



MENSTRUAL JUSTICE: A HUMAN RIGHTS VISION FOR AUSTRALIA



Recommendations for Policy Reform

Executive Summary

Menstrual Justice: A Human Rights Vision for Australia

1. Transdisciplinary researchers, activists, and policy makers from across Australia present these Recommendations for Policy Reform based on their work regarding the discrimination and mistreatment often experienced by people who menstruate in the areas of children's rights, disability rights, gender rights, health, human rights, Indigenous women's health, industrial relations, law, political economy, psychology, public health, sociology, and tax law and policy.
2. The recommendations urge the Australian governments to take actions to achieve menstrual justice including the identification, reduction, and remedying of harms resulting from discrimination and mistreatment of people who menstruate.
3. Australian governments have addressed some of the discrimination and mistreatment with important law and policy initiatives such as providing free menstrual products in schools and eliminating the tampon tax.
4. Nonetheless, more action needs to be taken to address additional stigma and discrimination experienced by people who menstruate because it is corrosive and harmful.
5. To assist the governments in improving menstrual justice in Australia, we provide Policy Recommendations regarding the following areas of concern: Public Awareness, Curriculum, Schools, Workplaces, Public Buildings and Housing, and Discrimination and Coercion.

Introduction

In a first of its kind collaboration, transdisciplinary Australian researchers, activists, and policy makers came together for the [Menstruation, Law and Justice Symposium](#) on 16 February 2023 at the University of Technology Sydney, Australia, on the lands of Gadigal People of the Eora Nation. They shared their research relating to menstruation as it intersects with children's rights, disability rights, gender rights, health, human rights, Indigenous women's health, industrial relations, law, political economy, psychology, public health, sociology, and tax law and policy.² Based on the knowledge and information shared, the

undersigned Symposium participants propose the following Policy Recommendations for reform by all levels of government in Australia to advance human rights and justice for menstruators.³

Each year May 28 is observed as [Menstrual Hygiene Day](#), a day to evaluate and improve treatment of menstruators, around half of all people of reproductive age. On its 10th anniversary we are calling on Australian governments to address ongoing discrimination and mistreatment that people who menstruate can face [in education, work, healthcare, social support, and caregiving](#). New laws in some Australian jurisdictions that provide for [free period products in schools](#) and eradicate the so-called [tampon tax](#) are important. These reforms can remove cost and access barriers to gender equality by permitting low-barrier or no-barrier access to necessary items for managing one's period. And while these new laws and policies are important, more reform is necessary to address the broad-scale issues of stigma, disadvantage and violence faced by some menstruators. As one example, [students claim schools can fuel stigma and mistreatment by failing to provide appropriate early menstrual education](#). School staff [humiliate students who experience period pain](#). Schools can fail to [provide proper sanitation and bathroom breaks](#).

In addition to the experience in school, menstruators can experience other acts of discrimination and mistreatment. Menstrual injustices can exist in workplaces. For instance, the Australian Antarctic Program [fails to provide expeditioners and other staff safe and private bathrooms, disposal facilities, and period provisions](#). Workers on mines, construction sites and in remote areas often do not have access to safe and private sanitary facilities for healthy and dignified menstruation. Too few [workplace](#) policies in Australia support menstrual disorders, such as endometriosis, or promote a [positive menstrual culture in the workplace](#). [Unlike other countries, Australian law does not guarantee workers](#) paid menstrual leave, which [can promote equality and inclusion](#)

Menstrual injustices can target and further disadvantage menstruators from already marginalised communities, including those that are in areas of low-socioeconomic status and / or remote centres, often without notice or remedy. Australian governments do not consistently ensure ample [access to affordable period products for remote Indigenous menstruators](#) that is in line with cultural norms. Moreover, Australian [governments do not reliably provide support for Indigenous intergenerational teaching about menstruation and menopause](#). Australian law [permits nonconsensual sterilisation of and nonconsensual use of Long-Acting Reversible Contraception \(LARC\) by individuals with disabilities to prevent menstruation](#). Australian carceral facilities can fail to [care for](#) and support residents' [autonomy over](#) their menstruation and menopause. Schools can fail to consistently provide menstrual-friendly toilets that provide products. Persons experiencing homelessness often cannot find free, safe, private, and accessible sanitation facilities, with toilets and showers. Persons engaged in [sport](#) seek better information and support to address menstruation.

