



NASPAG Position Statement: Eliminating Period Poverty in Adolescents and Young Adults Living in North America



This NASPAG Position Statement was created by Megan E Harrison MD FRCPC, Shelby Davies MD, Nichole Tyson MD, Andrea Swartzen-druber PhD MPH, Laura K Grubb MD MPH, and Elizabeth M Alderman MD, in collaboration with the NASPAG Advocacy Committee members: Rachel Casey MD, Martin Fisher MD, Shaketha Gray MD, Kim Hoover MD, Andrea Huneeus MD, Susan Kaufman DO, Andrew Lupo MD, Kate McCracken MD, Seema Menon MD, Diana Robillard MD, Mary Romano MD, Julie Strickland MD, Whitney Wellenstein MD, Noor Zwayne MD. It was approved by the NASPAG Board of Directors in December 2021.

Despite menstruation being a normal, healthy bodily function for billions of individuals around the globe, menstruation is still a source of deep gender and health inequities.¹ Every month, millions of adolescents and young adults (AYAs) globally experience pain, discomfort, shame, anxiety, and isolation regarding their menstrual periods.¹ On average, a youth's first menstrual period occurs between ages 11 and 14 and continues monthly until their 50s. This means that the average menstruator experiences approximately 40 years of this cycle. New investigations and website calculators estimate that during this time, a menstruator will use greater than 8000 disposable products, including pads or tampons, and spend on average \$9 USD or \$12 CAD per month;²⁻⁴ however, the true cost of menstruation is even higher when we consider the costs of pain control, laundry services, and lower workforce and academic productivity.^{2,5} This toll also varies based on individuals' menstrual experiences, including age of menarche, frequency of menses, length of menstrual period, quantity of menstrual bleeding, and other symptoms. AYAs often experience heavy, prolonged, and unpredictable menstrual bleeding due to their proximity to menarche and the immaturity of their reproductive hormonal axis, which can lead to a higher demand for menstrual products.

Access to menstrual products and proper menstrual hygiene is a basic need globally, yet little attention is given to this issue¹; moreover, studies have generally focused on lower-income countries. "Period poverty" occurs when financial circumstances or inadequate access to menstrual hygiene education make it difficult or impossible for individuals to access menstrual hygiene products and necessities.⁶ Worldwide, it is estimated that nearly 25% of all menstruators, over 500 million people, experience period poverty, although prevalence estimates in peer-reviewed studies in North America are lacking.⁷ AYAs might experience difficulty accessing menstrual hygiene products due to their high cost and/or lack of availability in some circumstances. Anecdotally, young menstruators might often resort to proxy materials or measures to absorb their menstrual flow, including prolonged use or unsafe use of pads or tampons. Unsanitary practices could have serious health consequences, such as toxic shock syndrome, lower reproductive tract infections, and outer skin infections.^{8,9} Lack of

access to proper menstrual products can also affect AYAs' social and academic life, as well as mental health and self-esteem¹⁰. Anecdotal evidence suggests that menstruators might take measures that interfere with daily activities, such as missing school or withdrawal from extracurricular activities, when faced with limited access to hygiene products.^{11,12}

Period poverty is not limited to lower-income countries.¹³⁻¹⁷ Although there is ample evidence to date on the impact of period poverty in developing nations, North American peer-reviewed data are scarce but growing. Period poverty affects menstruating individuals of all ages throughout the United States, with lower-income and racialized communities particularly affected.¹³⁻¹⁷ Prior to the COVID-19 pandemic, 1 in 5 students in the United States struggled to afford menstrual products,¹⁴ and this number rose to nearly 1 in 4 by 2021,¹³ resulting in menstrual-related school absences or the need to use makeshift menstrual products such as paper or socks. Recent industry reports show that 20% of girls in the United States have left school early or missed school entirely because of lack of access to menstrual products.¹¹ In most states, U.S. government benefits, such as the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), do not cover the cost of these necessary supplies.^{16,18} In Canada, at least one-third of women under the age of 25 say they have struggled to afford menstrual products, and more than half have had to miss out on an activity because of their period and concerns about inadequate access to menstrual hygiene products or proper facilities.^{12,19} These problems existed prior to the COVID-19 pandemic, but increased unemployment, poverty, and remote learning have only amplified the impact and scope of period poverty,¹⁵ highlighting the financial burden on those who need to purchase menstrual products for either themselves or others.

