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Teaching the Taboo:

Menstruation Education in England and Wales



OxPolicy is a student run think tank that seeks to investigate and subsequently improve the quality of debate about important issues in our society.

#periodpositive is a hashtag and logo developed by Chella Quint to serve as a benchmark for open and informed provision and information about menstruation and reproductive health. Quint and #periodpositive worked on this report in association with DECSY's Gender Respect Project.

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Executive Summary

This report firstly examines past research alongside a small sample of current practice and attitudes that indicate how menstrual taboos can manifest in menstrual education. It then proposes ways in which educators can approach menstruation education to interrupt the transmission of taboo.

Menstrual taboo frames menstruation as dirty and secretive, and this view is exacerbated by media, education, society and advertising. Teacher attitudes, subject coverage and classroom resources reported in this and other recent studies leads us to believe that the current provision of menstrual education in schools perpetuates negative stereotypes of menstruators and menstruation. A number of past studies have indicated that these stereotypes can negatively impact menstruators, who may feel ashamed or stigmatized by their experiences.

Based on our analysis of our questionnaire results and on the growing body of work by education practitioners and action researchers in the UK and abroad, we recommend measures that can be taken to ensure a positive menstrual education. Educators need to be adequately trained and confident in the topic of menstruation; there needs to be a standardized curriculum to ensure consistent and positive education for all learners; menstrual education needs to be inclusive of all genders to lessen the secrecy around menstruation; a wider variety of menstrual products need to be made explicit; and menstrual education needs to be provided without influence from third parties with a pecuniary interest in selling menstrual products. These measures can help to counter the negative experiences faced by menstruators, better prepare them for menarche, and lessen the stigma around menstruation.

Introduction

Taboos surrounding menstruation exist in some form across many cultures. While in some cultures these taboos manifest obviously, taboos also exist in more subtle ways that are strengthened through the media, education, society and advertising. Such taboos ensure that menstruation is continually framed as dirty and secretive and that, by extension, menstruators are also framed as dirty and secretive. The attitudes surrounding menstruation thus further contribute to the “tradition that pathologizes women’s bodies and regards *all* bodies as objects in constant need of (commodified) improvement.”¹

This report and its research analysis were undertaken jointly by OxPolicy and Chella Quint of #periodpositive in association with DECSY’s Gender Respect Project. It explores how menstrual taboos have manifested in menstruation education and looks at a sampling of current practices around menstruation education provision. This study, when partnered with similar studies recently conducted across the UK, indicates that menstrual education in the UK could be improved across a number of dimensions. Our findings are supported by a varied literature on menstrual taboos and education, as well as the qualitative evidence from a questionnaire we released.

We surveyed state secondary schools across England and Wales (for the full results of the questionnaire, see Appendix 1). The questionnaire, although small and largely qualitative, brought forth several interesting findings. We found that participants who felt more knowledgeable about menstruation also were more comfortable teaching the subject, and in-depth training could increase both the knowledge and confidence of educators. A significant number of schools still separate genders when teaching menstruation, which further perpetuates the idea that menstruation is something shameful and negatively impacts provision for those who are intersex, transgender or non-binary. There is no standardized curriculum for menstrual education, with the majority of participants in our questionnaire commenting that they create their own lesson plans using wide-ranging resources. The menstrual education that pupils are receiving across England and Wales thus varies considerably. Students are not often taught about reusable menstrual products, and educators are often less knowledgeable and comfortable teaching about these than other aspects of menstruation. There is also a lack of awareness and lesson content around media messages and myths.

Based upon our research results and our analysis of previous literature on menstruation education and taboos, we have proposed numerous changes to the way that menstruation is currently taught in state schools and academies. Private education would do well to follow suit. Menstruation should be taught by trained, confident and positive professionals who have access to a clear syllabus for the topic to ensure that students are consistently taught about menstruation in a positive and accurate way. This syllabus should not be influenced by parties with a pecuniary interest, such as corporations selling menstrual products. Menstrual products used in lessons should be varied, unbranded, and inclusive of reusables. Educators should not only focus on the biological aspects of menstruation, but should also talk about practical aspects of menstrual management so that menstruators feel comfortable and prepared for menarche. All genders should be taught together to help dissolve menstrual stigma.

¹ Chris Bobel, *New Blood: Third Wave Feminism and the Politics of Menstruation* (New Brunswick:

Menstrual Taboos and Education: Why Our Research Matters

The majority of literature that explores menstrual taboos and education has been conducted in the United States. There have been some studies conducted in areas of East Africa, India, and Nepal, but the literature stemming from these areas most often focuses on issues surrounding health and hygiene. In the West, many of the taboos surrounding menstruation are reinforced by advertisements run by multinational menstrual product corporations. This means that much of the stigma developed by advertisements and the commercialization of menstrual products in the UK is similar to that of the US. The literature thus often relates to both countries. The broad consensus across the literature is that social stigma, often as a result of education or advertisements, portrays menstruation as shameful and dirty² and, combined with a lack of adequate information,³ presents an unnerving impression of menarche for young people. This contributes to a persisting negative attitude towards menstruation and menstruating bodies.

Menstrual Taboos

Taboos surrounding menstruation, while ranging between cultures and countries, tend to exist in some form almost universally. As McPherson and Korfine have stated, “girls are directly and indirectly instructed about (largely negative) cultural beliefs concerning menstruation and the ways in which they will be expected to behave in order to uphold these beliefs.”⁴ While it is easy to identify taboos and stigma in extreme cases, taboos also exist in subtle and insidious ways which are strengthened through the media, education, society and advertising.

Joan Chrisler and Ingrid Johnston-Robeldo have written extensively about what creates and constitutes stigma. They reference Goffman’s categorization of stigma as either “abominations of the body,” “blemishes of individual character” or “tribal identities or social markers,” and claim that menstrual blood fits all three of Goffman’s categories.⁵ Furthermore, Johnston-Robeldo and Chrisler highlight that while most people who react to menstruation negatively will never have been formally told that it is stigmatized, they inherently “know” it. Hence, they react appropriately and “this stigma is transmitted through powerful socialization agents in popular culture such as advertisements and educational materials.”⁶

These taboos ensure that menstruation is continually framed as dirty and secretive. Even the use of the word “sanitary” to describe menstrual products signifies that menstruators are framed as inherently unsanitary. Beyond this, the endless euphemisms used to describe menstruation strengthen the view that it is something to be avoided and that even communicating about periods must be done in code. Chris Bobel

² Karen Houppert, *The Curse: Confronting the Last Unmentionable Taboo: Menstruation* (New York: Farrar, Straus and Giroux, 1999), 3-11.

³ Dianne K. Kieren, “Redesigning menstrual education programs using attitudes towards menstruation,” *Canadian Home Economics Journal* vol. 48, no. 2 (1992): 57-63.

⁴ Marianne McPherson and Lauren Korfine, “Menstruation Across Time: Menarche, Menstrual Attitudes, Experiences and Behaviours,” *Women's Health Issues* vol. 14, no. 6 (2004): 194.

⁵ Ingrid Johnston-Robeldo and Joan C. Chrisler, “The Menstrual Mark: Menstruation as Social Stigma,” *Sex Roles* vol. 68, no. 1 (2013): 10.

⁶ *Ibid.*, 9.

has written that “the biggest problem is not menstruation, per se... but an enduring tradition that pathologises women’s bodies and regards *all* bodies as objects in constant need of (commodified) improvement.”⁷ This need to control and manage our bodies is so deeply ingrained that it has been institutionalized in various forms.

Finally, one of the most powerful ways in which menstrual stigma is perpetrated is through silence. In schools, genders are often separated when menstruation is taught, in order to supposedly “protect” menstruators from the shame and embarrassment that they will inevitably feel. Elizabeth Kissling points out that parents in the United States have often done the same when having “private chats” with their daughters.⁸ This silence spreads further to take in groups already excluded through omission in other areas of public life. “There are some people who don’t identify as women who *do* menstruate. Some of them are transmen. Some of them are intersex. Some may have fully functioning uteruses, ovaries and vaginas but may identify as genderqueer, transgender, third gender or something else entirely.”⁹

Within the workplace menstruators are placed in a paradigm within which they must hide both their menstrual products and menstrual symptoms, which have become synonymous with weakness, fragility and a negative femininity. These situations illustrate the ways menstruation is reinforced as something shameful and to be hidden continually. This manifestation of menstrual stigma is not only negative for those who are a victim of it, but should also be tackled as an ongoing example of gender inequality and persecution for something biological and healthy. As Johnston-Robeldo and Chrisler have written: “[w]e believe that the stigma and taboo of menstruation both reflects and contributes to women’s lower social status.”¹⁰

Menstrual Education

UNESCO has written a lengthy document about the ways puberty should be taught. The crucial element, which can be clearly adapted to our own research, is that “puberty is not a problem to be solved; it is simply a time of accelerated physical growth and sexual development experienced by every human. But by facing this pivotal phase of life unprepared, learners are left confused and unsupported, which in turn affects the quality of their education.”¹¹ These words can clearly be used to describe menstruation and the need for suitable preparation and education so as to avoid turning a completely natural part of development into something negative. They prescribe certain factors to ensure successful menstrual hygiene management: accurate and timely knowledge; informed and comfortable professionals; sanitation and washing facilities; safe and hygienic disposal; available, safe and affordable materials; referral and access to health services; positive social norms; advocacy and policy.¹²

⁷ Op. cit. Bobel, *New Blood*, 178.

⁸ Elizabeth Kissling, “Bleeding Out Loud: Communication about Menstruation,” *Feminism & Psychology* 6, no. 4 (1996): 495.

⁹ Elizabeth Kissling, “Of Menstruators and Manhole Covers,” *Ms. Magazine*, February 13, 2013, msmagazine.com/blog/2013/02/11/of-menstruators-and-manhole-covers.

¹⁰ Op. cit. Johnston-Robeldo and Chrisler, “The Menstrual Mark,” 13.

¹¹ UNESCO, *Puberty Education and Menstrual Hygiene Management*, Good Policy and Practice in Health Education (Paris: UNESCO, 2014): 10-53.

¹² *Ibid.*

Menstruators receive information about the menstrual cycle from a nebulous collection of educators, which includes parents, peers, schoolteachers and the media. Primarily the responsibility of educating menstruators falls to mothers and other female relatives, and menstruators consistently cite their mothers as their most important source of information.¹³ Despite this, 35% of girls in the US claimed not to learn about menstruation from their parents, but from friends, school and magazines.¹⁴ Often, the education that girls receive on menstruation is inadequate: more than 12% of girls know nothing about menstruation before menarche,¹⁵ and girls are often not taught how to cope with menstruating in practical terms (like knowing, for example, what menstruating may feel or look like).¹⁶ Statistics concerning how prepared and knowledgeable menstruators are before menarche vary among countries as well as ethnic and socio-economic backgrounds, but there seems to be a significant number of menstruators who have no preparation before menarche at all. Research has shown those who reported an inadequate education on menarche were the most likely to have a negative attitude about their experience, leading to the conclusion that “much of the uncertainty, fear, and even trauma associated with menarche can be traced to the lack of adequate informational preparation.”¹⁷ Additionally, such negative attitudes and experiences about menstruation are likely to reflect menstruators’ future perspectives on health and their bodies generally.¹⁸

Shirley Prendergast conducted a study on 470 girls in 10 schools around the UK and found that the education girls received both at school and at home often fell short of what was necessary.¹⁹ 80% of girls felt that they did not receive enough information on menstruation from their primary schools, when 1 in 10 girls began menstruating in primary school and 1 in 4 girls began menstruating in their first year of secondary school.²⁰ Earlier education on menstruation for all genders in school would help to solve this problem. The Sex Education Forum found that many parents are supportive of schools introducing the subject of menstruation from an earlier age, as well as of educators using unambiguous language when teaching the reproductive system in biology.²¹ While extensive detailing is unnecessary for very young children, an outline of the subject matter would be beneficial to counteracting the negative effects that a lack of information can create.

¹³ Mindy Erchull et al., “Education and Advertising: A Content Analysis of Commercially Produced Booklets About Menstruation,” *Journal of Early Adolescence* 22, no. 4 (2002): 456.

¹⁴ Corinne Julius, “Education: A subject that isn't only for the girls: Menstruation affects half of all pupils, but most schools ignore it. It is time to tackle widespread ignorance, says Corinne Julius,” *The Independent*, October 14, 1992, <http://www.independent.co.uk/news/education/education-news/education-a-subject-that-isnt-only-for-the-girls-menstruation-affects-half-of-all-pupils-but-most-1557423.html>.

¹⁵ Ibid.

¹⁶ Sharon Kingman, “Periods of Anxiety,” *Health Education* 92, no. 1 (1992): 9-12.

¹⁷ Op. cit. Erchull et al., “Education and Advertising,” 456.

¹⁸ Op. cit. Kingman, “Periods of Anxiety,” 9-12.

¹⁹ Shirley Prendergast, *This is the time to grow up: Girls' experiences of menstruation in school* (Family Planning Association, 1992): 1-196.

²⁰ Op. cit. Kingman, “Periods of Anxiety,” 9-12.

²¹ “Response to Public Consultation on the Draft National Curriculum proposals,” Sex Education Forum, accessed January 18, 2016, http://www.sexeducationforum.org.uk/media/13078/sef_-_nc_response_25_march_2013.pdf.

Prendergast also found that girls were more anxious in school about many aspects of menstruation, such as controlling bleeding, having supplies of pads available, feeling unwell and being teased. 50% of girls experienced symptoms of pain, irritability and tiredness that were moderate to severe, and school facilities for girls who felt ill in school were variable. Improving access to such facilities could help the 15% of girls who regularly miss school for a day because of menstruation-related problems. Much of the anxiety about menstruation also revolves around physical education in schools, as girls are often uninformed about the practical aspects of coping with menstruation, such as the use of tampons, which would make physical activity while menstruating more comfortable.²² There are still many myths concerning what physical activity girls can do while menstruating; nearly 50% of girls questioned between the ages of 9 and 12 believed you should not swim while on your period and 22% believed girls should not participate in sports while menstruating.²³ The continuation of such myths without sufficient education to counter them encourages ideas of separation and the need for menstruators to behave differently from others.

Teasing in school by boys is another primary source of girls' anxiety surrounding menstruation. Many girls experience teasing and humiliation from boys in various forms, such as boys telling jokes about menstruation, or riffling through a girl's backpack to find and publicly show the menstrual products she carries.²⁴ When schools teach the topic of menstruation in gender separated classrooms it worsens this situation, as it implies that periods are something shameful to be kept hidden. "By teaching that menstruation is a negative experience that can lead women down the path toward unwanted pregnancies and requires special hygienic controls, schools reinforce an officially sanctioned discourse that offers boys opportunities to practice male power by ridiculing women."²⁵ Conversely, if schools were to educate all genders on menstruation from an early age, boys will grow up with menstruation as a part of everyday life and not as a gender wedge. Furthermore, nonbinary, intersex and trans pupils would be included in the conversation.

Paula Power, inspired by Prendergast's wide-ranging study, developed a resource to encourage students in the UK to challenge the messages delivered by corporations in the name of education, specifically through a media literacy activity on packaging analysis.²⁶ Her work in the local authority led to a decision to prevent visits from tampon companies after deciding that these visits were primarily designed to sell and promote products to their pupils.

Quint replicated the studies conducted by Prendergast on a small scale by asking students to deconstruct the external messages they received about menstruation. Pupils consistently gave similar replies to those who partook in Prendergast's previous studies, despite the fact that over two decades of intervening development in pedagogical and feminist discourse had occurred since these original studies took place.²⁷ Pupils were very

²² Op. cit. Kingman, "Periods of Anxiety," 9-12.

²³ Lenore Williams, "Beliefs and Attitudes of Young Girls Regarding Menstruation," in *Menarche: The Transition from Girl to Woman*, ed. Sharon Golub (Lexington: Lexington Books, 1983): 139-148.

²⁴ Op. cit. Julius, "Education: A subject that isn't only for the girls."

²⁵ Katherine Allen, Christine Kaestle and Abbie Goldberg, "More Than Just a Punctuation Mark: How Boys and Young Men Learn About Menstruation," *Journal of Family Issues* 32, no. 2 (2011): 133.

²⁶ Paula Power, "Menstrual Complexities," *Health Education* 95, no. 2 (1995): 17-21.

²⁷ Chella Quint, "Period Positive Schools" (Unpublished MA Dissertation, Sheffield Hallam University, 2013).

concerned about leaking, and rated their school's menstruation management provision as inadequate. Pupils were very aware of disposable menstrual products through plentiful advertising, and could name products and slogans with ease. They responded favourably to new education resources that challenged these norms, and rated themselves as both more knowledgeable about and more confident to talk about menstruation with a wider circle of family, peers and educators, with results improving between a baseline self-assessment and later followups.

Menstrual education has consistently focused on the negative aspects of menstruating, such as cramps, moodiness and the importance of avoiding leaks. Menstrual educators give considerable information about the biological characteristics of the menstrual cycle. However, educators both in schools and at home often do not offer much information about the practical and emotional experience of menstruation, such as what it feels like to menstruate and how to cope with menstruation.²⁸ For menstrual education to be adequate, it should be taught earlier by well-trained and positive staff, focus on the practical, cultural and emotional aspects of menstruation as well as the factual, and include all genders in the instruction.²⁹ Adequate menstrual education will make those who menstruate more prepared for menarche, which will overall improve their attitudes towards menstruation and help to break down the stigma that surrounds it.

Why It Matters

Research has extensively reported that the more information someone has in preparation for menarche, the more positive their experience is likely to be.³⁰ Furthermore, this usually translates into a more positive attitude towards menstruation, puberty and body image in the future. Menstruators who were found to have a positive attitude towards menstruation tended to also find periods less bothersome and debilitating as those who viewed it negatively, highlighting the psychological impact of menstrual stigma and taboos.³¹ Thus, the importance of the education surrounding menstruation and the creation of a positive attitude towards menstruation amongst both those who have periods and those who do not cannot be overplayed.

Menstrual taboos range in their form and impact, but they universally create shame and stigma surrounding menstruation that can damage the relationship between a menstruator and the body at the already complex time of puberty and in the long run. Improving education around the topic and breaking down menstrual taboos is imperative for ensuring a healthier attitude, which can benefit individual's physical, emotional and mental health.

Many authors point out how menstruation is tightly bound to ideas surrounding femininity and what it means to be female. As Johnston-Robledo and Stubbs have written, "how girls and women see themselves throughout the life course as menstruators,

²⁸ Erchull et. al, "Education and Advertising," 457-459; Julius, "Education: A subject that isn't only for the girls"; Kingman, "Periods of Anxiety," 9-12.

²⁹ Op. cit. Quint, "Period Positive Schools."

³⁰ Ingrid Johnston-Robledo and Margaret L. Stubbs, "Positioning Periods: Menstruation in Social Context: An Introduction to a Special Issue," *Sex Roles* 68 (2013): 1-8; Kissling, "Bleeding Out Loud," 495; McPherson and Korfine, "Menstruation Across Time", 195-196.

³¹ Op. cit. McPherson and Korfine, "Menstruation Across Time," 196.

or not, is related to how they understand being female and see themselves as female.”³² Seen as a hallmark of maturity, menstruation can often cause large upset and confusion in girls at the idea of being reproductively mature but not as cognitively or emotionally developed. The attitude that is presented to them through education at menarche can have a crucial impact in how they comprehend this biological development, and its implications for themselves as potential mothers, sexual partners and women. This narrative can also be damaging to those who identify as female but do not menstruate for physiological reasons, those who are intersex, those who identify as non-binary or those who have a trans history.³³

One of the most important sources of information concerning puberty and development for many individuals is their mother, and there has been a certain amount of scholarship that highlights the centrality of the mother-daughter relationship in the transference of either a negative or positive attitude concerning menstrual taboos. Through the mother-daughter relationship, girls may learn sex-role identity and related behaviours.³⁴ As Lisandra White has written, “a belief held by the daughter that her mother had negative reactions to menstruation may cause the daughter to anticipate or experience those same negative reactions. On the other hand, in families in which the mother holds a positive and open attitude towards menstruation, the daughter seems better able to identify with her mother as a positive model for mature womanhood.”³⁵ White clearly indicates the importance of the mother’s role in many cases and the difference that a mother’s personal attitude towards menstruation can make on her children’s understanding of the subject. Furthermore, White argues that a lack of understanding concerning menstruation mirrors a deeper lack of understanding concerning sexual health. According to White, insufficient knowledge on menstruation often correlates with sexual behaviour at young ages and unwanted pregnancies.³⁶

How boys and men relate to menstruation is still relatively uncharted territory in terms of scholarly research. The research that has been done asserts that the way in which men and boys learn about menstruation not only strongly reinforces taboos, but also reinforces gender inequality. Allen, Kaestle and Goldberg have concluded that, “families, peers, educational systems, the media, and society at large communicate and reinforce the notion that boys and girls are fundamentally different, and girls are lower in status than boys.”³⁷ Furthermore, they found that as a result of the societal discomfort surrounding discussions of menstruation, there is no clear source of information about menstruation for boys and parents are unlikely to educate their sons about the topic.³⁸ Many men consider it a sign of maturity when they learn about menstruation from a girlfriend but still naturally place menstruation within a paradigm of something immensely secret and incomprehensible. Thus, “neither girls defiantly teasing boys nor girlfriends confiding with boyfriends have yet succeeded in teaching boys that menstruation, and those who

³² Op. cit. Johnston-Robledo and Stubbs, “Positioning Periods,” 3.

