants in Brazil shared that they had missed school or regular daily activities due to MHM issues including dysmenorrhea (menstrual pain).¹⁴
- 29% of menstruators surveyed in New Zealand stated that they missed school or work due to lack of access to period products according to a 2019 study by KidsCan.⁵
- 90.5% of students surveyed in rural Uganda failed to meet the stated criteria for adequate MHH according to a 2016 study by Hennegan et al.⁶
- 1 in 5 teenagers surveyed in the United States have struggled to afford period products according to a 2019 white paper supported by Thinx and PERIOD.⁷
- Only 6% of schools in Bangladesh provide MH education according to a 2018 World Bank Study.⁸
- 25% of menstruators in Nigeria lack adequate privacy for managing their menstruation according to a 2017 study by the World Bank.⁹
Menstrual Health Quick Facts

IMPACT ON STUDENTS

We know that inadequate MH can contribute to serious negative education and livelihood outcomes for menstruators.

Inadequate MH for students can impact school attendance, test scores, and completion of secondary education. This in turn influences livelihood options and economic mobility.

- 84% of teenage menstruators in one US survey have either missed class time or know someone who missed class time because they didn’t have access to period products.⁷
- In many East and South African countries, students who cannot afford period products are forced to engage in transactional sex in order to obtain products. In one study, 2 out of 3 pad users in rural Kenya received them from sexual partners.¹⁰
- In one cross-sectional study of adolescents in Uganda, over 25% of survey participants reported engaging in transactional sex in exchange for period products.²
- In Nepal, the practice of Chhaupadi isolates menstruators in remote and unserviced huts for the duration of their period. Aside from causing absenteeism, fear, and stigma, the practice places menstruators in real physical danger — from January to March of 2019, Chhaupadi was directly responsible for 4 deaths.¹²
- In Kenya, menstrual shaming by a school teacher in front of peers resulted in the suicide of a student in Bomet County in September 2019.¹³

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IMPACT ON WORKERS

Women represent nearly half of the global labor market, but the impacts of MH in the workplace are under-studied.

One report by the World Bank found that female employees in the Philippines were absent for one day per month due to lack of sanitation facilities for managing menstruation, resulting in an economic loss of USD $13 million per year.¹¹

A review of existing research shows that inadequate MH conditions in the workplace have serious implications for menstruators including:

- Wage loss
- Supervisor disapproval
- Absenteeism
- Presenteeism (difficulty focusing or performing as usual)
- Decreased dignity and confidence
- Limited physical mobility³

Globally there are more than 500 million people experiencing poverty.
Menstrual Health Quick Facts

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² Uganda Ministry of Health (2016)


⁵ Dignity NZ (2019). Period Poverty in New Zealand. Available at: https://static1.squarespace.com/static/5d019cc62a8b20001def43/t/5d0f5983321ce60001ebdf94/156128704505/Period+Poverty+in+New+Zealand++Discussion+Paper+%287%29.pdf


Menstrual Health Quick Facts

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