There is increasing momentum around the world to improve access to menstrual products, with particular emphasis on sales tax. The American Medical Association (AMA) considers menstrual hygiene products as "essential for women's health" and has called for the elimination of the sales tax.²⁰ Many countries, including Canada, Australia,

Kenya, Nicaragua, Jamaica, Nigeria, Uganda, Lebanon, India, South Africa, Colombia, Malaysia, and the United Kingdom, have eliminated the tax on menstrual products, although the cost remains relatively high, especially for low-income, unhoused, and marginalized youth.^{21,22} Although some U.S. states have abolished menstrual product taxes, most continue to tax menstrual products as a luxury or nonessential item.^{3,21} Sales tax on menstrual products affects only those who menstruate and is a regressive tax as economically disadvantaged individuals pay a higher proportion of their income than more economically secure and advantaged peers. Furthermore, products marketed toward women already tend to be more expensive than those for men; thus, such sales taxes are a form of sex-based discrimination.²

Many higher-income countries are striving to make menstrual products free or subsidized. In November 2020, Scotland became the first country to make period products freely available to all who need them.²³ Most North American efforts have identified schools as logical places for advocacy. As of this publication, many local and municipal governments have passed bills requiring the provision of free menstrual products in on-site school washrooms (i.e., New York State, Delaware, and California, United States; British Columbia and Nova Scotia, Canada; and Mexico).^{24–32} Members of the medical community may advocate for more equitable access to menstrual hygiene products in all schools, as well as other adolescent-centered services, such as youth shelters, pediatric health care facilities, and juvenile detention centers, but efforts to date have been limited. Additionally, some hospitals in Canada and the United Kingdom provide free menstrual products at no cost.^{33–35}

Financial barriers are not the single cause of period poverty. Worldwide, there is deep stigma around menstruation, and many consider the act of menstruation as dirty, shameful, and indicative of female weakness. Health-care providers (HCPs) can help shift away from this stigma by discussing menstruation as a natural, normal, and biological event that represents health and fitness. To dismantle systemic stigmatization and discrimination of menstruators, we must provide education for menstruators and non-menstruators. HCPs and educators play an important role by teaching menstruation as a healthy bodily function and not a source of gender shame and burden. The creation of evidence-based menstrual health curricula for youth is important to normalize and destigmatize menstruation.

NASPAG supports local, national, and international efforts aimed at reducing barriers to menstrual hygiene education and product access, with greater attention to eliminating period poverty in both low- and middle-income countries. NASPAG outlines the following positions as initial steps in this ongoing process.

1. UNDERSTAND. Menses is a vital sign, and therefore, anything that impacts menstrual health should be of utmost importance to medical providers.
2. ASK. Medical providers should have open conversations with their patients about menstrual products and any barriers they experience in accessing them.
3. EDUCATE. To establish sustainable social change, HCPs must focus on education of both menstruators and

non-menstruators. Collaborating with youth and their families, community leaders, school administrators, and teachers, as well as community-based, hospital-based, and school-based HCPs, is an important step in increasing the reach of education aimed at negating menstrual stigma.

4. LEGISLATE. Menstrual health advocates must work with local, national, and international governments or other entities to end discriminatory taxes on menstrual products and to make a choice of menstrual products available in schools and public washrooms.
5. STUDY. We need more comprehensive, peer-reviewed studies addressing period poverty in young people around the world to elevate diverse youth voices and shed light on their lived experiences.