³³ Wiley Reading, “My Period and Me: A Trans Guy’s Guide to Menstruation,” *Everyday Feminism*, November 4, 2014, <http://everydayfeminism.com/2014/11/trans-guys-guide-menstruation/>.

³⁴ Lisandra Rodriguez White, “The Function of Ethnicity, Income Level, and Menstrual Taboos in Postmenarcheal Adolescents’ Understanding of Menarche and Menstruation,” *Sex Roles* 68 (2013): 66.

³⁵ Ibid.

³⁶ Ibid., 73.

³⁷ Op. cit. Allen, Kaestle and Goldberg, “More Than Just a Punctuation Mark,” 130.

³⁸ Ibid., 132.

menstruate, belong in the public arena.”³⁹

In formal educational settings, the decision is still often made to split classes, and the same information is not always taught to each group. Even the language used in textbook materials about puberty can lead to a hidden curriculum of subtly pejorative and passive language when referring to female reproduction as opposed to more active and positive language when referring to male pubertal changes. In a New Zealand study, Joseph Diorio and Jennifer Munro log and interpret the language specifically in how it informs young people’s embodied attitudes and how this can impact their self-esteem.⁴⁰ The attitude that non-menstruators have is just as important as those of people who menstruate when discussing menstruation, as these attitudes can propagate and reinforce the taboos surrounding it.⁴¹

³⁹ Ibid., 153.

⁴⁰ Joseph Diorio and Jennifer Munroe, “Doing Harm in the Name of Protection: Menstruation as a Topic for Sex Education,” *Gender and Education* 12, no. 3 (2000), 347-65.

⁴¹ Op. cit. Julius, “Education: A subject that isn't only for the girls.”

Our Research: Methodology, Discussion and Results

Methodology

Our primary research methodology was a questionnaire, which combined quantitative and qualitative elements. For ease of access, the questionnaire was disseminated and completed online. A subscription website was used to host the questionnaire, which was live from 24th September until 13th November 2015. The questionnaire included a total of 44 questions divided into six broad sections:

1. About You and Your Role in the School
2. About Your School
3. About Your Menstruation Knowledge and Training
4. About the Way Menstruation is Taught in Your School
5. About the Menstruation Education Resources Used at Your School
6. About this Survey and Further Information

All questions were optional for respondents to answer. Respondents were given the option of making additional and/or explanatory comments in a comments box for each question. 42 of the questions were multiple-choice options. Two questions regarding the teacher's personal knowledge about menstruation and their level of comfort with teaching it were rated questions with matrices.

The questionnaire was advertised to a large group of teachers and school workers and multiple methods were used in disseminating it. Direct emails were sent to head teachers in every state secondary school in the chosen regions of Oxfordshire, South Yorkshire, Manchester, Newcastle, Cardiff county and the London borough of Lambeth. The web link to the questionnaire was also posted onto several teaching-related Facebook groups and online teaching forums.

The regions were chosen through non-probability sampling on the basis of their geographical differences. Although we did not anticipate a geographical bias in our results, this method was used to pre-empt the possibility of geographical and socio-economic bias. The regions were not selected to reflect preconceptions about what menstrual education in each area would be like except in the case of South Yorkshire, where Quint has shared her research and lesson ideas through #periodpositive and through the Gender Respect Project in the past. We believe that this sample is representative of English and Welsh schools generally, and therefore gives a valid measure of menstrual education in English and Welsh secondary schools and academies. It was decided not to include regions in Scotland or Northern Ireland due to the difference in the education system and curriculum.

We received a smaller than anticipated cohort of respondents. The lack of replies could be due to a combination of factors, including the time of year as well as our outreach methods. It could also indicate that the taboo around menstruation carries over into willingness to discuss the topic of the questionnaire, which could also influence respondents' wish to report good practice. We believe that more targeted contact with PSHE or Science leads at each school may have gone some way in overcoming these barriers to participation.

Demographic Information

The importance of our research is indicated by the scale of those affected by these issues. There are 3,184,728 pupils in England being educated in State funded secondary schools. These pupils are taught in 16,766 secondary schools and academies.⁴² Since Wales also shares the educational system and curriculum of England, it is also important to consider the impact of menstruation education upon the 207 secondary schools in Wales, which collectively teach, 36,485 pupils⁴³. These figures do not include state funded special schools, which are already reported to need improvement and consideration toward good quality Sex and Relationships Education (SRE) topics more broadly.⁴⁴

We feel that the type of schools we have focused on cover an extensive population of students and teachers for whom changes toward recommended best practice in teaching menstruation could be influenced by central government policy, even if the private educational sector is not affected.

It is worth looking particularly at two of the areas targeted from which we received a high level of questionnaire responses: Oxfordshire and South Yorkshire. The high response rate was likely due to our proximity, reach, and influence in these regions. Oxfordshire and South Yorkshire have very large school age populations. South Yorkshire (within which we include the four metropolitan boroughs of Barnsley Rotherham, Doncaster and Sheffield) contains 71 schools across the area. Meanwhile Oxfordshire contains 37 state secondary schools.⁴⁵

Methodology of Analysis

Questions 1-13 and 16-37 took the results of the questionnaire and graphically demonstrated the proportions or numbers of respondents who gave particular answers using bar charts, line graphs and pie charts. In doing this we took the results of the questionnaire at face value, as there was not a large enough n-study to draw robust conclusions about standard errors or to eliminate outliers. Since much of our data is qualitative, this presentation serves far more to illustrate the results of the research than to perform tests on the data. This data should be interpreted as anecdotal, but with the potential to be indicative of wider trends in menstrual education. Questions 14 and 15 took a similar approach, but we broke down the results by particular area of menstrual education, finding the total number of respondents who suggested that they had a particular level of knowledge or comfort in each subtopic and then displaying these

⁴² “National Statistics: Schools, pupils and their characteristics: January 2015,” Department of Education, last modified July 16, 2015, <https://www.gov.uk/government/statistics/schools-pupils-and-their-characteristics-january-2015>.

⁴³ “School Census Results, 2015,” Knowledge and Analytical Services Welsh Government, July 23, 2015, <http://gov.wales/docs/statistics/2015/150723-school-census-results-2015-en.pdf>.

⁴⁴ “FPA publishes results from survey of professionals working in learning difficulties,” FPA, August 4, 2008, <http://www.fpa.org.uk/news/fpa-publishes-results-survey-professionals-working-learning-disability>; “A Framework for Sexual Health Improvement in England,” Department of Health, March 15, 2013, <https://www.gov.uk/government/publications/a-framework-for-sexual-health-improvement-in-england>; Rachel Williams, “Pupils with learning difficulties are being denied their right to sex education,” *The Guardian*, March 23, 2015, <http://www.theguardian.com/education/2015/mar/23/learning-difficulties-sex-education-abused>.

⁴⁵ Op. cit. “National Statistics.”

results on the same axes for comparison. All questions and results can be found in Appendix 1.

Appendix 2 shows the results of cross-referencing our questionnaire responses. To do this we created a series of clustered bar charts informed by our literature review. This allowed us to show differences across the same set of categories when those results are sorted by a third variable. In the first cross-reference, for example, we ordered results in terms of the Ofsted results of the school and then showed the number of respondents within each Ofsted grade boundary who had each of the different levels of knowledge.

Discussion

Below we discuss the results of our questionnaire while focusing on the following themes: teachers and their experiences, the logistics of menstruation education in schools, the formation of course content and lesson planning, and the involvement of menstrual product companies in menstrual education. Any graphs not included in the body of the report can be found in Appendix 1. All graph numbers within the report correspond to the question number they are associated with in Appendix 1.

Teachers and Their Experiences

We found that although we targeted our questionnaire distribution at particular areas of England and Wales, the respondents did not necessarily correspond to the targeted areas. However, this was not viewed as a major problem, as we have already stated that we did not foresee any geographical bias in our results apart from in South Yorkshire, where Quint runs workshops and training sessions on menstruation education. A total of 20 respondents (38%) were in the 25-34 age group, 15 (28%) in the group 35-44, and 11 (21%) in the group 55-64 (Graph 6). We found that 87% of those surveyed identified as women and 13% as men (Graph 7). This was largely unsurprising, as it is likely that a questionnaire on menstrual stigma and menstruation education would show some sort of selection bias of female respondents over male respondents due to the subject matter. It also to some extent reflects the situation in schools nationally where 73.6% of teaching staff and 91.7% of teaching assistants are female.⁴⁶

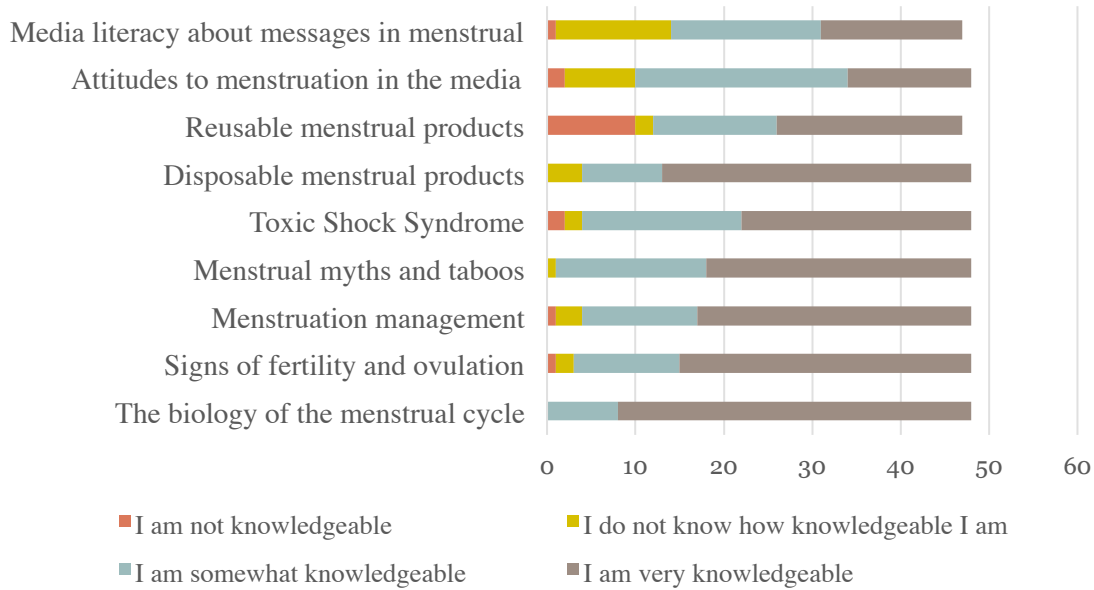
Graphs 14.1 and 15.1 show how knowledgeable teachers believe they are about menstruation and how comfortable they feel teaching it respectively.

[Graphs on next page]

⁴⁶ “Statistical First Release: School Workforce in England: 2013,” Department for Education, April 10, 2014, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/335413/sfr11_2014_updated_july.pdf: 7.

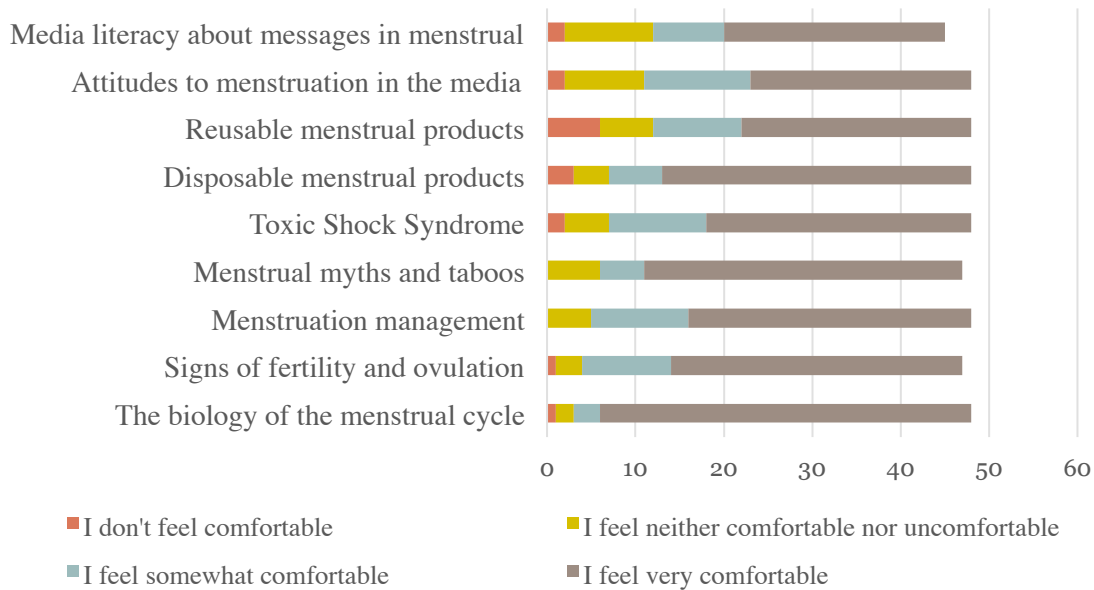
Graph 14.1

How knowledgeable do teachers feel about different areas of menstrual education



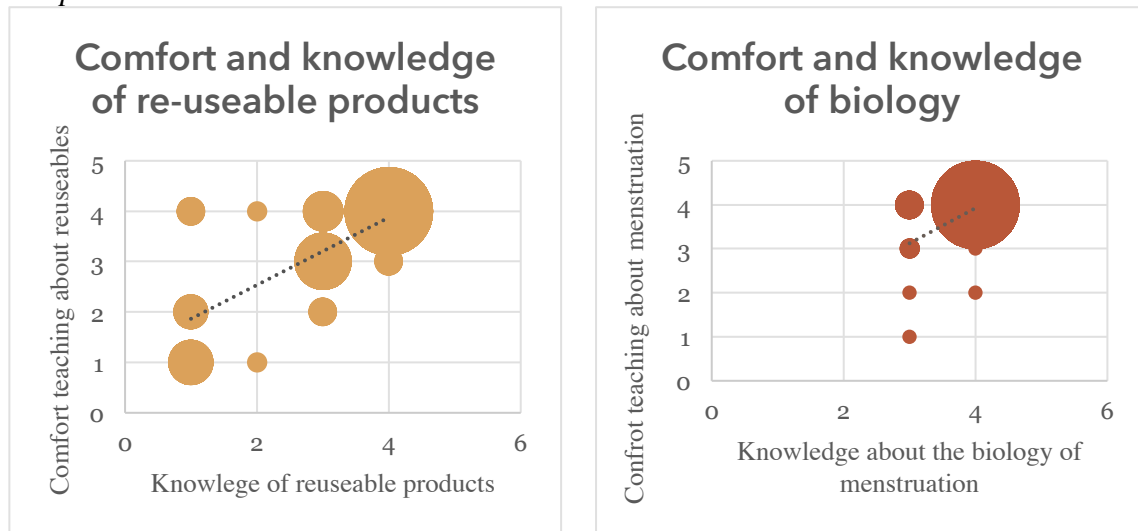
Graph 15.1

How comfortable do teachers feel about different parts of menstrual education?



Graphs 15.2 and 15.3 summarize the relationship between how knowledgeable participants felt about areas of menstruation education (4 is I am very knowledgeable, 3 is I am somewhat knowledgeable, 2 is I do not know how knowledgeable I am and 1 is I am not knowledgeable) and how comfortable they felt teaching about those areas (4 is I feel very comfortable, 3 is I feel somewhat comfortable, 2 is I feel neither comfortable nor uncomfortable and 1 is I don't feel comfortable). The bubbles are weighted by the number of respondents who gave a particular response, so the larger the bubble the more people gave a particular combination of comfort and knowledge in their answers.

Graphs 15.2 and 15.3



The trend lines show that there is generally a positive correlation between comfort and knowledge. However, this could also be due to the potential selection bias of those wishing to respond to the questionnaire to report their “positive attitude” over those wishing to avoid it.

Our questionnaire showed that only 22% of teachers surveyed had received training specifically about menstrual education (Graph 16). The comments of those who had received training indicate that a small amount of training can go a long way in how knowledgeable and comfortable teachers feel teaching about menstruation. Respondent 52, a female PSHE teacher, commented that she had worked with Quint, “as part of the Gender Respect Project to plan lessons about menstruation.” She responded “I am very knowledgeable” to eight out of the nine options for Graph 14 (her response to “Attitudes to menstruation in the media” was “I am somewhat knowledgeable”) and answered that she felt “very comfortable” teaching all the aspects which we suggested.

Respondent 54, a female PSHE coordinator, commented that she had received training from the Sexual Health Services in Sheffield and said that she was “somewhat” or “very” knowledgeable about all aspects of menstruation education, except reusable menstrual products on which she responded “not knowledgeable.” This corresponded to her response that she was either “somewhat” or “very” comfortable teaching these aspects of menstruation education.

Respondent 54, another female PSHE teacher based in South Yorkshire, responded that she had received training from the Sheffield Centre for HIV and Sexual

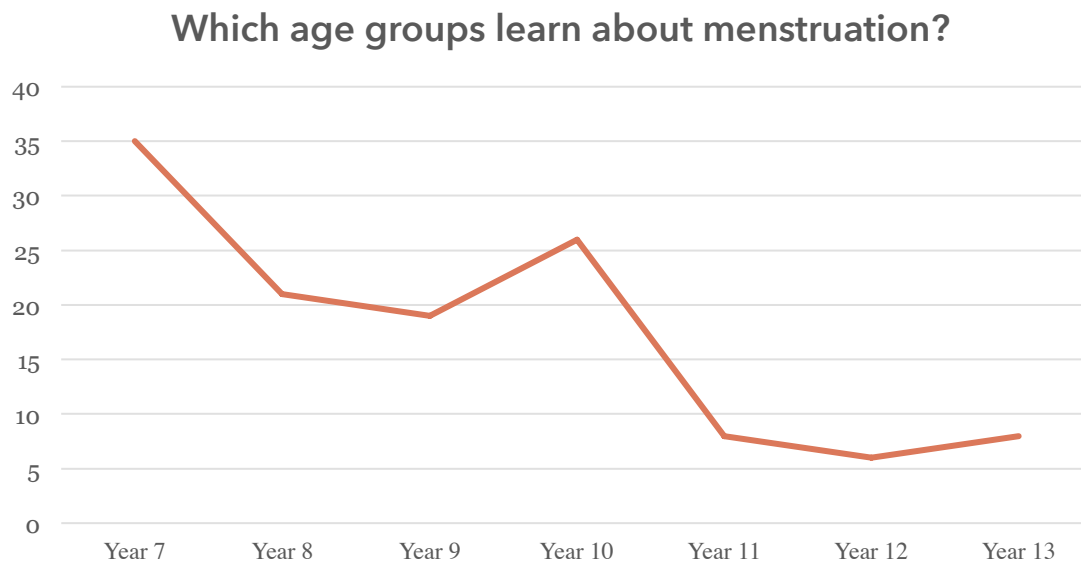
Health, which also included training delivered by Quint. She also responded that she felt “very knowledgeable” about every aspect of menstruation education and that she felt “very comfortable” teaching all aspects except Toxic Shock Syndrome and reusable menstrual products, which she felt “somewhat comfortable” teaching.

Those who responded “no” to having received training specific to menstruation education were asked if they would be open to receiving training. 47% of those who responded to this question said that they would be interested. 28% responded “not sure” and 25% “no” (Graph 17). Unfortunately, there were very few responses allowing us to understand why a quarter of our respondents would not be interested in further training about menstruation education.

Logistics of Menstruation Education in Schools

42 respondents answered the question “Which age groups learn about menstruation?” and because we allowed teachers to tick all answers that applied we received multiple answers from some participants. 83.4% of respondents selected Year 7, 61.9% selected Year 10 and 50% selected Year 8, demonstrating that these were the most common ages for students to receive menstrual education in the schools which we surveyed (Graph 18).

Graph 18



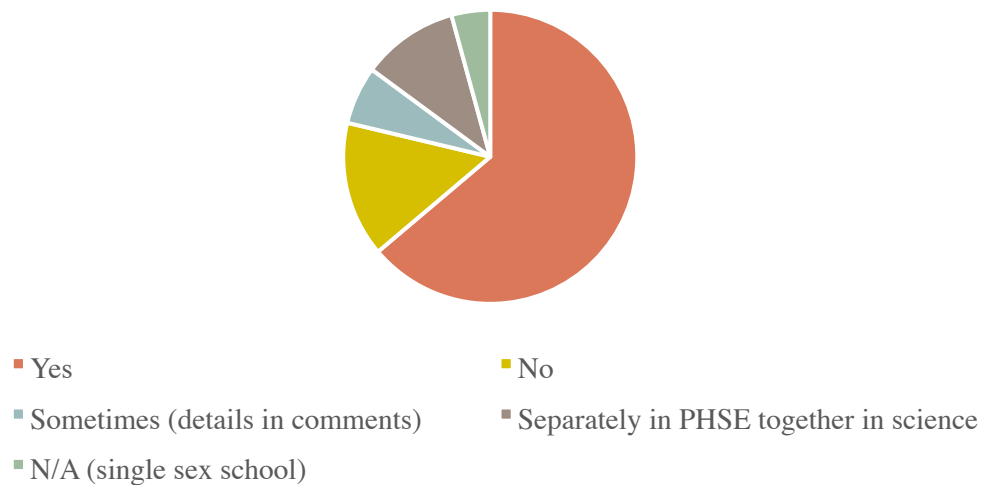
42% of participants replied that they knew that menstruation was taught at local feeder schools, whilst 37% were unsure and 19% said it was not (Graph 19). The individual comments of respondents and the number of people who were unsure are perhaps more telling than the concrete answers here. Respondent 34 commented that “some do, some don’t” and Respondent 57 said that it can be “very inconsistent”. This suggests that among our group of participants, there is very little uniformity between the levels of menstruation education given to pre-secondary school students. This finding is consistent with prior research.

Graph 20 shows that menstruation is overwhelmingly taught in biology (90.5%) and PSHE (81%), but our results also show that it is covered in many other subjects, including RE, PE, Media Studies, Science, and “assemblies with senior learning mentor” (Respondent 59). This indicates that, as our literature review has shown, menstruation is predominantly taught through a biological lens. This is supported by National Science Curriculum guidance that directs teachers to address menstruation once in Y7 (“without details of hormones”) and once in Y10 (specifically in the context of hormonal and non-hormonal contraception).⁴⁷ It is positive to see that PSHE is also a major subject in which menstruation is taught, as it is likely that PSHE classes cover more than just the biological facts of menstruation.

71.4% of participants answered that boys and girls were not separated in these classes and 16.7% responded that they were (Graph 21). A further 16.7% responded that this was sometimes the case.

Graph 21

Are boys and girls taught in the same class?



Again, the individual comments were enlightening. All of the comments indicated that when menstruation was taught in biology or science the classes were mixed, but several commented that in PSHE or other non-science subjects students may be split by gender. Respondent 59 said that students were taught together “in science only” and Respondent 56 agreed that they were taught together in science but “specific periods and

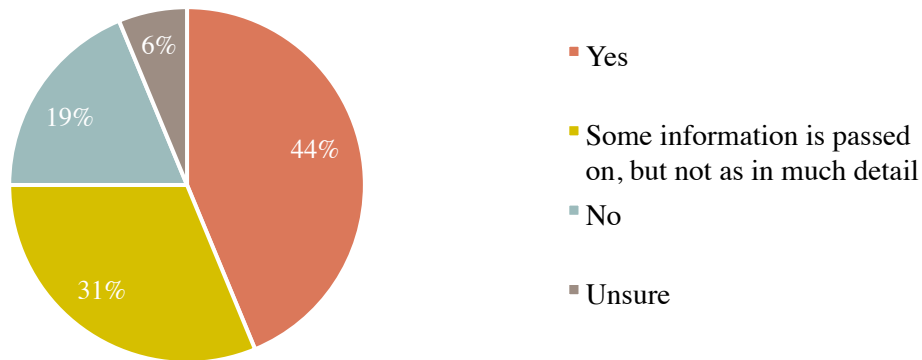
⁴⁷ “Science programmes of study: key stage 3: National curriculum in England,” Department for Education, September, 2013, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/335174/SECONDARY_national_curriculum_-_Science_220714.pdf; 6; “National curriculum in England: science programmes of study,” Department for Education, May 6, 2015, <http://www.gov.uk/government/publications/national-curriculum-in-england-science-programmes-of-study/national-curriculum-in-england-science-programmes-of-study#key-stage-3>; “Science programmes of study: key stage 4: National curriculum in England,” Department for Education, December 2014, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/381380/Science_KS4_PoS_7_November_2014.pdf.

wet dreams PSHE is delivered gender-split.” Two more participants responded along the same lines. However, Respondent 54, who had worked with Quint as part of the Gender Respect Project, said “Always! I think this is really important,” further indicating the positive impact of attending menstruation education specific training.

Although 44% of participants confirmed that, if separated, boys would receive the same information as girls, 31% answered that they would receive some information but not in as much detail, and 19% said they did not receive the same information (Graph 22).

Graph 22

If boys and girls are separated, do boys get the same information?



Furthermore, 46.3% of respondents believed that their school’s sex education does not take into account gender identities other than male/female, whilst 36.6% thought it does and 17.1% responded that they did not know (Graph 23). Respondent 20 commented that they “doubt it’s a subject that children could manage.”

Formation of Course Content and Lesson Planning

Our next set of questions related to how lessons were planned and who was involved in their creation. 35.7% replied that the senior leadership team was shown content before lessons were taught, whilst 47.6% of participants responded that the senior leadership team was not (Graph 24). In contrast, only 19.1% replied that school governors were shown content, and 64.3% said they were not (Graph 25). 21.5% of respondents said that parents were also shown curriculum content whilst 66.7% said that parents were not shown content (Graph 26). Of those who replied that their schools showed the senior leadership team the content before it was taught, 46.7% also showed school governors and 53.3% showed parents. It is clear from this data that it is not common to show anyone except the senior leadership team the curriculum content among our participants, and even the senior leadership team is shown the content less than half the time.

53.5% of respondents said that parents were allowed to remove children from classes on menstruation. Of these participants, 45.1% said that fewer than five children were removed from class per year, and 51.6% said that they didn't have access to this information. The comments, however, indicate that this is uncommon. Respondent 59 said that although parents are allowed to remove their children "none have been removed." Respondent 57 agrees that children are allowed to be removed from classes, but that the only instance of this recently was when two children were removed due to SEN so that they could be taught the content individually to "ensure they fully understood." It is positive to see that few children are actually removed from their classes on menstruation. However, the fact that they are allowed to be removed from these classes indicates that schools, and perhaps teachers, may perceive of menstruation education to be nonessential or optional.

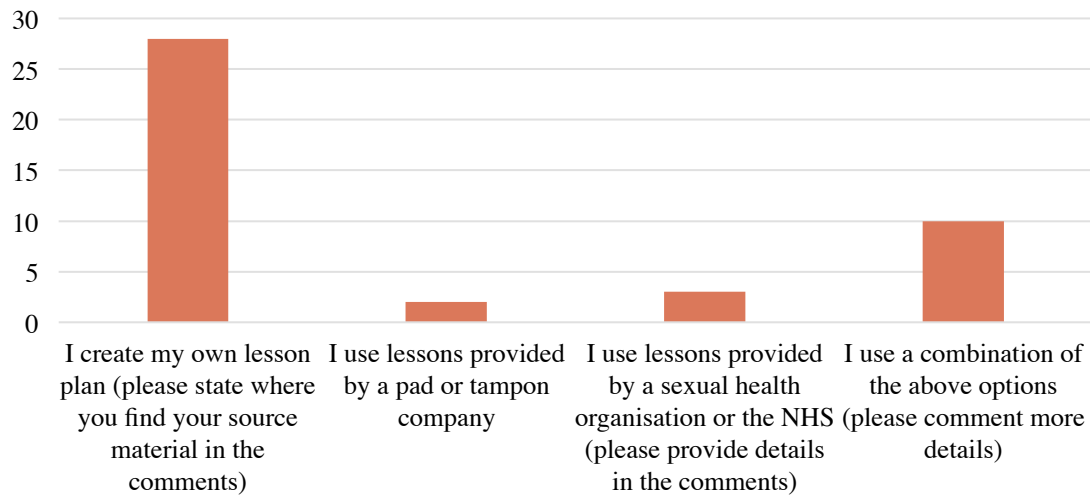
73.8% of the participants responded that they taught menstruation education themselves, 31% said that they both taught the subject themselves and got a visitor in, and no respondents said that they only got a visitor in (Graph 30). It is important to remember here that the majority of the teachers who responded to this questionnaire were biology or other science teachers who would be less likely to get a visitor in and would mainly teach the scientific side of menstruation by themselves. Respondent 48 said that the main teacher covers menstruation in science lesson but "a speaker comes in for PSHE lessons." Getting a visitor in to teach about menstruation may lead staff and pupils to 'other' it and perpetuate the stigma around menstruation. Of those who got a visitor in to teach some of their classes, the majority said that the visitor was the school nurse (78.6%) or was from the local NHS clinic or SRE charity (42.9%). Other visitors were from menstrual product companies (both reusable and disposable), the council, a peer education or university programme, or a school learning mentor. Respondent 48 said that their visitors were from Sexpression, which is a student organisation aimed at educating young people about sex and relationships, as well as the school nurse and a visitor from the local council. It is worth noting that Quint has advised and disseminated both local and national training to Sexpression groups, and so these pupils and staff may be delivering similar sessions as in Yorkshire. It is good to see that few visitors were from menstrual product companies, but 28.6% is still a significant and influential percentage of our study sample.

73.7% of our participants responded that they created and used their own lesson plans, 5.3% said that they used lesson plans provided by a pad or tampon company and 7.9% said that they used lessons provided by a sexual health organisation (Graph 32).

[Graph on next page]

Graph 32

What teaching resources do you/visitors use?



Of those who created their own lesson plans or used a mixture of sources, the comments show a huge range of sources and material being used. Several participants cited Google (a search engine) as where they found most of the information for their lessons, and teaching forums such as TES (a general lesson plan archive) also featured quite highly. None of these responses listed details of which resources were used from Google or the TES. Respondent 56 said that “science is delivered as per national curriculum requirements, PSHE/SRE is more bespoke, based on understanding level of cohorts, and any additional needs.”

This supports much of what we have found so far: the menstrual education delivered in science/biology lessons is much stricter and pre-determined than PSHE lessons. Interestingly, there were also a number of responses that detailed that lessons were planned and altered according to the needs of the students in the class, which speaks to the informed and proactive nature of the work these teachers are doing generally.

Involvement of Menstrual Product Companies in Menstruation Education

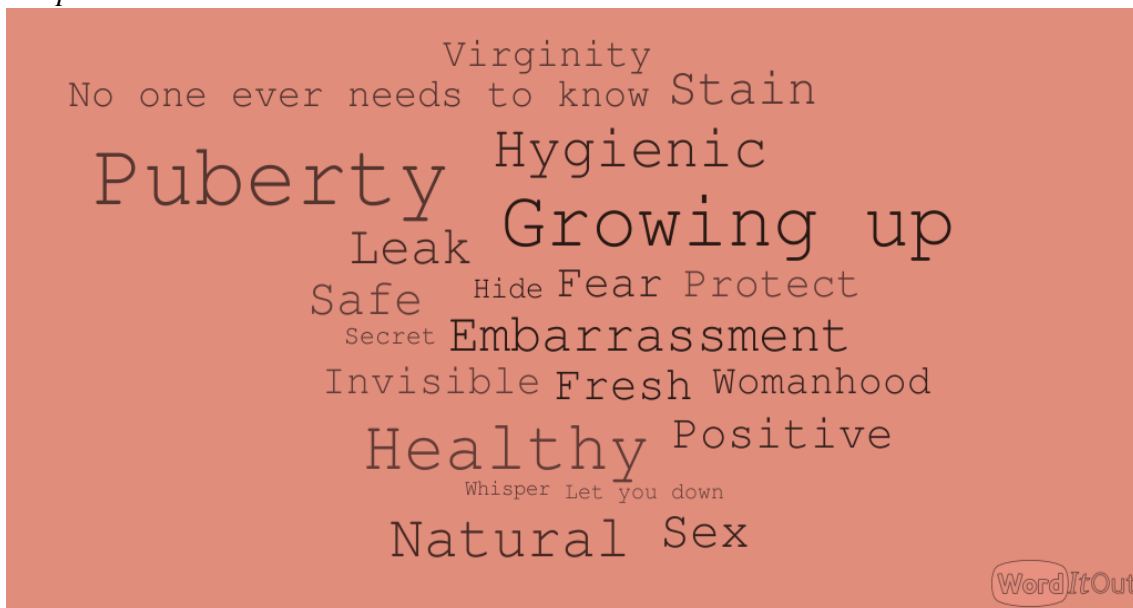
26.3% of respondents said that they received teaching resources from companies or advertisers, whilst 63.1% said that they did not and 10.5% said they were unsure (Graph 33). Eleven teachers said they received teaching resources from Always or Tampax, whilst three received some from Lil-Lets and one from Mooncup (Graph 34). More teachers received samples from companies at 36.8% of our respondents. The divide between companies is similar to those who send teaching resources: seven teachers received samples from Always and the same number from Tampax, whilst three received samples from Lil-Lets, two from Mooncup and one from Kotex (Graph 36). Respondent 52 said that they had requested a sample Mooncup and reusable cloth pad from Angelpadz. It is clear that the majority of our participants who received teaching materials or samples received branded, disposable products.

88.9% of respondents said that they taught about disposable pads and tampons, 25% about reusable pads and 38.9% about menstrual cups (Graph 37). Four participants

commented that they do not teach about products as they solely teach the biological aspect of menstruation. Menstruation management is a component of menstruation knowledge deemed particularly valuable to menstruators, however the focus in science lessons on “biological” functions means that pupils are mainly learning about menstruation in an abstract fashion.⁴⁸ In our sample, an overwhelming majority of teachers who do mention menstrual products focus predominantly on disposable products such as pads or tampons, although it is reassuring to notice that over a quarter also mention reusable pads and menstrual cups.

The word cloud (Graph 38) shows the words used when teaching about menstruation, weighted by the frequency.

Graph 38



It can be seen that biological words to describe the mechanics of menstruation are used frequently, such as “puberty” and “growing up”. Words and phrases, such as “stain,” “no one ever needs to know,” “hide,” “leak,” “fear,” “embarrassment” and “invisible” are all also used frequently, potentially demonstrating the way in which children are taught that menstruation is embarrassing and ought to be hidden, and perpetuates the negative advertising of menstrual product companies that only by using their products can one be free of the fear of leaking. However, words such as “healthy,” “positive,” and “natural” are always used frequently, indicating that children are not just taught with the vocabulary of secrets.

It should be noted that although we selected these words based on the frequency of their use in advertising and commercial school resources, we did not find a way to allow teachers to denote whether the use of these words was negative or positive and our interpretations of them are thus speculative.

⁴⁸ Predergast, *This is the time to grow up*, 1-196; Chella Quint, *Adventures in Menstruating: Don't Use Shame to Sell*, Youtube video, 27:39, July 5, 2012, <https://www.youtube.com/watch?v=kce4VxEgTAM>.

Finally, there were a number of more general comments left by the participants. Two participants commented on how this questionnaire made them realise how short a time they are allowed to teach about menstruation, with Respondent 17 saying, “the amount of time dedicated to this in a bog standard secondary school is tiny with the rest of the curriculum demands. All resources that have been sent by companies etc. seem to be for 5 or 6 lessons, which is completely unreasonable. I wish we could spend longer on it. It really needs to be aimed at [Year] 7, and in our school we have 1 or 2 hours, so not much time to fill. This is the biggest problem you will face!” Another participant, Respondent 46, said, “I would like to learn more about reusable sanitary methods, as I have one friend who uses them, but have never asked myself, as I am happy using disposable. I would also like to be more confident about controlling the menstrual cycle, as I have never used the pill myself,” which further supports our earlier conclusion that just a small amount of training, or even the opportunity to think further about these issues, can go a long way.

Results

Our results (Graphs 15.1-3) clearly show that those who had received training felt far more comfortable in their knowledge about menstruation, and therefore their ability to teach it. Our graphs show a generally positive correlation between comfort and knowledge.

The more knowledge a teacher possesses the more ease they have with the subject, and as a result they are likely to present a more positive and relaxed attitude concerning menstruation to students. As we have seen from the literature review, the impression given to young people concerning menstruation has an ongoing impact on their own perception of their bodies, those of their peers, and of menstruation in general. Thus, it can be seen that the more specific training available to staff educating others about menstruation, the more positive a student’s attitude towards menstruation is likely to be. As a core policy we therefore recommend that educators be specially trained in menstruation and appropriate methods for teaching it to others, and that schools make menstruation education mandatory.

While most of our respondents agreed on the main ages at which children learn about menstruation, (between Year 7-10) there were clear differences between the ways in which they were taught and the level of preparation that children were given about the topic pre-secondary school. This lack of uniformity amongst the levels of menstruation education received prior to secondary school can make it difficult for those teaching the subject at secondary school and can also be very negative for those who reach menarche at a younger age. As the literature has shown, one’s first experience of menarche is critical to the paradigm in which menstruation is perceived from then on. As a result, it is important that there is a standardised introduction within primary schools to the central concepts of menstruation and that the more broad topic of puberty is taught before pupils begin the early stages of it.

The overwhelming majority of our respondents indicated that menstruation is primarily taught within a biological context. While it is important to teach the biological underpinnings of menstruation within the context of reproduction, it is also crucial that other physical, social, and emotional aspects of menstruation are discussed. Shame and

stigma can be transmitted if media messages and myths are not explored or if frank discussions about menstruation management are not provided.

While menstruation was reported as being taught with PSHE by 81% of our respondents, along with subjects such as RE, PE, and Media Studies, it is worrying that some classes were still being split between the genders during these classes. It has been shown within research and literature that the division of genders when teaching menstruation reinforces certain taboos such as the embarrassment associated with menstruation and the perceived resultant need to keep it private and secret. Although assurances from 44% of participants that even when split boys would receive the same education as girls, it is clear that this leaves many receiving differing information. It is impossible to ensure that split classes will receive the same information even if the teachers intend to.

The limited amount of literature about how boys learn about menstruation and their attitudes towards it indicates that their initial exposure to the subject as a source of secrecy could reinforce their perception of it as something dirty and confusing. This attitude can propagate taboos, societal shame, and teasing of menstruators within schools. Increased awareness has been shown to interrupt the reported pattern of teasing and worry on the part of menstruators.⁴⁹

The splitting of genders when teaching menstruation in school is one of the clearest signs to students that this is something to be understood and approached differently by two distinct binary genders. Not only does this reinforce gender divides and binaries, but it is also a very negative message to those who identify on or outside the gender continuum, or as transgender or intersex. We therefore feel that it is imperative that all students are taught together about menstruation, irrespective of gender, and that the education given must go beyond its biological elements.

Our research shows that few people are shown the curriculum content for classes other than the senior leadership team, and even then it is in less than half the cases. Although the removal of students from classes about menstruation is rare, as reported by our respondents, the fact that it is possible for parents to remove their children from the classes suggests to teachers, parents, and students that this is not an essential lesson to learn. Both the lack of a clear curriculum overseen by many other than the teachers themselves, and the ability of parents to remove their children from menstruation education presents the topic as something of negotiable importance. We would argue that it is crucial for all students to learn about menstruation and that a clear syllabus should be agreed upon for the topic.

While most respondents did not get a visitor in to help teach menstruation, this may have been a result of the fact that most of them were science teachers and therefore more focused on the biological side of menstruation. While it is positive to hear that schools are sometimes taking the step of ensuring that specialists, often the school nurse or someone from the local NHS clinic, are available to speak to students about menstruation, the presence of a visitor to teach the subject in the first instance can suggest menstruation is still something special or strange that must be given particular attention. While it is possible for this to be done in a positive way and can serve as a temporary measure before teachers are trained, it is certainly preferable to have teachers within the

⁴⁹ Op. cit. Predergast, *This is the time to grow up*, 1-196; Op. cit. Quint, *Adventures in Menstruating*.

school suitably trained so that they can teach the differing aspects of menstruation themselves and thus lend a normality to the subject.

It is encouraging that few respondents used resources from menstrual product companies for their teaching. These companies, such as Always and Tampax, reassert the need for secrecy and shame through their in-school resource and public advertisements and encourage the use of their disposable products as means of protecting oneself from menstruation-related embarrassment.

It is clear that menstruation within a biology context is taught according the National Curriculum guidelines, however within PSHE it seems far more open to alteration, interpretation or omission as the teacher deems fit. This suggests that menstruation is seen as a variable topic. Many of the resources that respondents commented as using, such as websites found through Google, leave a large margin for error and inaccuracy in the information provided to students. It is therefore important that menstruation education is afforded more rigour, with a robust curriculum model that indicates clear progression and opportunities for cross-curricular reinforcement of learning. While teachers must of course be willing to answer particular questions in a naturalistic style and respond to pupil's needs, certain fundamentals must be standardised to ensure they are accurately covered.

Regarding menstruation management, the majority of our respondents focus predominantly on branded, disposable products such as pads or tampons provided by Always or Tampax (which are both produced by Procter & Gamble) when discussing suitable products to use during menstruation. We are encouraged that over a quarter also mention reusable pads and menstrual cups, but it should be universal practice that these more environmental and ethical products are discussed. Media literacy should also be explored so that young people can interpret and draw conclusions for themselves about the messages and tone taken by particular brands of products that can reinforce taboos.