References

1. Sommer M, Hirsch JS, Nathanson C, et al: Comfortably, safely, and without shame: defining menstrual hygiene management as a public health issue. *Am J Public Health* 2015; 105:1302–11.
2. Miszewska D, Żuławińska J: Period products cost calculator. Available: <https://www.omnicalculator.com/everyday-life/period-products-cost>. Accessed September 30, 2021
3. Goldberg E: Many lack access to pads and tampons. What are lawmakers doing about it? Available: <https://www.nytimes.com/2021/01/13/us/tampons-pads-period.html>. Accessed October 4, 2021
4. Hilash S: Federal government should make menstrual products free for Canadians for this reason. Available: <https://www.narcity.com/federal-government-should-make-menstrual-products-free-for-canadians-for-this-reason>. Accessed October 4, 2021
5. D'Sa V: Period poverty in Canada and around the globe. Available: <https://www.cpha.ca/period-poverty-canada-and-around-globe>. Accessed October 4, 2021
6. Alvarez A: Period poverty and what we can do about it. Available: <https://www.amwa-doc.org/period-poverty/>. Accessed August 18, 2020
7. Days for Girls: Menstrual health quick facts. 2019. Available: <https://www.daysforgirls.org/wp-content/uploads/2021/01/Menstrual-Health-Quick-Facts-1.pdf>. Accessed June 24, 2022
8. Das P, Baker KK, Dutta A, et al: Menstrual hygiene practices, WASH access and the risk of urogenital infection in women from Odisha, India. *PLoS ONE* 2015; 10:0130777 e.
9. Hennegan J, Dolan C, Wu M, et al: Measuring the prevalence and impact of poor menstrual hygiene management: a quantitative survey of schoolgirls in rural Uganda. *BMJ Open* 2016; 6:e012596.
10. Cardoso LF, Scolese AM, Hamidaddin A, et al: Period poverty and mental health implications among college-aged women in the United States. *BMC Womens Health* 2021; 21:1–7.
11. Rifenburg L: Nearly 1 in 5 American girls have missed school due to lack of period protection1: Always® joins forces with Gina Rodriguez & Feeding America® to help #EndPeriodPoverty and keep girls in school. Available: <https://www.businesswire.com/news/home/20180807005135/en/Nearly-1-in-5-American-Girls-Have-Missed-School-Due-to-Lack-of-Period-Protection1-Always%C2%AE-Joins-Forces-with-Gina-Rodriguez-Feeding-America%C2%AE-to-Help-EndPeriodPoverty-and-Keep-Girls-in-School>. Accessed December 16, 2019.
12. Dube D-E: One-third of young Canadian women can't afford menstrual products, report finds. *Glob News*, 2018.
13. Thinx, PERIOD: State of the period: the widespread impact of period poverty on US students. 2021
14. Thinx, PERIOD: State of the period: the widespread impact of period poverty on US students. 2019
15. Davies S: A call to action: adolescent health experts must join the fight to end period poverty. Available: <https://www.adolescenthealth.org/Membership/Newsletter/May-2021/Advocacy-Update.aspx>. Accessed September 30, 2021
16. Sebert Kuhlmann A, Peters Bergquist E, Danjont D, et al: Unmet menstrual hygiene needs among low-income women. *Obstet Gynecol* 2019; 133:238–44.
17. Wall LL: Period poverty in public schools: a neglected issue in adolescent health. *J Adolesc Health* 2020; 67:315–16.
18. Winkler IT: Human rights shine a light on unmet menstrual health needs and menstruation at the margins. *Obstet Gynecol* 2019; 133:235–7.
19. Nanos for Plan International Canada: Female and male views on menstruation in Canada. Available: <https://nanos.co/wp-content/uploads/2019/05/2019-1432-Plan-Female-and-Male-Compiled-with-Tabs.pdf>. Accessed February 3, 2022
20. AMA Media & Editorial: Eliminating sales tax on feminine hygiene products. Available: <https://www.ama-assn.org/press-center/press-releases/ama-adopts-new-policies-final-day-annual-meeting>. Accessed January 11, 2022