Policy Recommendations

We suggest that the following policies be put into place to ensure that the best possible education about menstruation can be given to students in schools across the UK:

- Menstruation should be introduced in all primary schools to ensure that once children reach secondary schools they have a basic grounding of knowledge and those who develop early are not underprepared.
- Teachers should be trained in how to teach menstruation to ensure that they have the best knowledge and comfort with the subject that they can then pass on to students.
- All genders should be taught in the same classes in order to avoid reinforcing gender binaries and to avoid reinforcing taboos that suggest menstruation is embarrassing and must be kept secret.
- Menstrual education should not only focus on the biological processes behind menstruation, but should also discuss the practicalities of menstruating: what is normal, what it feels like, and how to cope with it.
- It should be universal practice that reusable products, such as menstrual cups and reusable pads, be discussed along with branded, disposable products.
- It should be compulsory for all students to learn about menstruation and a clear syllabus should be agreed upon for the topic.

Conclusion

This report has shown both the problems with prevalent attitudes to menstruation and how these problems are perpetuated by menstrual education in schools. These are long standing issues dating back to a century of advertising and historical messages of stigma across many cultures.⁵⁰ As such, we have argued that menstrual education can be improved across a number of dimensions, and advocated strategies that will contribute to the erasure of the shame and stigma that currently clouds menstruation.

Our findings show that the predominance of gender-segregated teaching further stigmatises menstruators, that the lack of standardised curriculum for menstrual education poses a problem for teaching menstrual education in a comprehensive and positive way, and that many educators who do not feel knowledgeable about menstruation are not comfortable teaching it. To combat these problems, we propose changes to the teaching practices of menstruation in state schools. We have argued that menstruation should be taught by professionals who are sufficiently trained and confident, and who will present menstruation in a positive manner. Furthermore, there should be a clear syllabus for menstrual education to ensure that students receive a consistent and positive education with resources that are vetted, reliable and unbranded. To prepare menstruators for menarche, the practical elements of menstruation should be discussed, including full disclosure on the methods of menstrual management, which involves showing the widest possible range of unbranded menstrual products. To include non-menstruators and combat the stigma attached to menstruators within the social setting of schools, all genders should be taught together. Finally, we strongly encourage those within and beyond education to teach menstrual media literacy and directly challenge the ways in which menstrual stigma is upheld through the current discourse. We need to teach the taboo in order to end the taboo.

⁵⁰ Op. cit. Kissling, “Bleeding Out Loud,” 495; Op. cit. Quint, *Adventures in Menstruating*.

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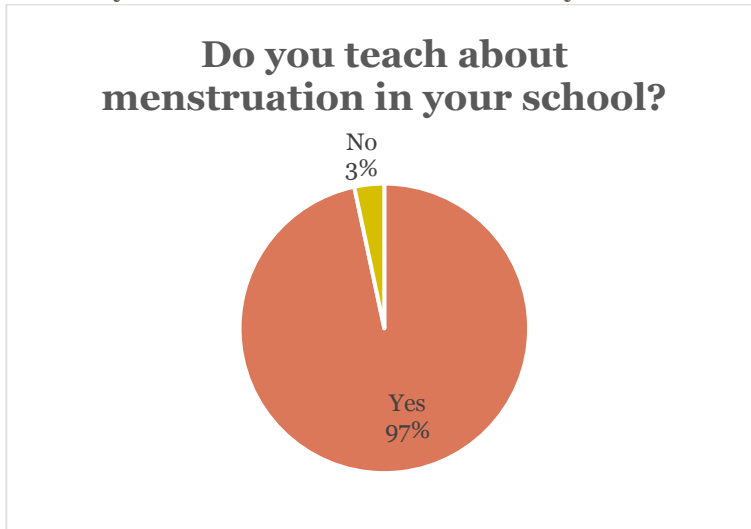
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Appendix 1: Full Questionnaire Results by Question

Q1: Do you teach about menstruation in your school?



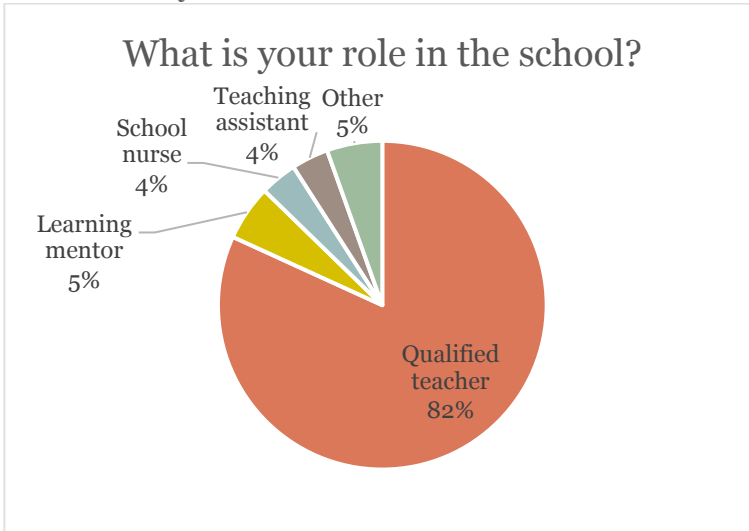
There were 60 responses to this question. 58 responded yes.

Q2: Where is your school located?



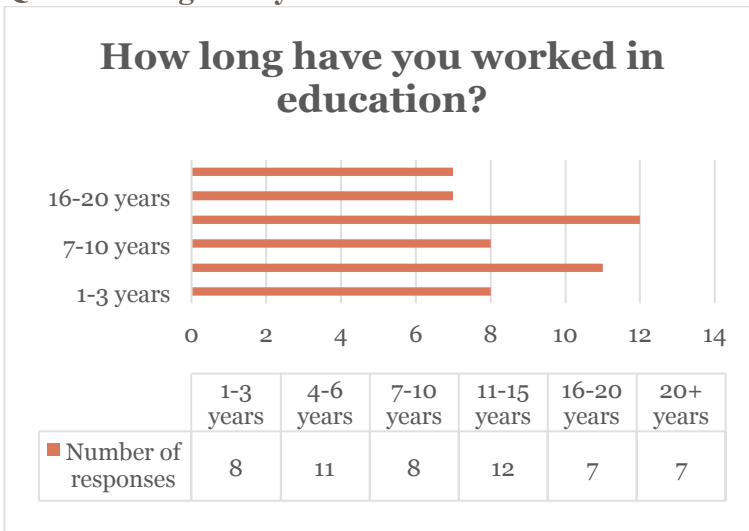
There were 46 responses to this question.

Q3: What is your role in the school?



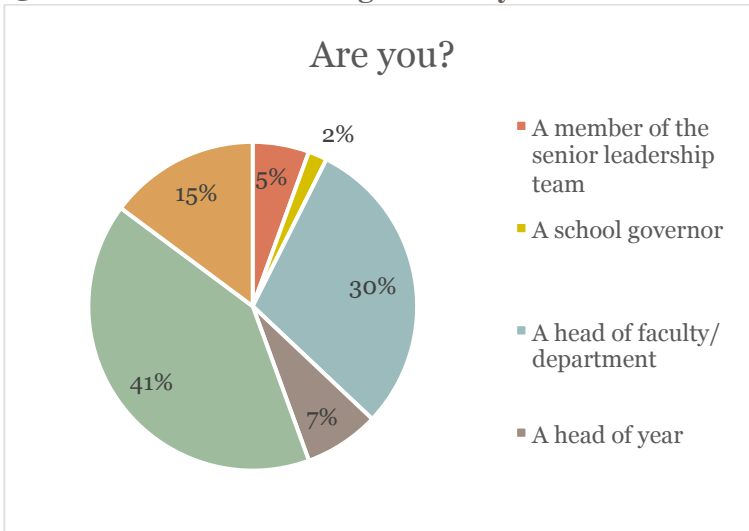
There were 55 responses to this question. Of those who answered other, the responses they gave were: head of science, lead first aider, and complex case officer.

Q4: How long have you worked in education?



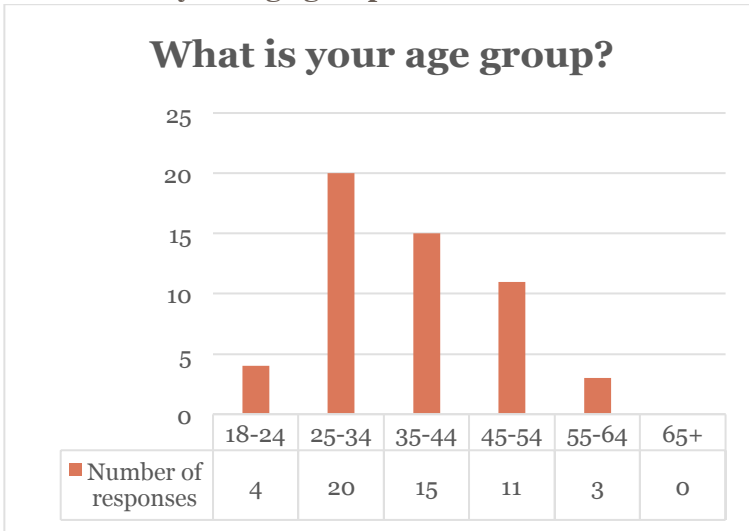
There was a broad spread of experience among our participants. There were 53 responses to this question.

Q5: Which of the following roles do you have?



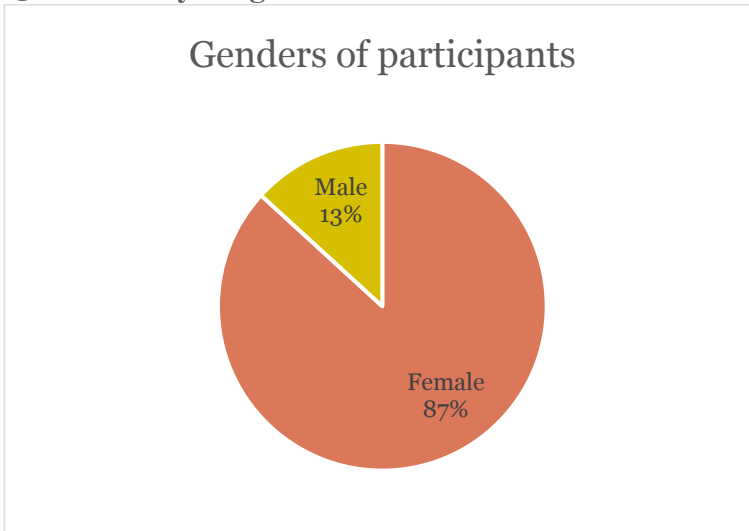
The other responses were: form tutor, learning support assistant, support staff, former head of department, lead teacher and staff governor, PHSE co-ordinator and complex case/medical/child protection. There were a total of 54 responses to this question.

Q6: What is your age group?



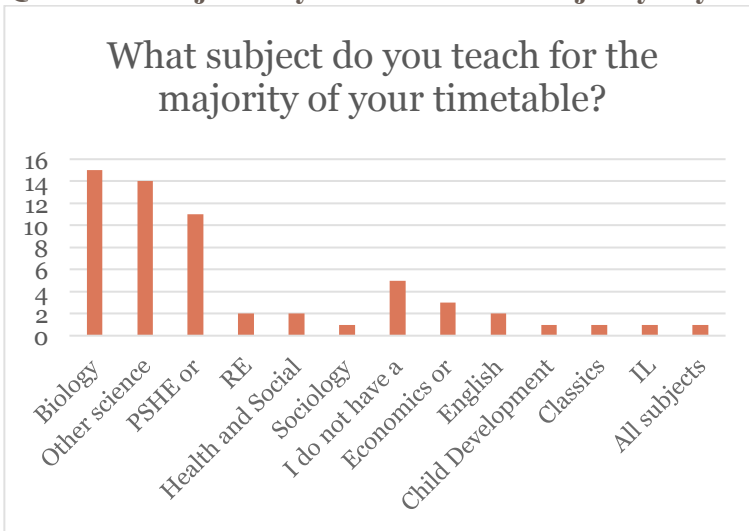
There were 53 responses to this question.

Q7: What is your gender?



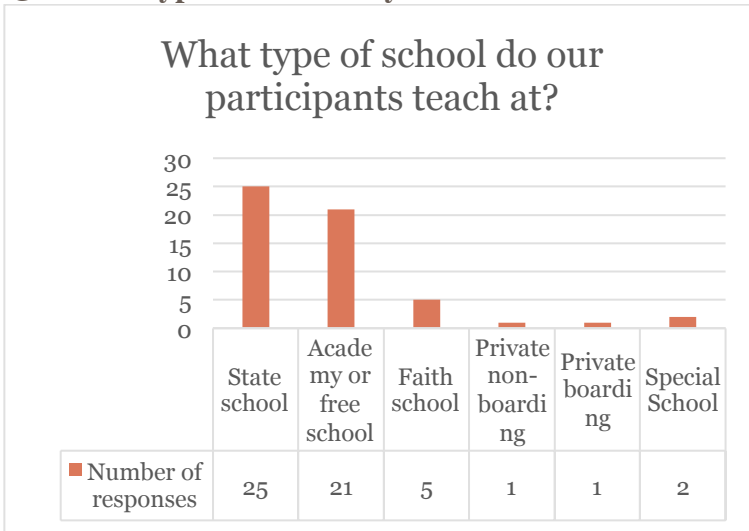
There were 53 responses to this question.

Q8: What subject do you teach for the majority of your timetable?



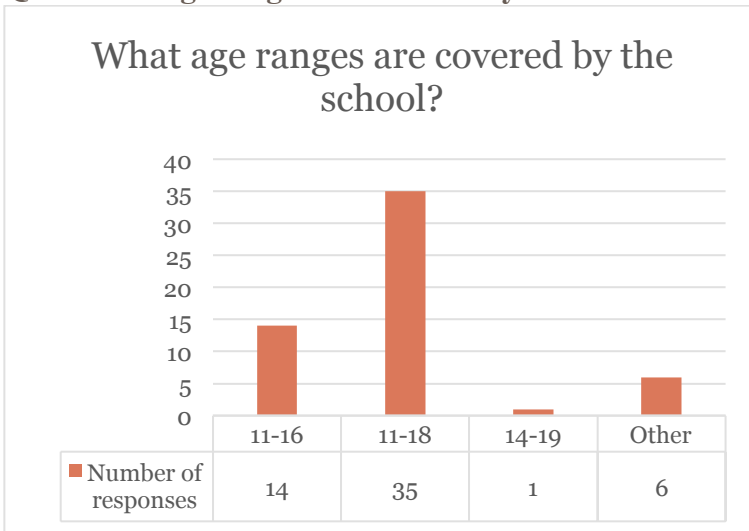
There were 54 responses to this question. The total will add to 59 because some respondents said they taught more than one subject for the majority of their timetable. It is not clear what IL stands for but this respondent filled out a text response.

Q9: What type of school do you teach at?



There were a total of 55 responses to this question.

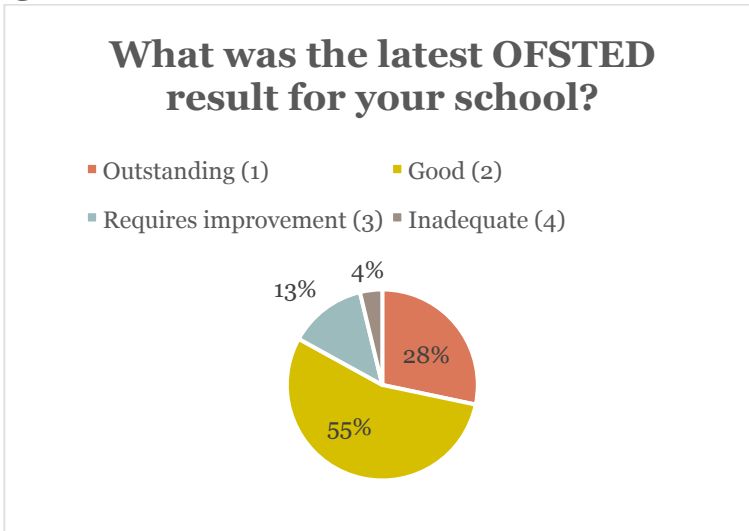
Q10: What age ranges are covered by the school?



There were a total of 56 responses to this question. Other responses were:

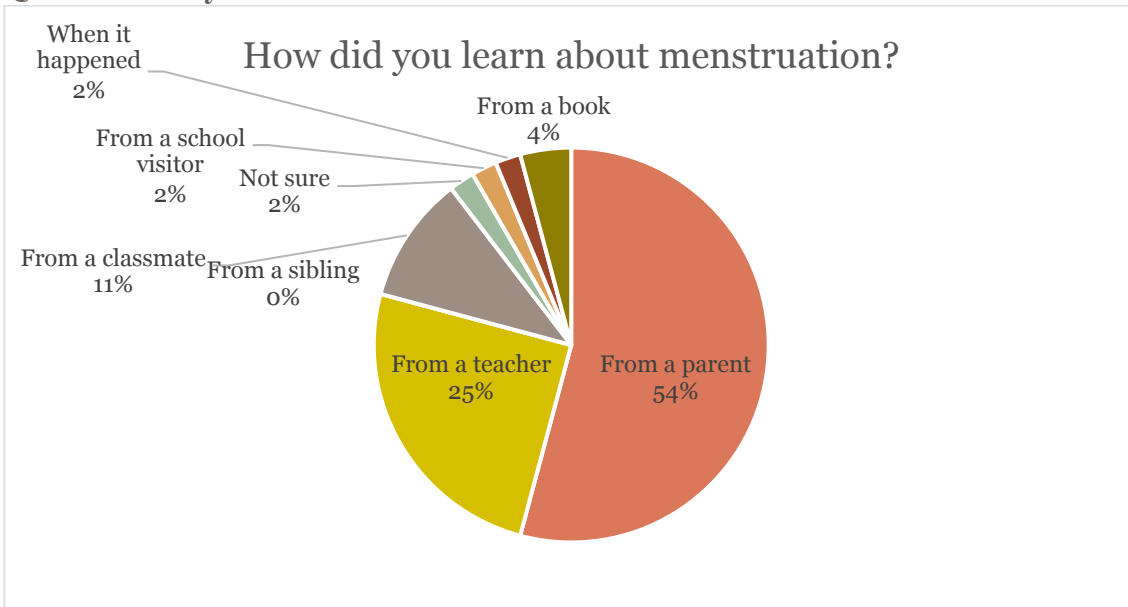
- 3-19
- 8-18
- 3-16
- 11-13
- 2-19
- 2.5-19

Q11: What was the latest OFSTED result for the school?



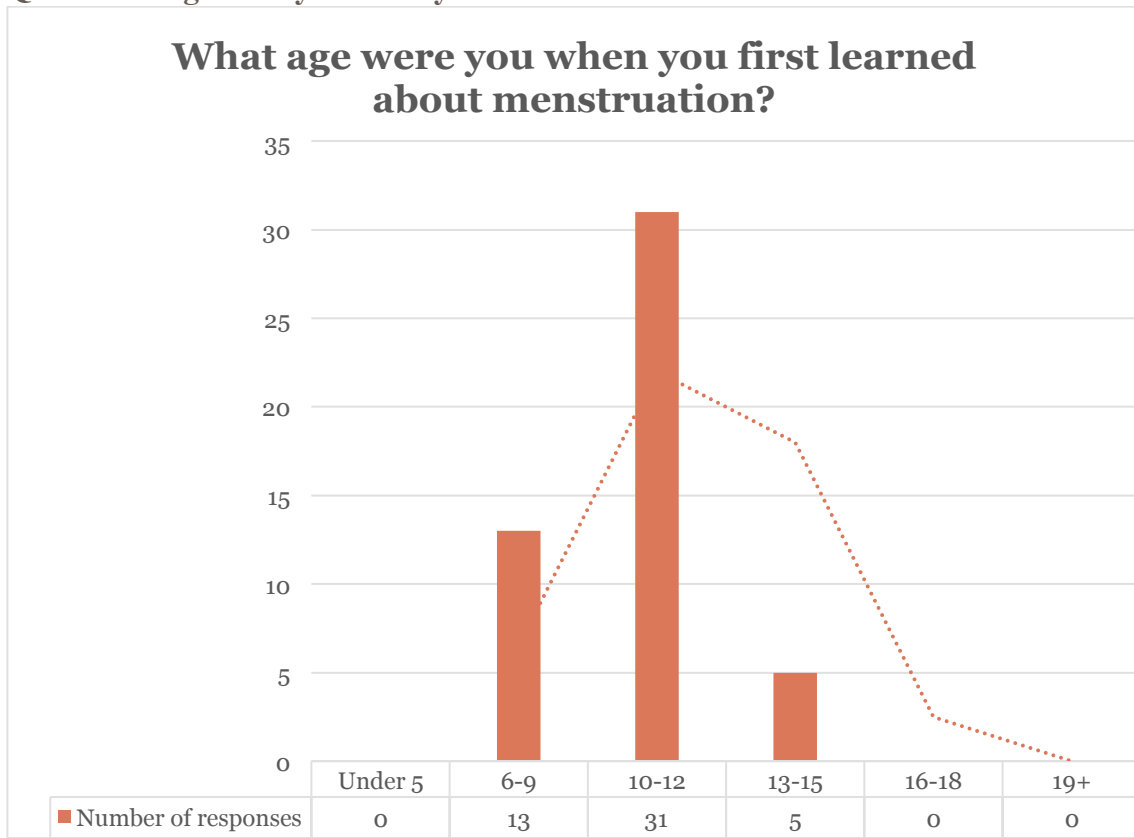
There were a total of 53 responses to this question.

Q12: How did you first learn about menstruation?



There were a total of 48 responses to this question.

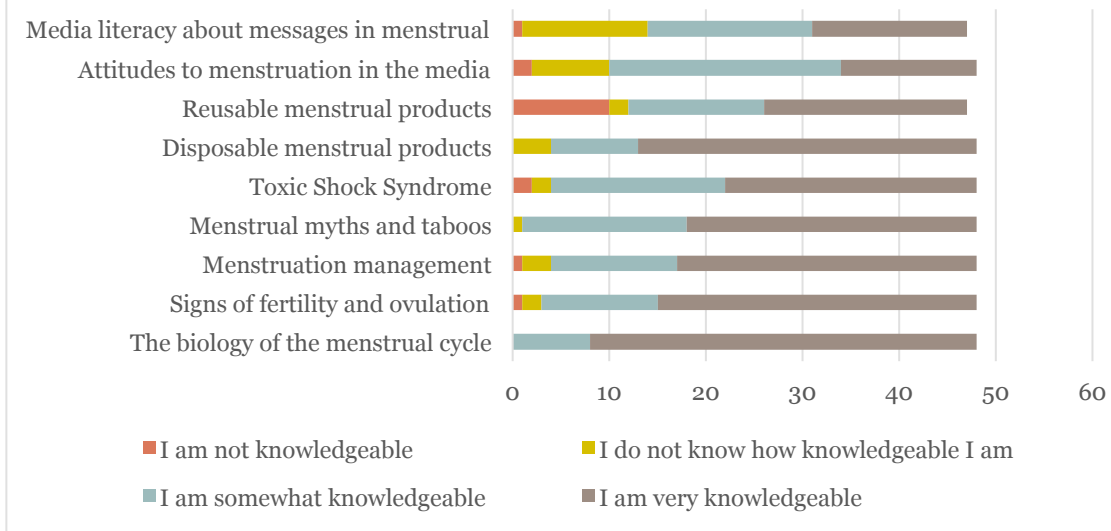
Q13: What age were you when you first learned about menstruation?



There were a total 49 responses to this question.

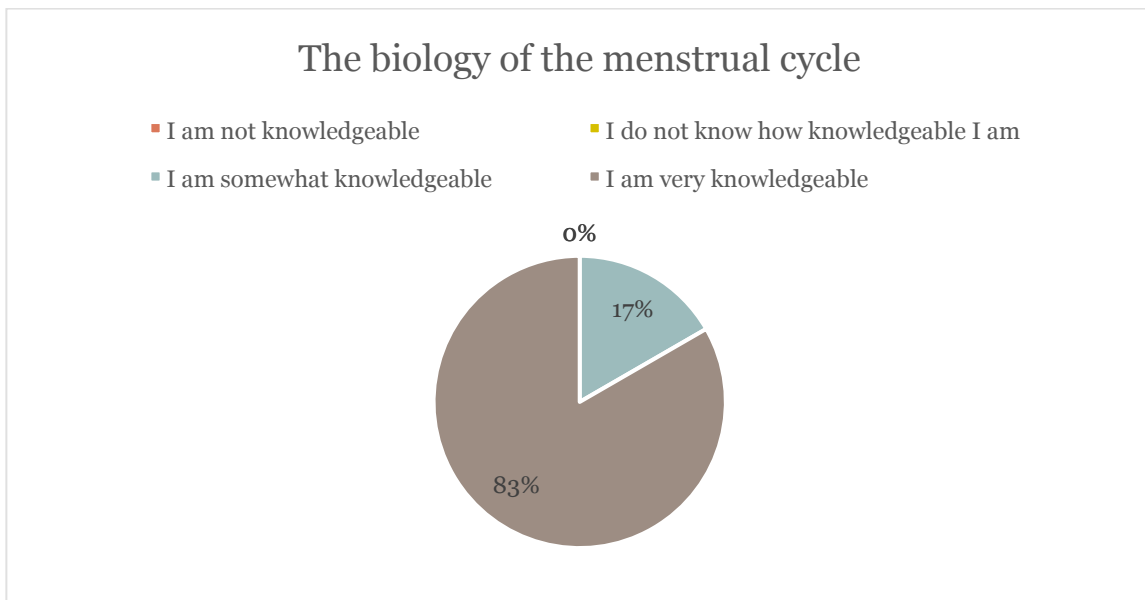
Q14: Please rate your own knowledge of the following aspects of menstrual education:

How knowledgeable do teachers feel about different areas of menstrual education



There were 48 responses to this question. It is worth noting the difference in how knowledgeable teachers feel about different aspects of menstrual education.

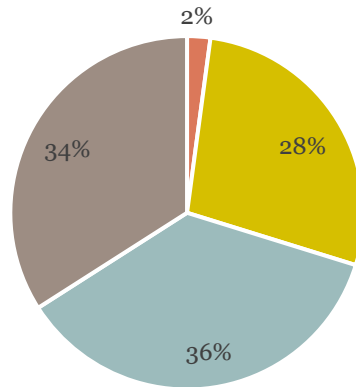
This chart shows knowledge of the biology of the menstrual cycle, the area teachers were most knowledgeable about:



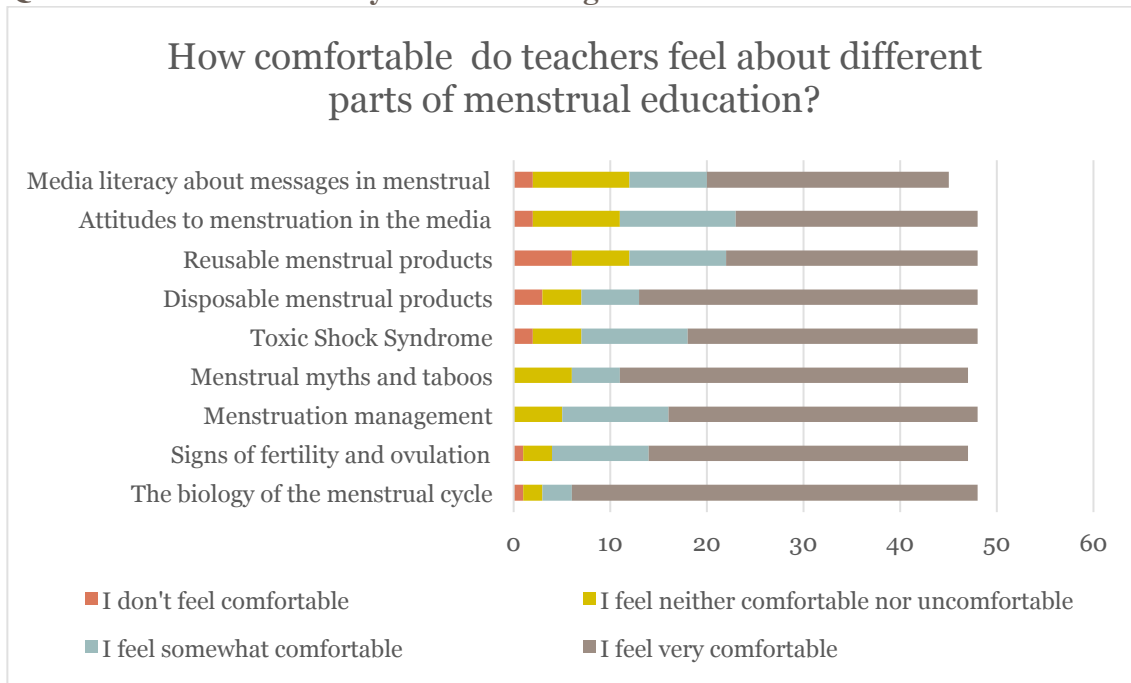
In contrast, on the subject of media literacy about messaging in menstrual product advertising and packaging, only 34% of respondents said they were very knowledgeable.

Media literacy about messages in menstrual product advertising and packaging

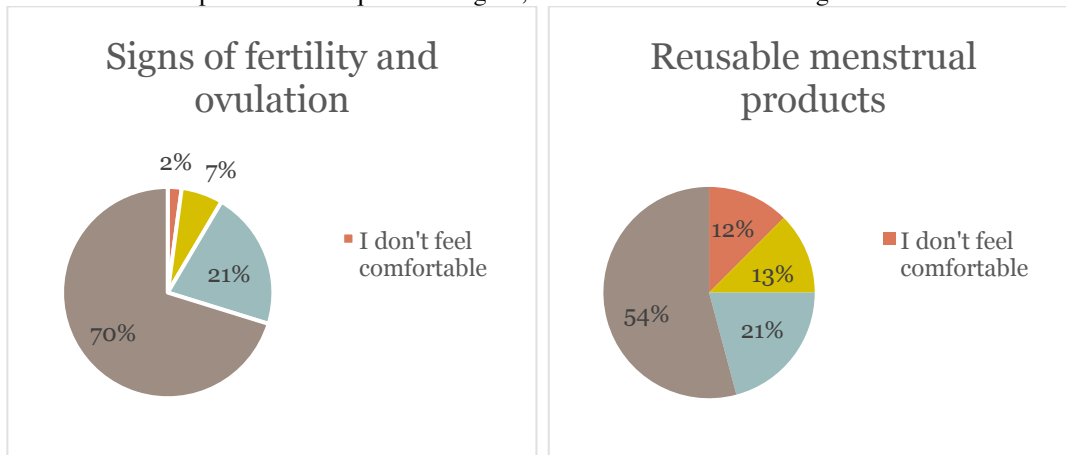
- I am not knowledgeable
- I do not know how knowledgeable I am
- I am somewhat knowledgeable
- I am very knowledgeable



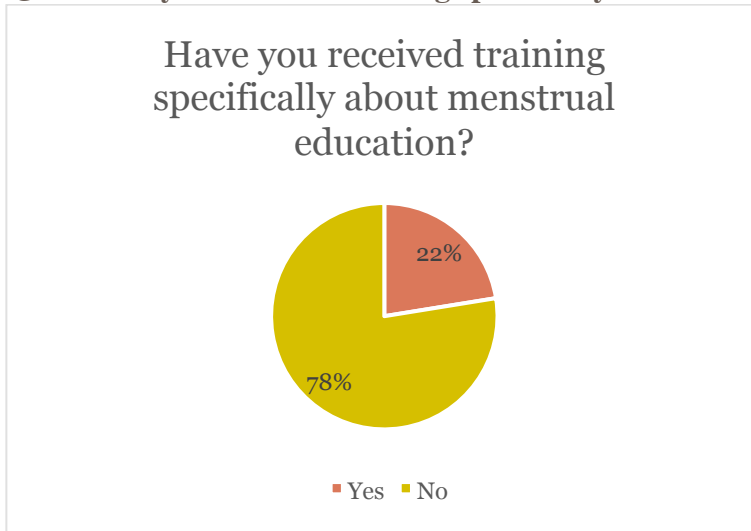
Q15: How comfortable do you feel teaching each of these areas?



There were 49 responses to this question. Again, we can see variation among the answers:



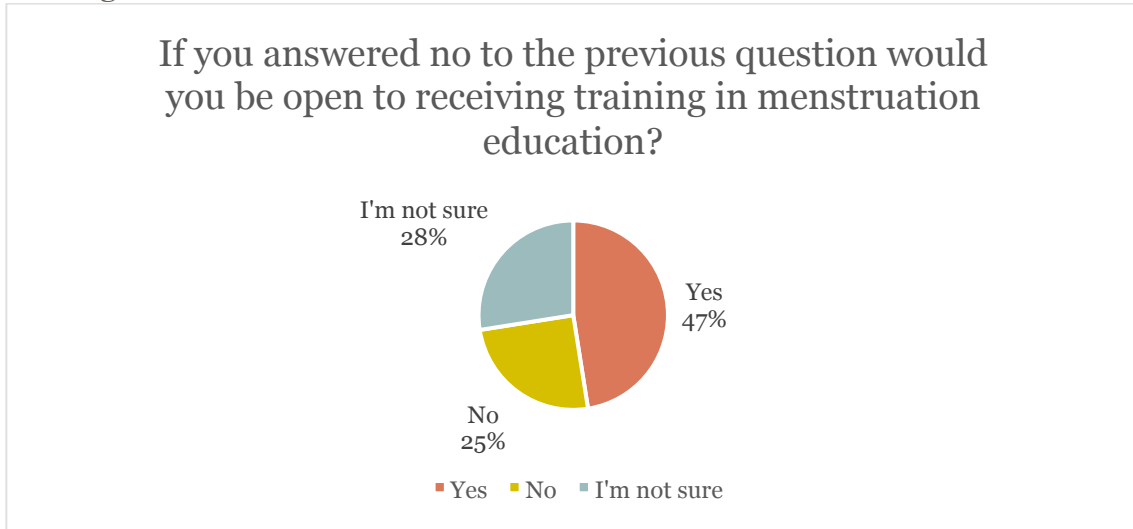
Q16: Have you received training specifically about menstruation education?



There were 49 responses to this question. There were several comments:

- During my teacher training - Sheffield centre for HIV and Sexual Health
- Courses run by Sexual Health Services in Sheffield
- worked with Chella as part of the gender respect project to plan lessons about menstruation.
- Science teacher initially, science degree. Also lots self taught stuff n research
- CPD - in house PSHE
- Myth-busting pregnancy before/during/after period. Comes bundled with STI stuff in PSHE
- erm....I was a GP before entering teaching!
- Pubert and ASD

Q17: If you answered 'No' to the previous question, would you be open to receiving training in menstruation education?

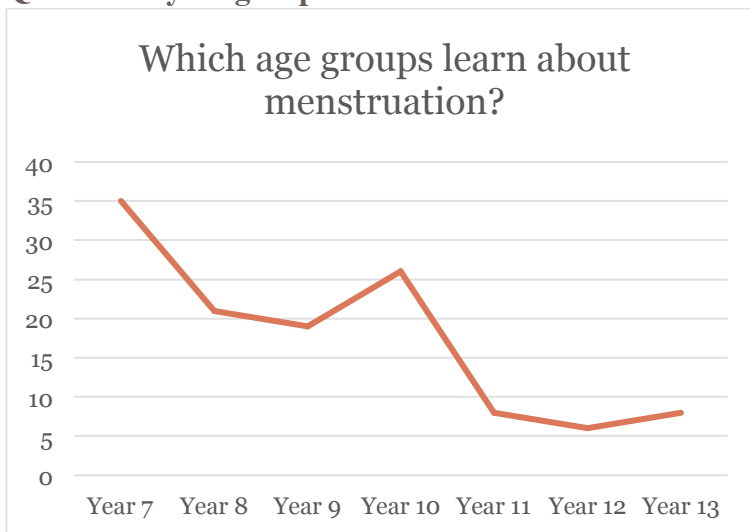


There were 40 responses to this question.

There were two comments:

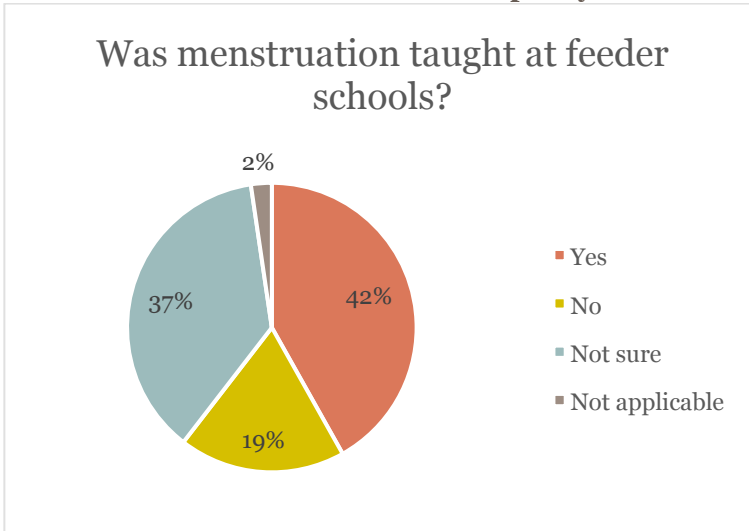
- I co-ordinate some aspects of PSHE/SMSC, I don't deliver much.
- Currently only teach it in KS3 biology, would be open to more training if pshe class timetabled.

Q18: What year groups learn about menstruation?



There were multiple answers from many of the 49 participants, because we allowed teachers to tick all that applied.

Q19: Are you aware of whether menstruation education is delivered prior to Year 7 at local feeder schools and in what capacity?

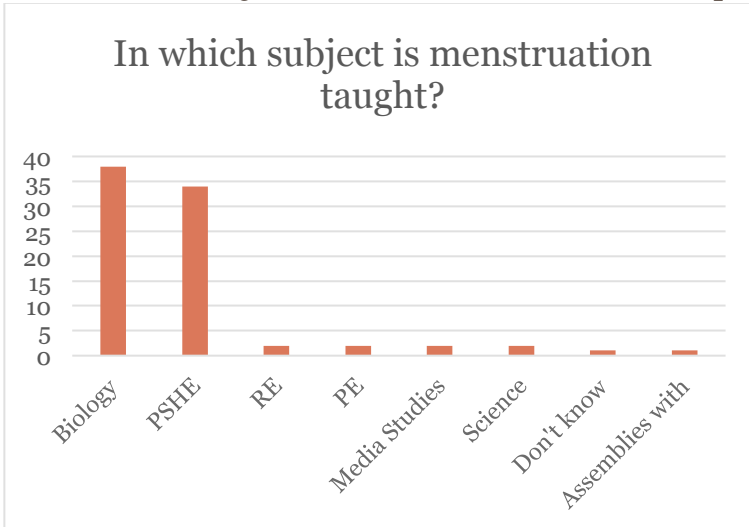


There were 43 responses to this question. The not applicable response arose because the school began to take in students at age 3 and therefore there were no feeder schools.

Comments included:

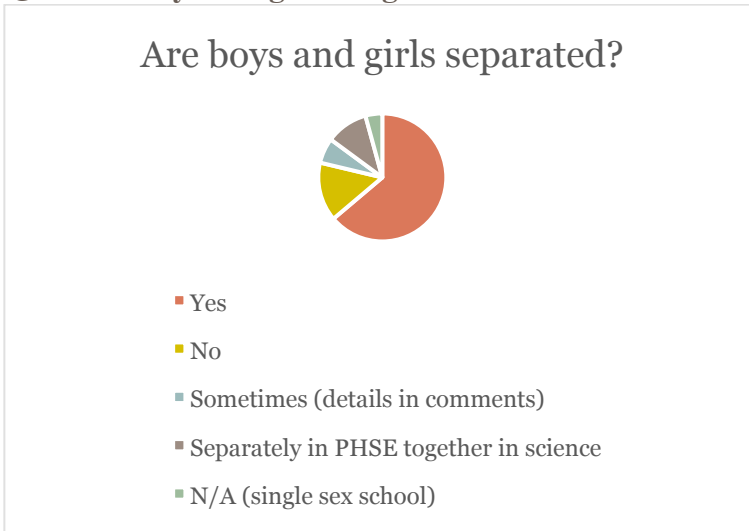
- Students tell me that they have been given 'the puberty talk' at primary schools but often they are split into boy/ girl groups.
- This is very inconsistent
- Some do some don't
- Done by the school nurse team in year 5 and then again in year 6

Q20: In what subject area is menstruation covered (please tick all that apply)?



There were 40 respondents to this question, and, once again, many suggested that menstruation was taught across a variety of subjects.

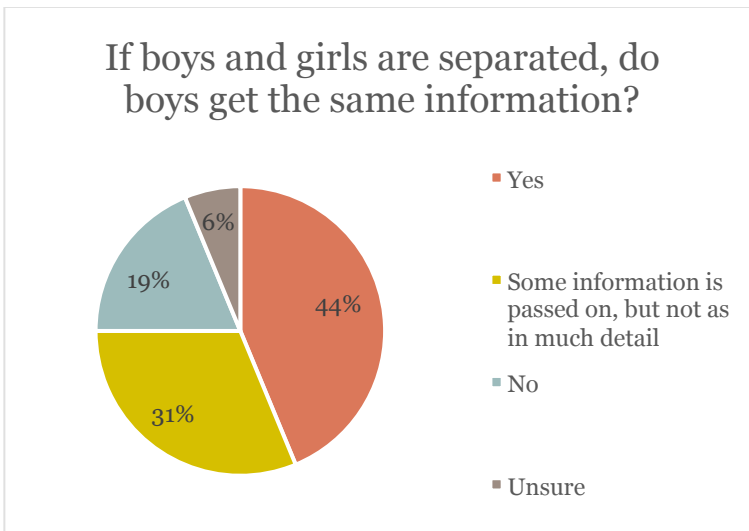
Q21: Are boys and girls taught in the same class?