21. Period Equity x LOLA: The history of the tampon tax. Available: <https://www.taxfreeperiod.com/home>. Accessed September 30, 2021
22. Watters H: "Tampon tax" will end July 1. Available: <https://www.cbc.ca/news/politics/tampon-tax-will-end-july-1-1.3091533>. Accessed October 4, 2021
23. Diamond C: Period poverty: Scotland first in world to make period products free. Available: <https://www.bbc.com/news/uk-scotland-scotland-politics-51629880>. Accessed September 30, 2021
24. Campbell C, Naylor C, Dobie C: All B.C. schools will have free menstrual products by end of 2019. Available: <https://www.castanetkamloops.net/news/Kamloops/283158/All-BC-schools-will-have-free-menstrual-products-by-end-of-2019-minister>. Accessed October 4, 2021
25. Cooke A: N.S. now providing free menstrual products in public schools. Available: <https://www.cbc.ca/news/canada/nova-scotia/nova-scotia-schools-menstrual-products-1.5286885>. Accessed October 4, 2021
26. Brand D: Tampons and pads will soon be free for all New York school girls. Available: <https://www.globalcitizen.org/en/content/tampons-pads-girls-free-new-york-schools/>. Accessed September 30, 2021
27. Craggs S: Hamilton looks at buying menstrual products for low-income women and girls. Available: <https://www.cbc.ca/news/canada/hamilton/femcare-hamilton-1.4939718>. Accessed October 4, 2021
28. The Associated Press: California schools must stock bathrooms with free menstrual products under law. Available: <https://www.nbcnews.com/news/us-news/california-schools-must-stock-bathrooms-free-menstrual-products-under-law-n1281291>. Accessed October 12, 2021
29. Mendoza J: Free period products will soon be provided in California schools. Available: <https://www.usatoday.com/story/news/nation/2021/10/10/free-period-products-soon-provided-california-schools/6081348001/>. Accessed October 14, 2021
30. McConnell J: Updates on menstrual equity policies. Available: <https://www.womensvoices.org/2021/01/11/period-health-policies-is-your-state-working-to-make-menstrual-equity-a-priority/>. Accessed October 14, 2021
31. Queram KE: Delaware bill would require menstruation products in public school bathrooms - Route Fifty. Available: <https://www.route-fifty.com/health-human-services/2021/03/delaware-bill-menstruation-products/172963/>. Accessed October 14, 2021
32. Mackay S: Period poverty in Mexico. Available: <https://borgenproject.org/period-poverty-in-mexico/>. Accessed June 24, 2022
33. Iqbal N: Campaigners welcome free tampons for hospital patients. Available: <https://www.theguardian.com/society/2019/mar/03/period-poverty-free-tampons-hospitals>. Accessed October 4, 2021
34. Joseph Y: England to offer hospital patients free sanitary products. Available: <https://www.nytimes.com/2019/03/03/world/europe/england-free-sanitary-products.html>. Accessed October 4, 2021
35. Raymond T: Teens at CHEO can now get menstrual products for free. Available: <https://ottawa.ctvnews.ca/teens-at-cheo-can-now-get-menstrual-products-for-free-1.4906996>. Accessed October 4, 2021

Update

Journal of Pediatric and Adolescent Gynecology

Volume 36, Issue 2, April 2023, Page 260

DOI: <https://doi.org/10.1016/j.jpag.2023.02.003>

Corrigendum

Corrigendum to “NASPAG Position Statement: Eliminating Period Poverty in Adolescents and Young Adults Living in North America” [Journal of Pediatric and Adolescent Gynecology; Vol 35 (6): pp 609-611]



Megan E. Harrison^{*,*}, Shelby Davies[#], Nichole Tyson[#], Andrea Swartzendruber[#], Laura K. Grubb[#], Elizabeth M. Alderman[#]

Children's Hospital of Eastern Ontario, 401 Smyth Rd, Ottawa, Ontario, Canada K1H8L1

The authors regret a key reference was omitted from the published article. Reference 12 has been added and all subsequent references have been renumbered. The full citation for reference 12 appears below:

12. "The Always Confidence and Puberty Wave VI Study", Nov. 2017

Current document:

“Anecdotal evidence suggests that menstruators might take measures that interfere with daily activities, such as missing school or withdrawal from extracurricular activities, when faced with limited access to hygiene products.(11, 12)” – to be updated to include new reference (therefore should have 11, new 12, updated/renumbered 13)

“Recent industry reports show that 20% of girls in the United States have left school early or missed school entirely because of lack of access to menstrual products.(11)” – to be updated to include new reference (therefore should be 11, new 12)

DOI of original article: [10.1016/j.jpap.2022.07.011](https://doi.org/10.1016/j.jpap.2022.07.011)

* Address correspondence to: Dr. Megan E. Harrison, Pediatrics, Children's Hospital of Eastern Ontario, 401 Smyth Rd, Ottawa, ON, Canada K1H8L1.

E-mail address: mharrison@cheo.on.ca (Megan E. Harrison).

In collaboration with NASPAG Advocacy Committee members Rachel Casey, Martin Fisher, Shaketha Gray, Kim Hoover, Andrea Huneeus, Susan Kaufman, Andrew Lupo, Kate McCracken, Seema Menon, Diana Robillard, Mary Romano, Julie Strickland, Whitney Wellenstein, and Noor Zwayne