There were 47 responses to this question. There were comments:

- Biology together, phse separate
- Unsure about non science lesson but science has both girls and boys at all key stages
- always! I think this is really important.
- Science deliver in mixed classes, specific 'periods and wet dreams' PSHE is delivered gender-split
- Together in Science only.

Q22: If boys and girls are separated for lessons on menstruation, are boys taught the same information/resources?

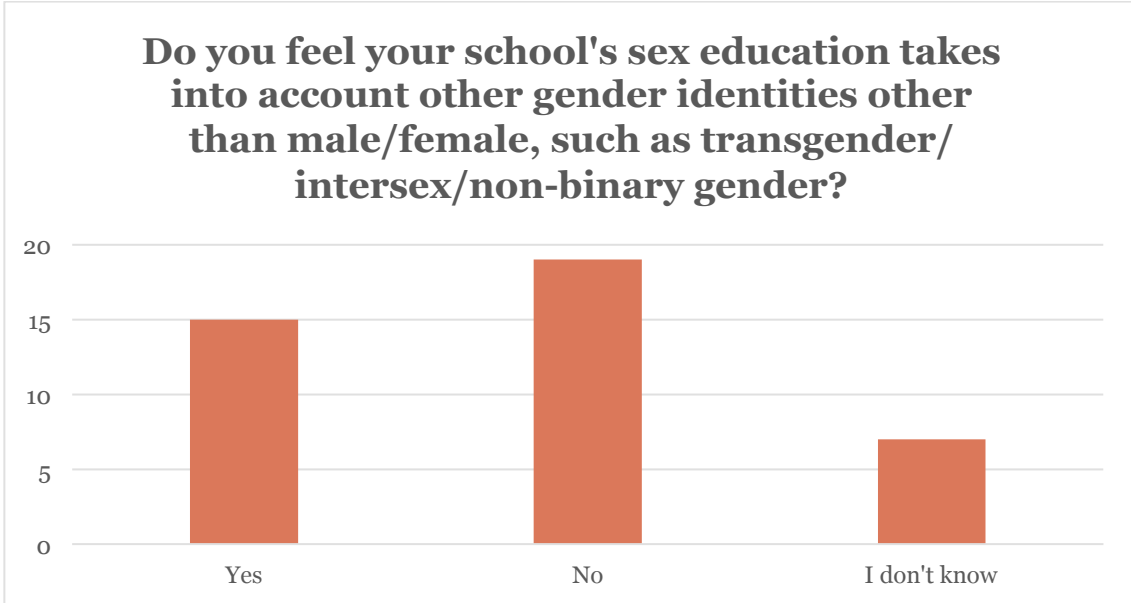


There were 16 responses to this question. N/A responses were removed.

There was one comment:

- some at risk and vulnerable female pupils participate in a program of extra reproductive health education to prevent exploitation and teen pregnancy

Q23: Do you feel your school's sexual education takes into account other gender identities other than male/female, such as transgender/intersex/non-binary gender?

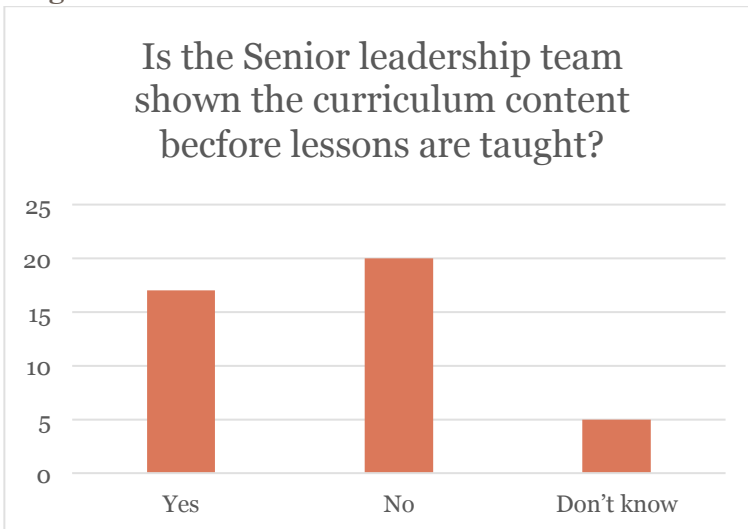


There were 41 responses to this question.

The following comments were received:

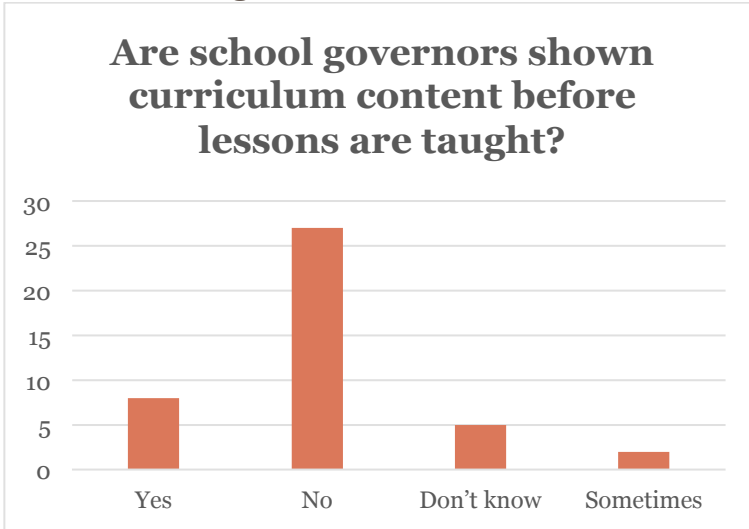
- This is done throughout all year groups in every unit
- I don't feel we are as inclusive as I would like though.
- I vaguely recall nineteen-year-olds fumbling with Judith Butler at university, so I doubt it's a subject that children could manage.

Q24: Is the senior leadership team shown curriculum content before lessons are taught?



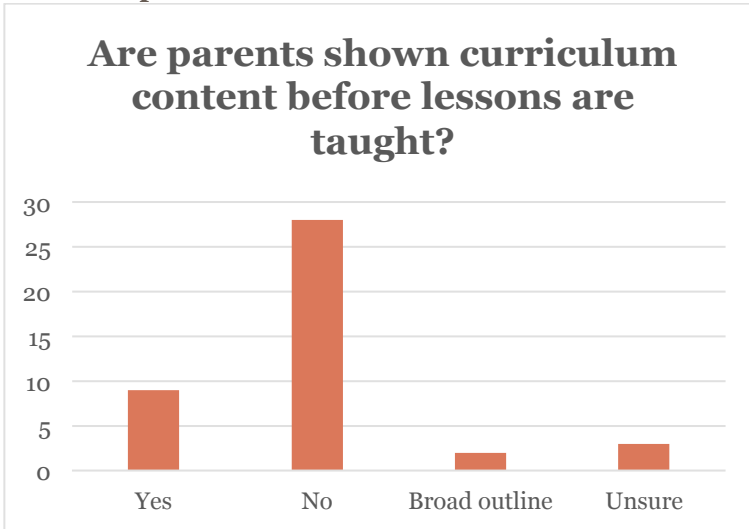
There were 42 responses to this question.

Q25: Are school governors shown curriculum content before lessons are taught?



There were 42 responses to this question.

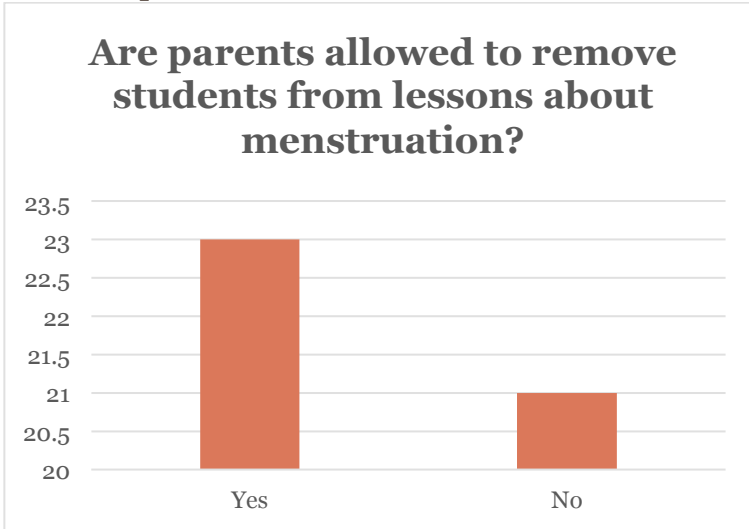
Q26: Are parents shown curriculum content before lessons are taught?



There were 42 responses to this question. The comments included:

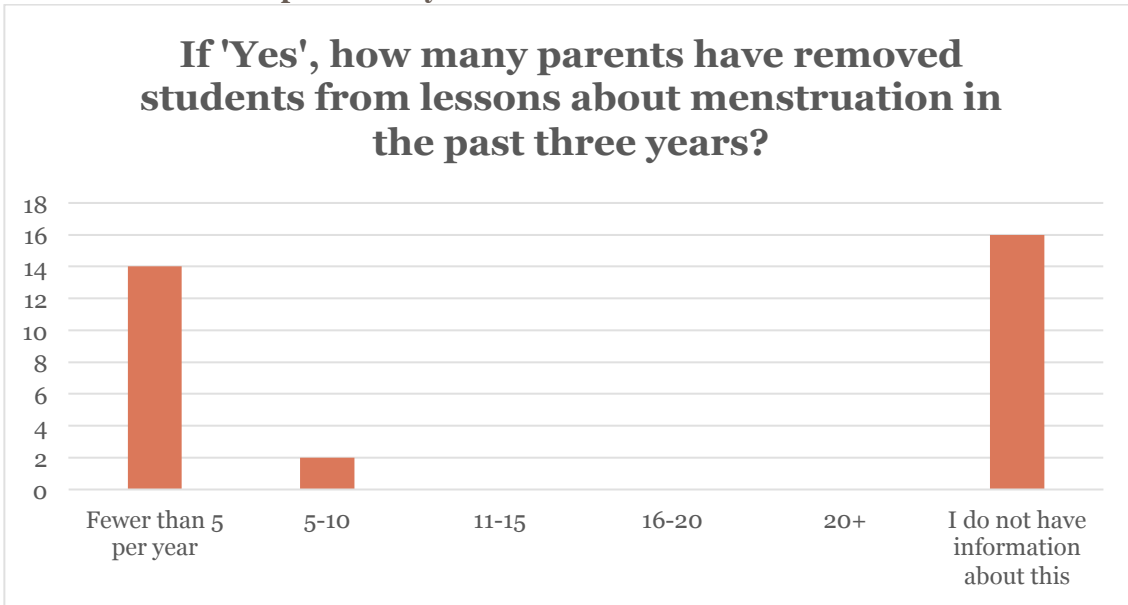
- Curriculum is available on the school website
- Via open days plus online info
- Outline only
- parents are given a brief outline of all sex ed topics we cover and when.

Q27: Are parents allowed to remove students from lessons about menstruation?



There were 44 responses to this question.

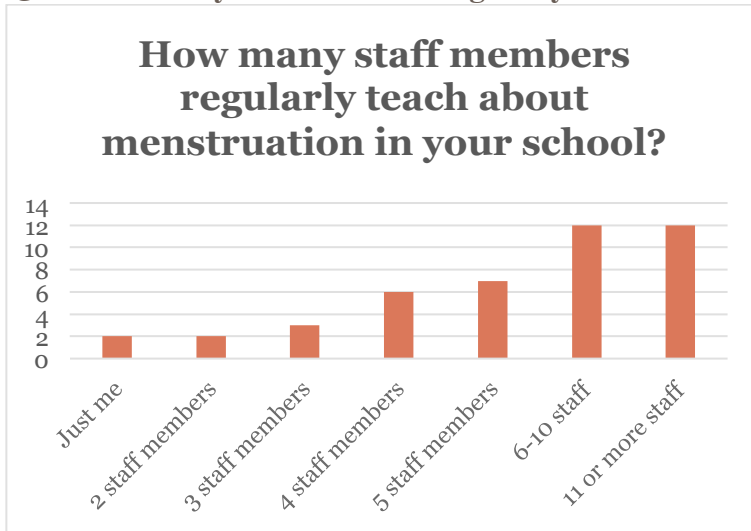
Q28: If 'Yes', how many parents have removed students from lessons about menstruation in the past three years?



There were 31 responses to this question. The comments are indicative that this is uncommon:

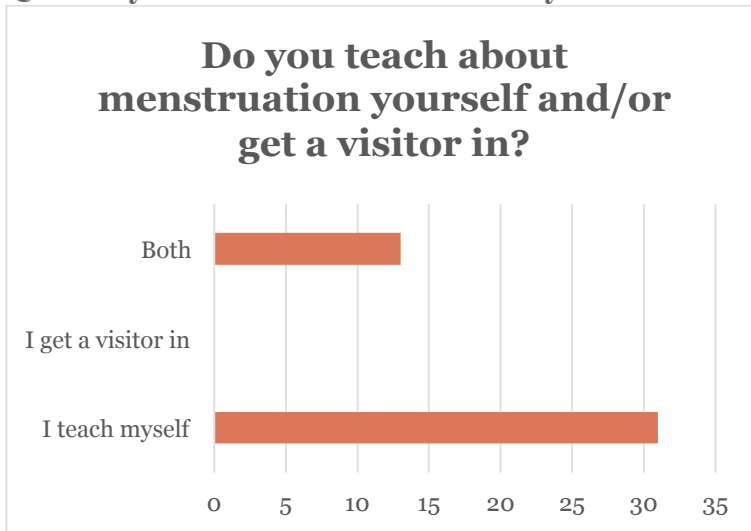
- None have been removed.
- 2 - when the children were removed this was due to SEN to ensure they fully understood. They were taught the info individually.
- none.

Q29: How many staff members regularly teach about menstruation in your school?



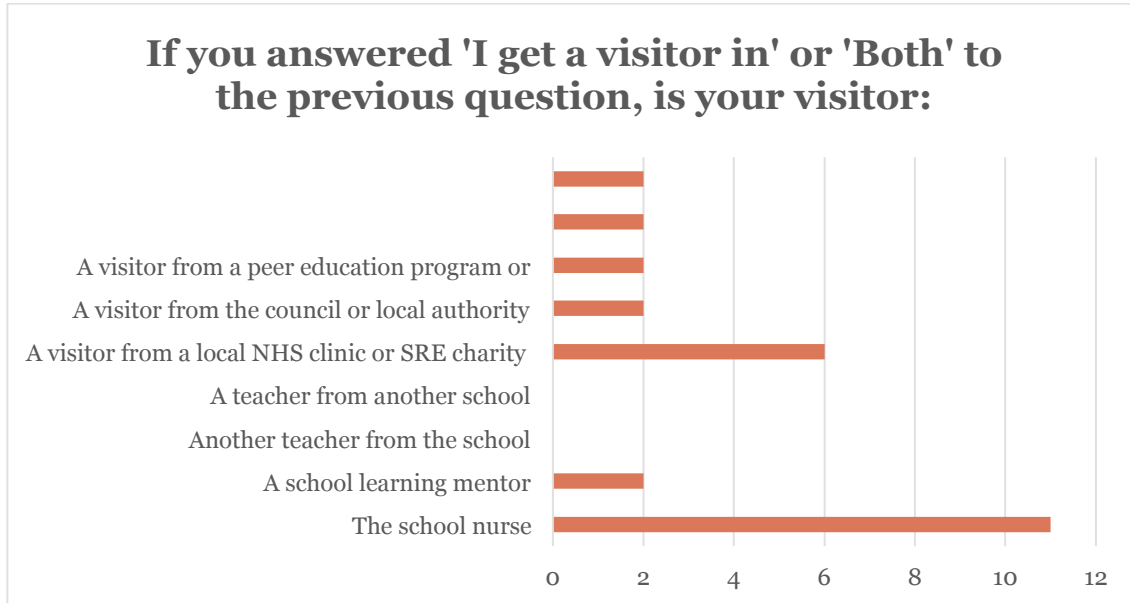
There were 44 responses to this question.

Q30: Do you teach about menstruation yourself and/or get a visitor in?



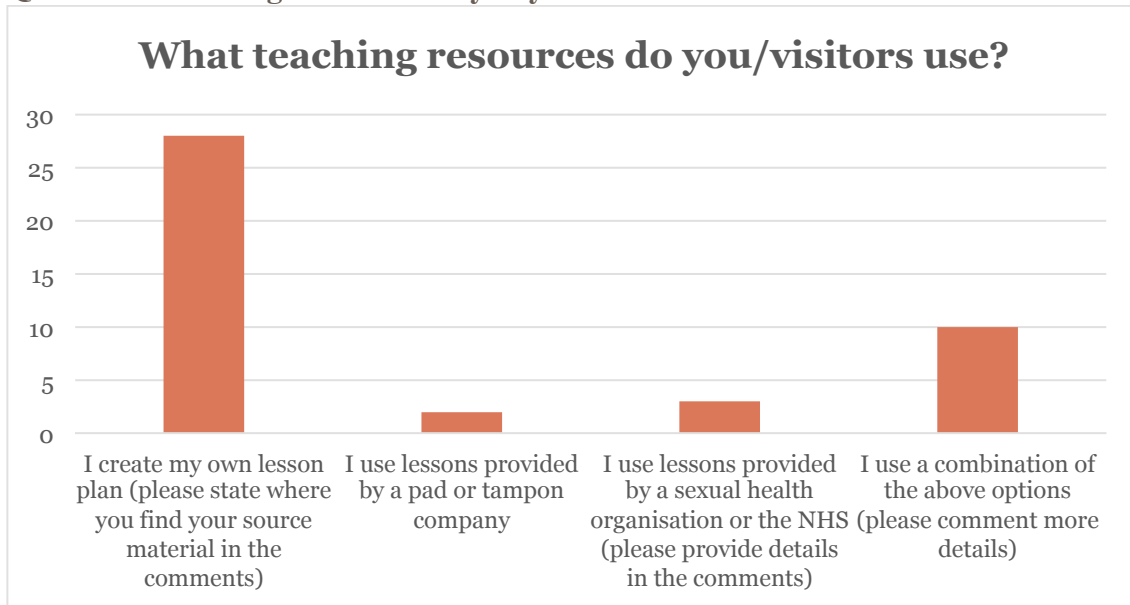
There were 44 responses to this question. There was also one comment: "It is addressed during Science lessons and a speaker comes in for PSHE lessons."

Q31: If you answered 'I get a visitor in' or 'Both' to the previous question, is your visitor?



There were 43 responses to this question. There were two comments. The first specified that the visitor was 'Sexpression' and the second that "Some more in-depth SRE, which can include menstruation, has been delivered by youth workers".

Q32: What teaching resources do you/your visitors use?



There were 43 responses to this question. Comments included:

- Tes, nhs
- Google
- I create them myself based on n.c. And pupils needs
- own knowledge, TES, online sites,

- PSHE lesson resources are shared between staff.
- in-house produced worksheets on the biology/hormones involved in the menstrual cycle
- I teach the menstrual cycle in the context of core science / Biology lessons, using various resources (existing & then modified, and created by me)
- I use the always materials, but I adapt them for my SEN groups that I work with.
- nhs, books, leaflets from GP
- Exploring science
- School lesson plans
- Previous lessons I have created and information from TES
- Biology sow
- Mianly text books and scheme of work, as it is on the national curriculum.
- Resources from fpa, brook
- worked with Chella to produce resources, my own knowledge.
- Lesson plans written by science team or pshe leader
- I get a lot of information from NHS, School nurses and TES
- I create my own source material
- Science is delivered as per national curriculum requirements, PHSE/SRE is more bespoke, based on understanding level of cohorts, and any additional needs.
- Combination of the above are used to plan outstanding lessons that meet the needs of our students
- Lessons tailored to the students needs, adapted resources to meet needs.

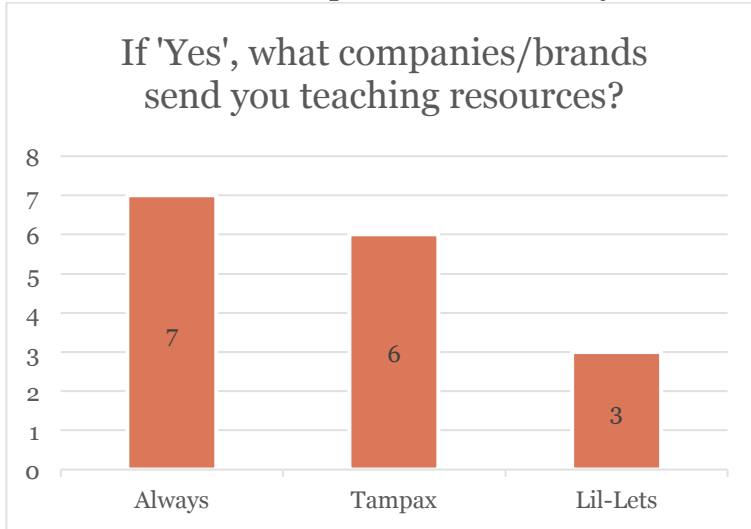
Q33: Do you receive any teaching resources from companies or advertisers (whether you use them or not)?



There were 38 responses to this question.

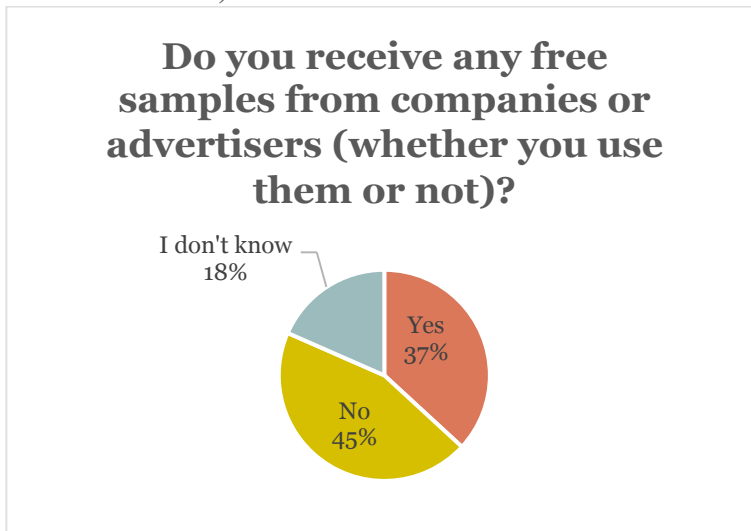
One respondent specified that they received “sanitary samples for girls, leaflets for boys” while another commented “not now, we requested to not be sent them” and stated that when they used to receive them, the companies responsible were “Always and Tampax”.

Q34: If 'Yes', what companies/brands send you teaching resources?



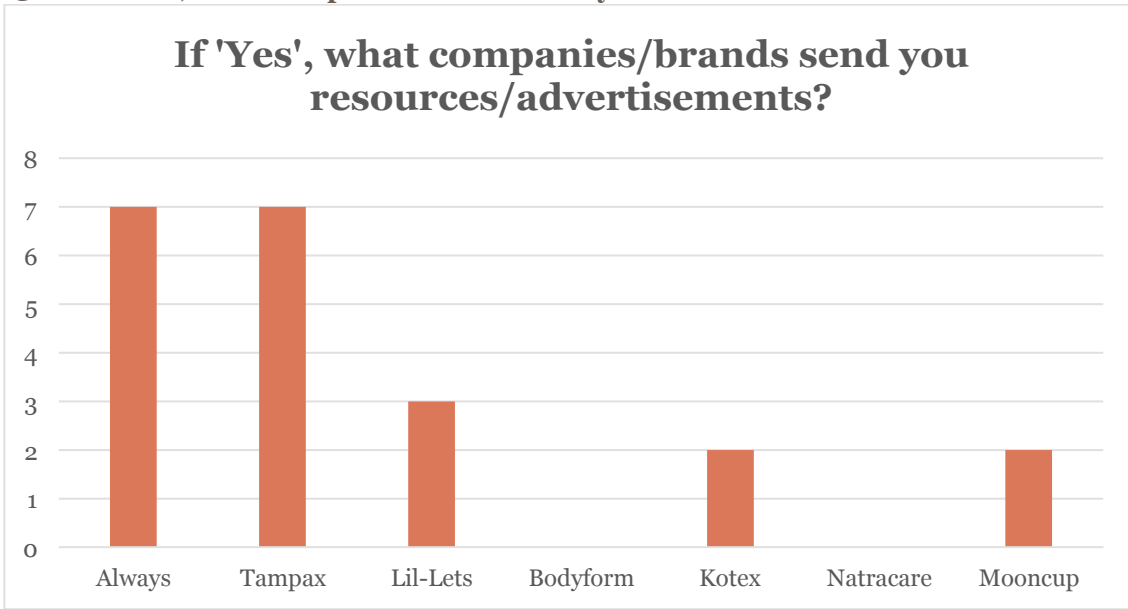
There were 13 responses to this question.

Q35: Do you receive any free samples from companies or advertisers (whether you use them or not)?



There were 38 responses to this question. The comments included:
“I requested a sample Mooncup and a sample cloth pad from Angelpadz”
“Unfortunately they have stopped providing them”

Q36: If 'Yes', what companies/brands send you resources/advertisements?



There were 17 responses. There was one comment:

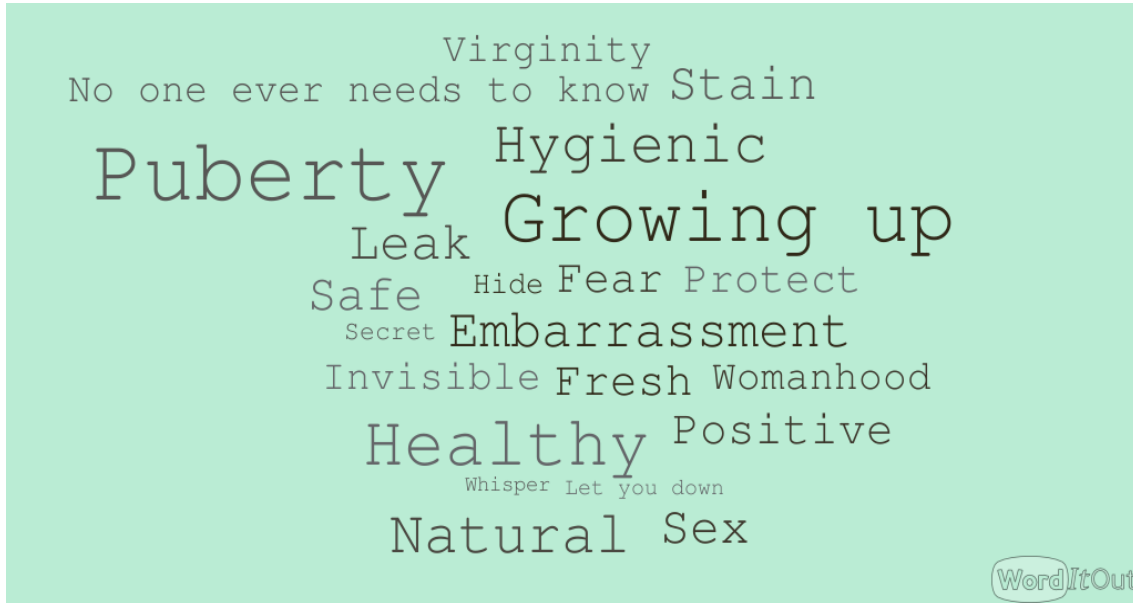
“I think we get sent free sample packs for girls from local health trust for all yr 7”.

Q37: Which of the following products do you teach about?



4 respondents commented that they only taught from a biological perspective so did not refer to products. There were 32 respondents in total.

Q38: Do any of your teaching resources use any of these words when teaching about menstruation?



This word cloud illustrates the words used, weighted by the frequency.

Q39: Has this questionnaire raised any issues or brought up any comments or questions you'd like to share or ask?

There was the following comment:

“no - tbh, the amount of time dedicated to this in a bog standard secondary school is tiny with the rest of the curriculum demands. All resources that have been sent by companies, etc. seem to be for 5 or 6 lessons which is completely unreasonable. I wish we could spend longer on it. It really needs to be aimed at Yr 7, and in our school we have 1 or 2 hours, so not much time to fill. This is the biggest problem you will face!”

Q40: Would you be willing to participate in a focus group about this topic?

There were 6 respondents who would be willing to participate in a focus group and one who said it was unlikely due to time commitments but possible.

Q41: Do you have anything else to add?

Comments included:

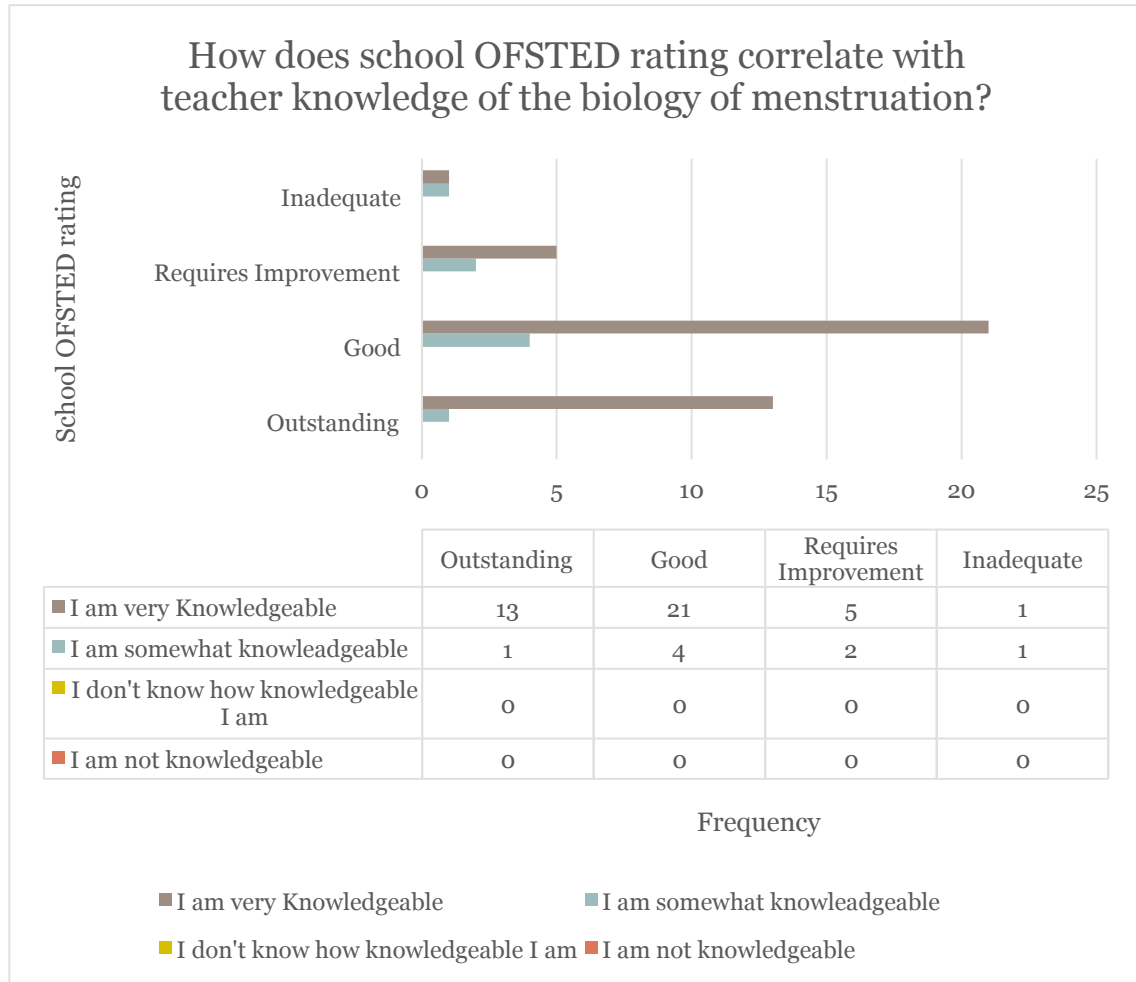
- “Good education is vital in year 5 & 6 and should be compulsory. I advise schools not to mention the option of removing children from these sessions and only to deal with that issue if it arises”
- “It is taught in Science in a very scientific way. Some teachers (including myself) have an anonymous question session. Though the menstrual cycle is not often asked about (maybe because it is in a mixed class). Also, I assume the subject is covered in single sex pastoral lessons with the school nurse, but I am not sure about this.”
- “Having experts in to deliver these topics are always better received by the pupils than when teachers deliver the content.”

Q42: Would you like to be kept up to date with our research and receive a copy of the report?

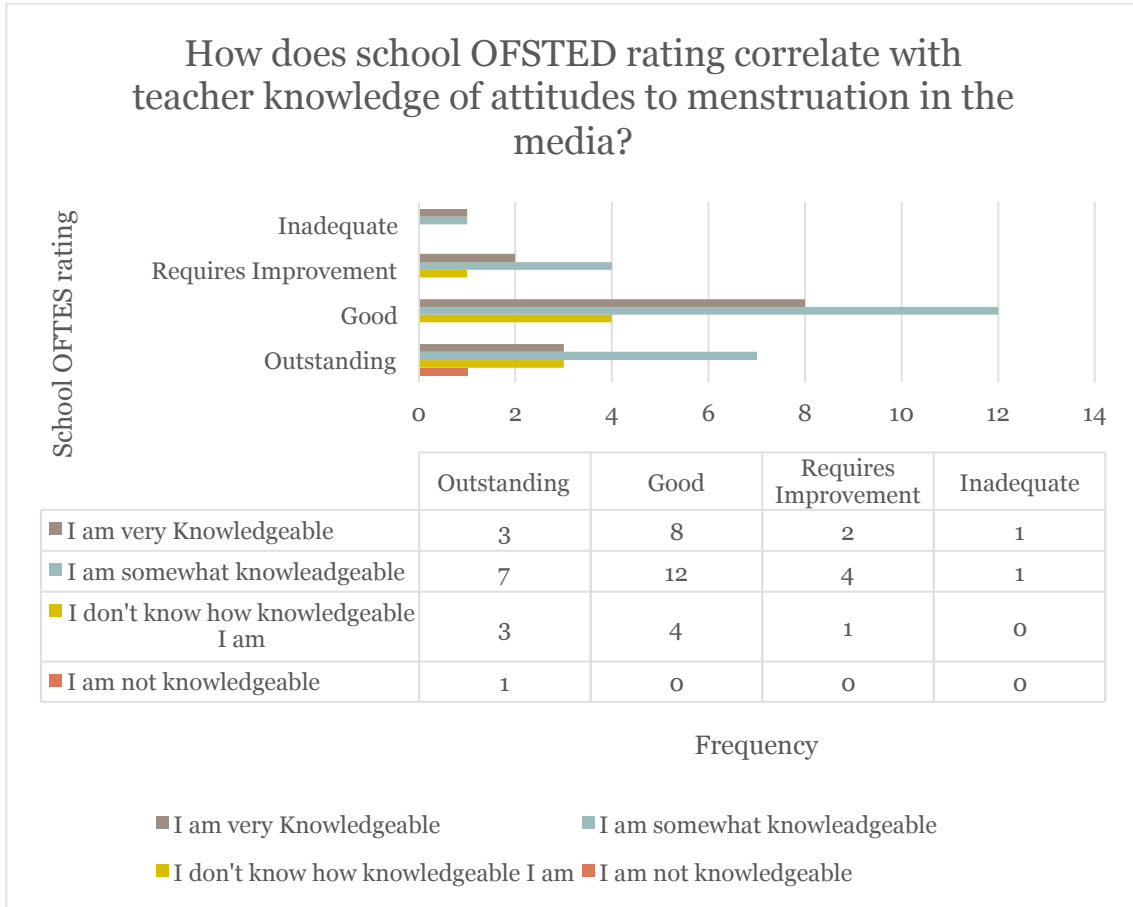
17 respondents said yes. One asked for a final copy of the report but nothing else.

Appendix 2: Cross-Referencing Responses

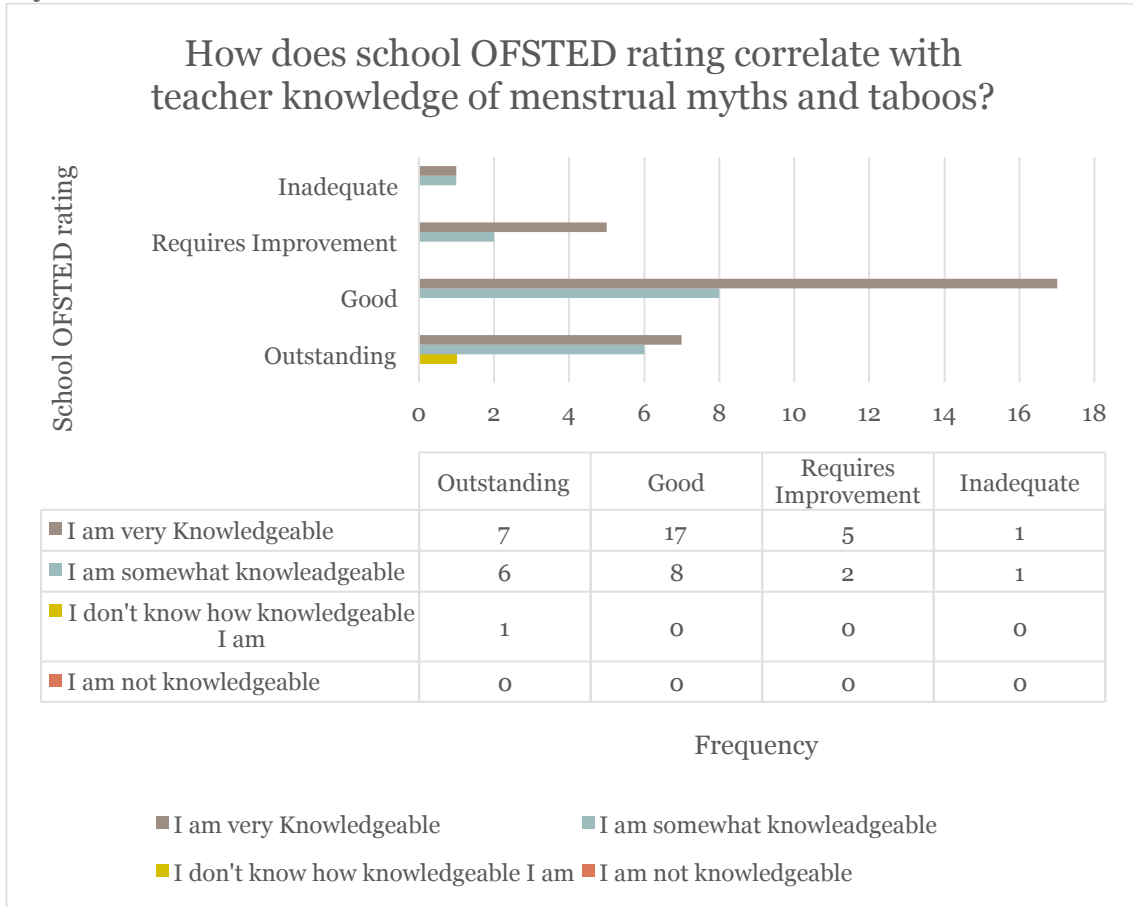
A: How does school OFSTED rating correlate with teacher knowledge of the biology of menstruation?



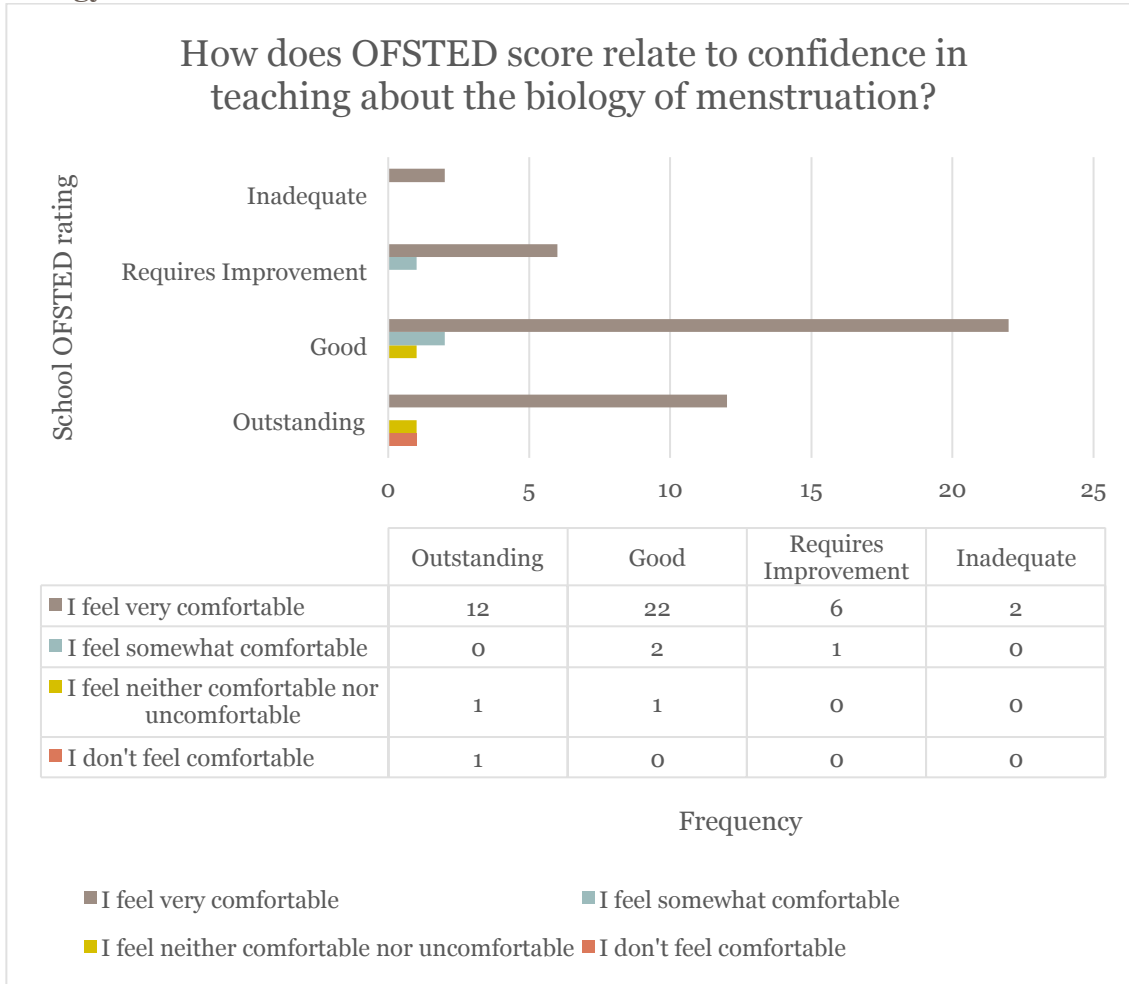
B: How does school OFSTED rating correlate with teacher knowledge of attitudes to menstruation in the media?



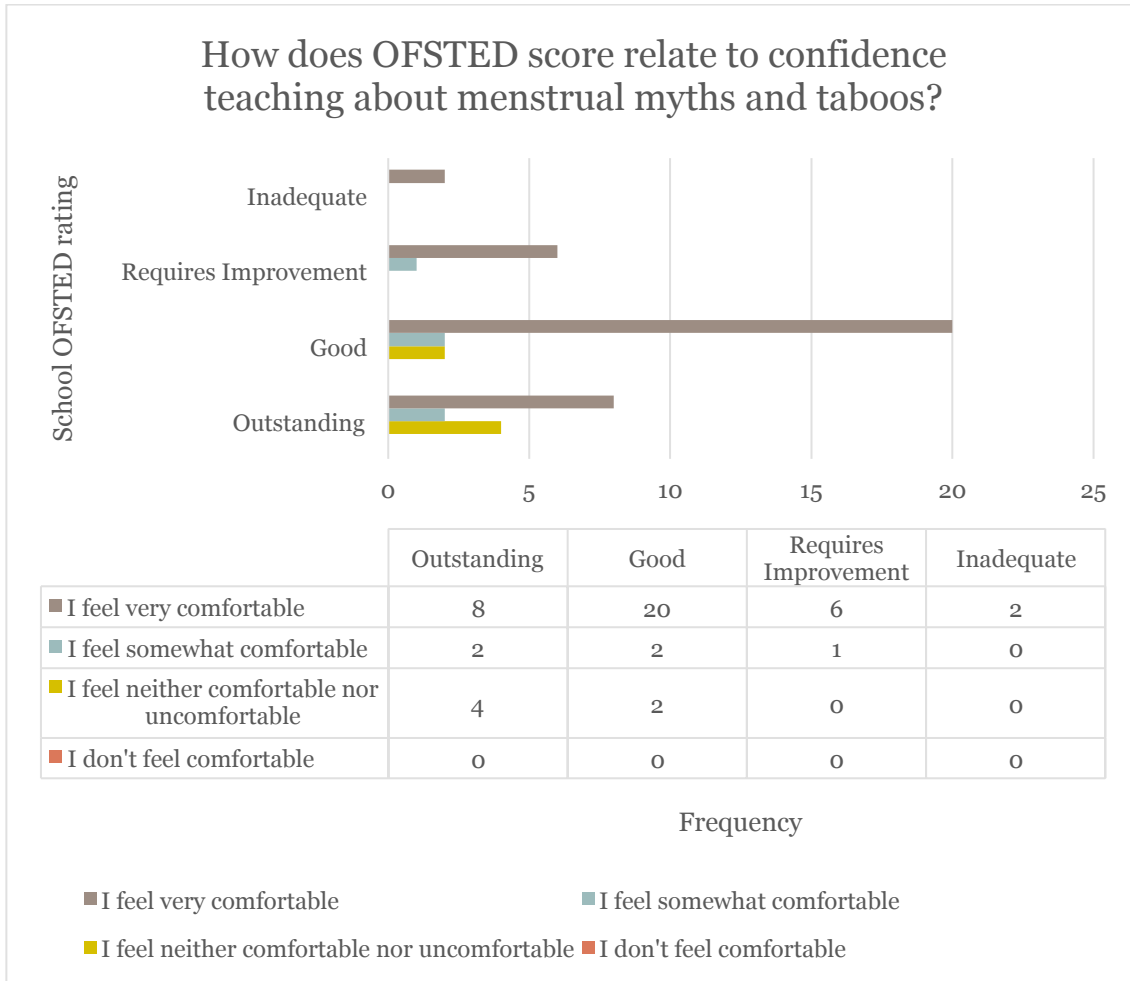
C: How does school OFSTED rating correlate with teacher knowledge of menstrual myths and taboos?



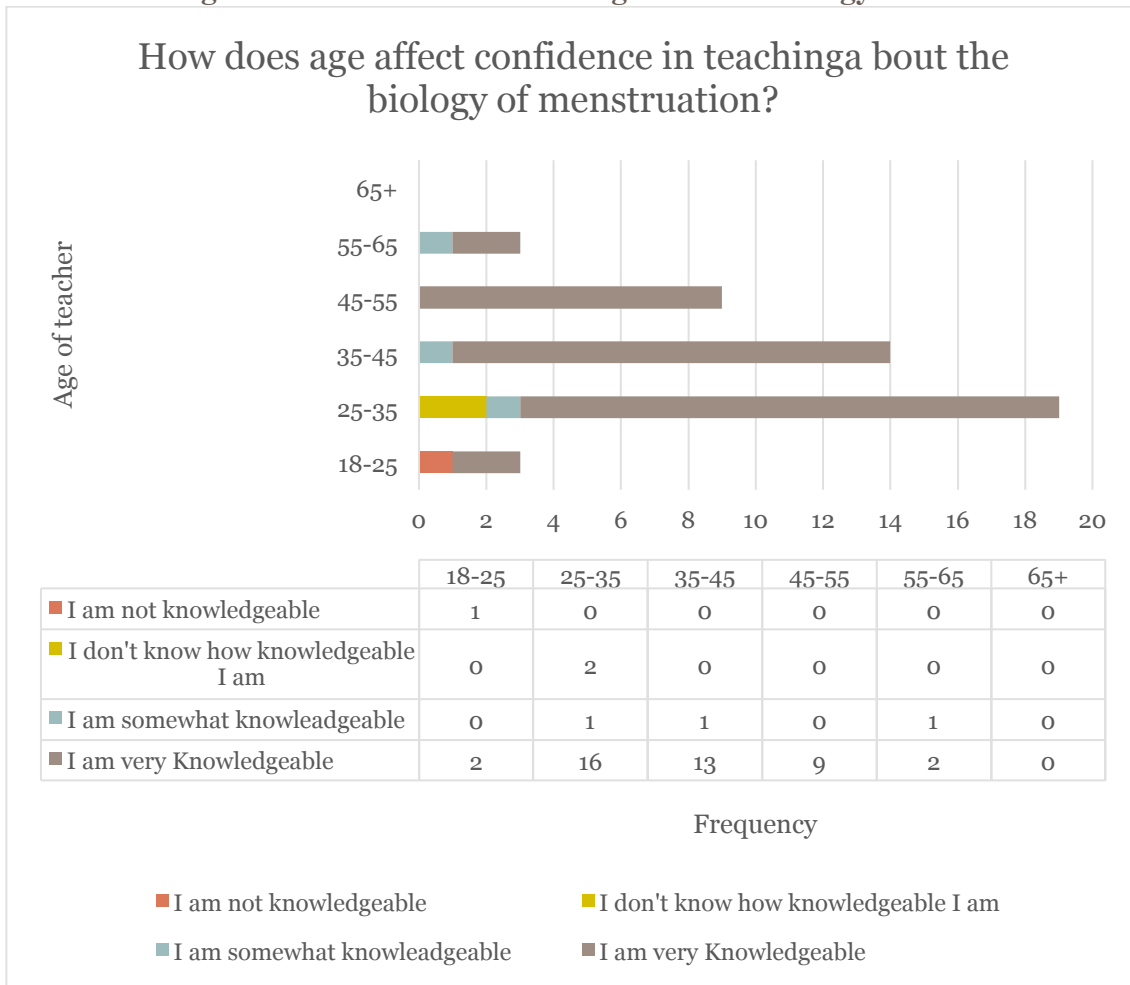
D: How does OFSTED score relate to teacher confidence in teaching about the biology of menstruation?



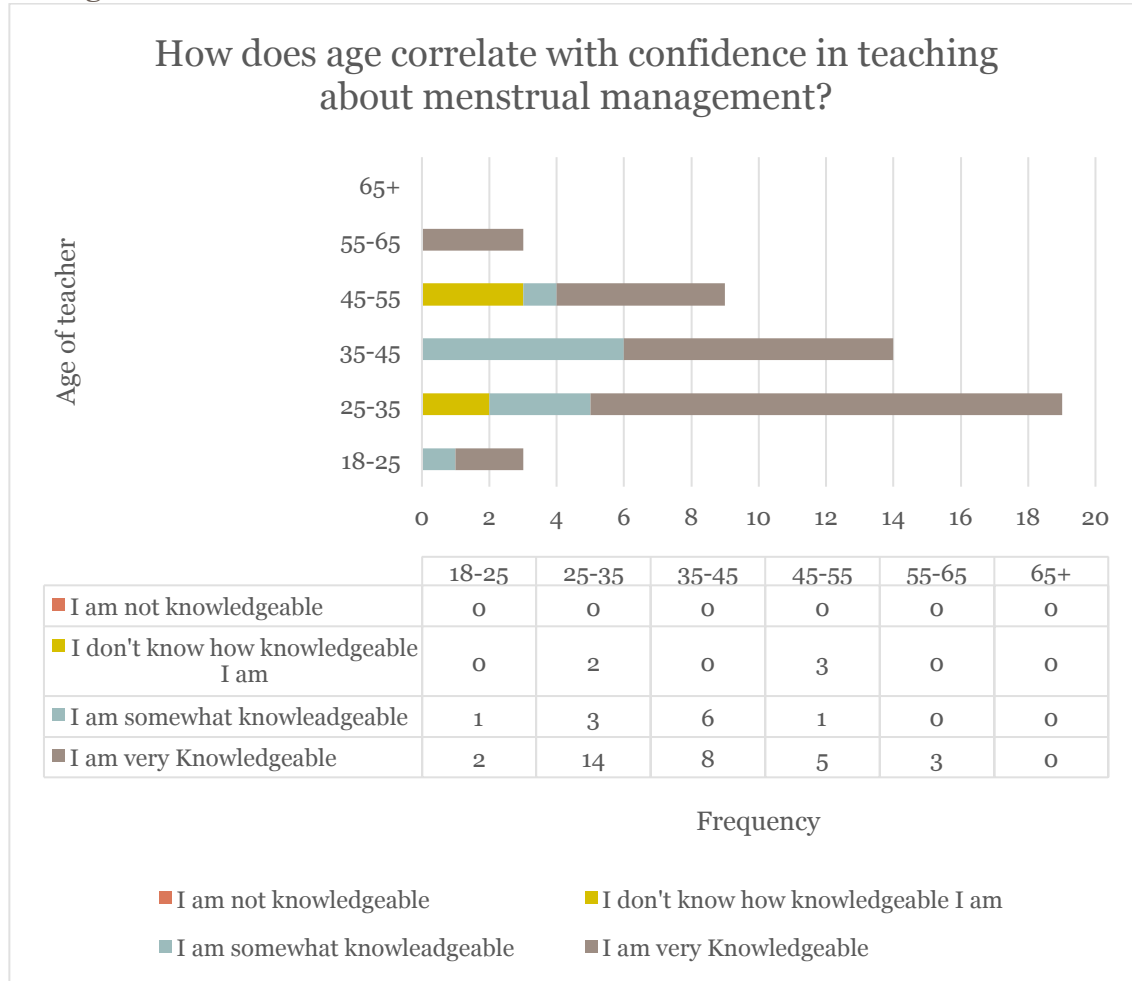
E: How does OFSTED score relate to confidence teaching about menstrual myths and taboos?



F: How does age affect confidence in teaching about the biology of menstruation?

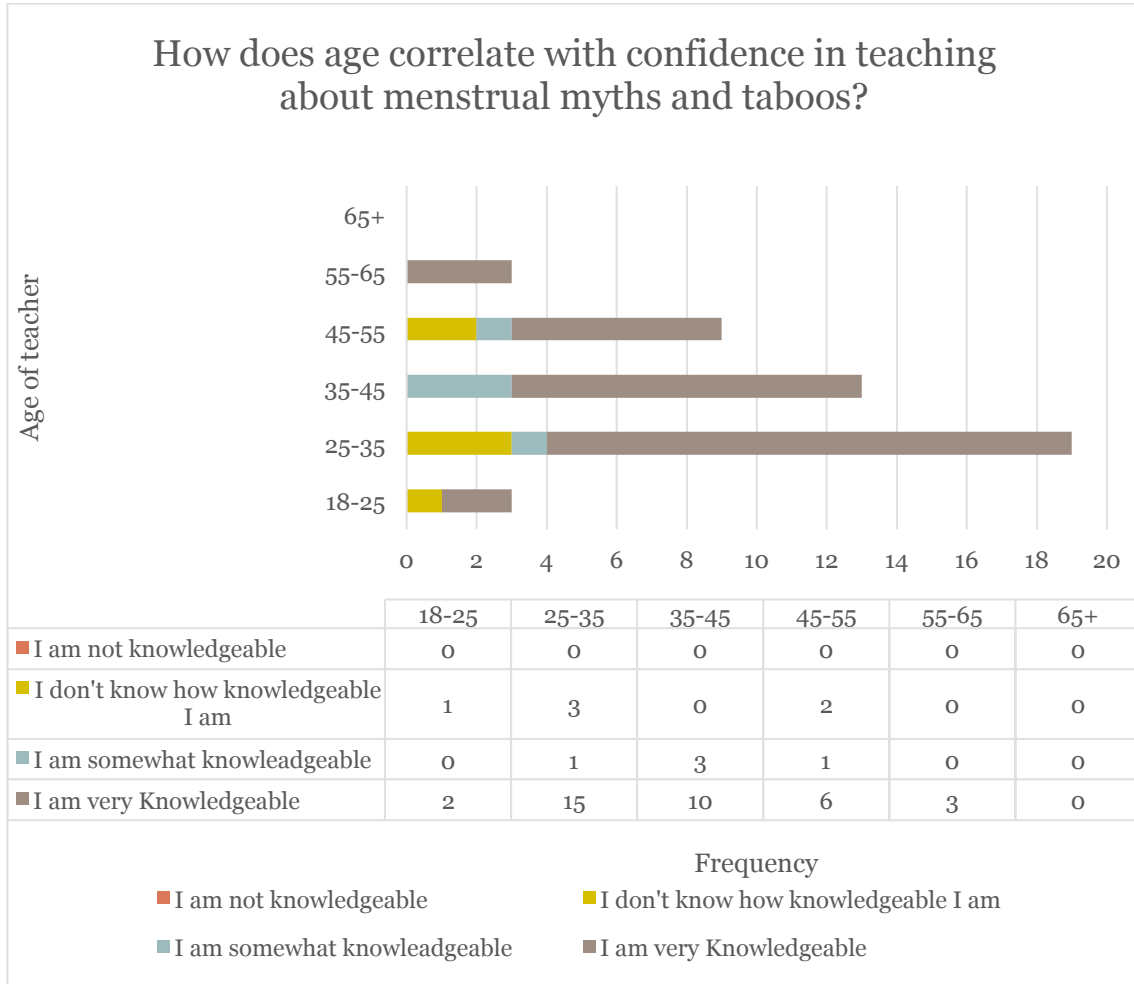


G: How does age correlate with confidence in teaching about menstrual management?

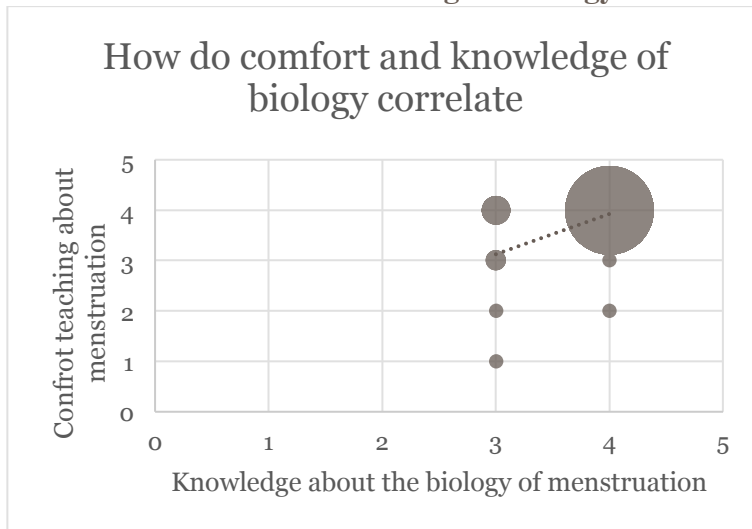


We cannot draw much of a conclusion from these results since there are fewer teachers in the higher and lower age groups. We would necessarily expect there to be the variation we see in the central age groups.

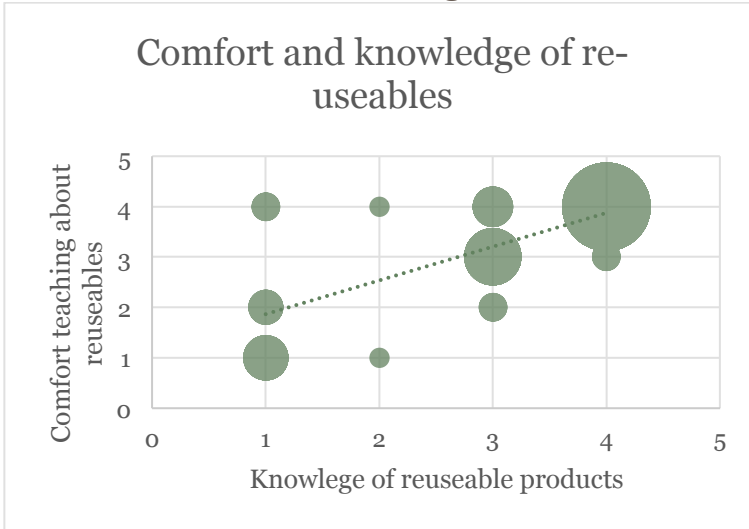
H: How does age correlate with confidence teaching about menstrual myths and taboos?



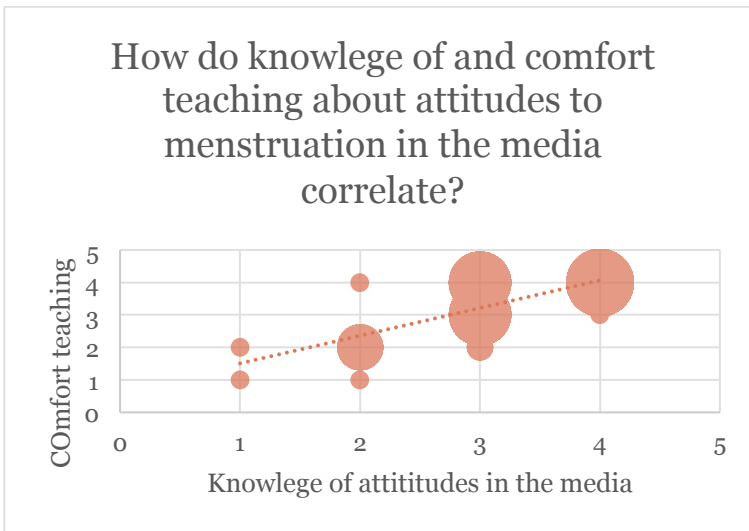
I: How do comfort and knowledge of biology correlate?



J: How do comfort and knowledge of re-useables correlate?



K: How do comfort and knowledge of media attitudes towards menstruation education correlate?



All of these charts show the correlation between the respondents' knowledge- where 4 is I am very knowledgeable, 3 is I am somewhat knowledgeable, 2 is I do not know how knowledgeable I am and 1 is I am not knowledgeable, and their comfort, where 4 is I feel very comfortable, 3 is I feel somewhat comfortable, 2 is I feel neither comfortable nor uncomfortable and 1 is I don't feel comfortable. The bubbles are weighted by the number of respondents who gave a particular response. The larger the bubble the more people gave a particular combination of comfort and knowledge in their answers. We have also added trend lines that show that there is generally a positive correlation between comfort and knowledge.