Menstrual stigma persists, fueled often by a lack of proper education, inadequate funding for evidence-based research regarding the menstrual cycle, and [lingering mischaracterisations of menstrual symptoms as deviant psychiatric illnesses rather than regular occurrences](#).

Importantly, great progress has been made with provision of free products in secondary school across Australia. [This new school year marked the first time that all states required free access to period products](#). Such progress along with the eradication of the "tampon tax" is important to gender equality. Provision of free products or lower cost products is important so menstruators can more easily address a

regular body function. The discussions leading to these reforms can help to normalise the conversation about menstruation and raise the visibility of structural barriers to accessing schools and every day necessities for people who menstruate.

Building upon these important strides will help further elimination of [menstrual stigma that is corrosive and tied to poor menstrual health](#).

Accordingly, we call on Australian governments to do more to fully address the above menstrual injustices. Australia can be a leader [for other countries](#) in bringing justice for menstruators.



Recommendations for Policy Reform

To assist the governments in improving menstrual justice in Australia, we provide these Policy Recommendations regarding the following areas of concern: **Public Awareness, Curriculum, Schools, Workplaces, Public Buildings and Housing, and Discrimination and Coercion**. Below are the Policy Recommendations for *Menstrual Justice: A Human Rights Vision for Australia*.⁴

Public Awareness

A. Create Federal and State Governmental Menstrual Justice Campaigns

1. To debunk menstrual stigma, ensure public education campaigns and intragovernmental policies are inclusive of all menstruators, provide information regarding the menstrual cycle, foster discussion about menstruation, and educate regarding laws prohibiting discrimination against and harassment of menstruators.
2. Revise menstrual health education curriculum (see below).
3. Increase governmental funding for evidence-based health, human rights, pedagogy, and other research relating to menstruation, menopause, endometriosis, and other related conditions, ensuring research regarding Indigenous communities is community-controlled and evaluated and ensuring coverage of children and young people.
4. Raise awareness about the needs of those who menstruate in relation to sport and physical activities, including the need for sanitation, product provision, period friendly uniforms, and stigma-free environments.
5. Reform anti-discrimination laws to address discrimination and harassment due to menstruation or associated with it; ensure menstrual-related law reform is evidence-based and accomplishes equality goals.
6. Protect menstruators' privacy regarding their menstruation.

Curriculum

B. Require and Provide Comprehensive, Culturally Responsive Menstrual Health Education

1. Require and provide menstrual health education⁵ for all students irrespective of gender in primary and secondary education⁶ through a published curriculum.
2. Continue menstrual health education periodically throughout secondary education.
3. Ensure teachers of menstrual health education are trained, trusted, and culturally appropriate and that the education is framed in a period positive manner.
4. Support Indigenous Peoples' intergenerational sharing of knowledge regarding menstrual health and menstrual cycle.
5. Ensure menstrual education on traditional Country is based on a curriculum that is co-created with Indigenous People and delivered with cultural appropriateness for the audience.
6. Ensure menstrual education is accessible and inclusive of people with disability.

Schools

C. Require Menstrual-Inclusive Schools

1. Provide employee training regarding menstruation (comparable content to that recommended for menstrual education (above)) and normalise discussion of menstruation to create a period positive environment.
2. Ensure proper access to private sanitation facilities (including toilet, clean water, soap, and disposal bins) and period products that are culturally appropriate and non-stigmatising.
3. Provide timely and proximate bathroom and locker access and administrative accommodations for bleeding, pain, hot flashes, and other symptoms.
4. Eradicate discrimination, including harassment, because of menstruation and related conditions such as pain and heavy bleeding, and ensure no adverse action is taken against menstruators who seek menstrual friendly schooling and policies.
5. Ensure students with disability are not required to be on LARC or sterilised as a condition of attendance at school or receiving personal care support at school, including in disability segregated schools.
6. Protect the privacy of students' health care information relevant to their menstrual cycle.

Workplaces

D. Require Menstrual-Inclusive Workplaces

1. Provide paid menstrual leave to address pain, heavy bleeding, and other related conditions. Menstrual leave should be framed as necessary for equality and inclusive workplaces and not framed as menstruators being incapable of work.
2. Provide paid and flexible rests and breaks, appropriate flexible working arrangements, and administrative accommodations, such as timely bathroom access, to address bleeding, pain, hot flashes, and other symptoms.
3. Provide training for employees and employers regarding menstruation (comparable to that recommended for menstrual education (above)) and normalise discussion of menstruation to create a period positive environment.
4. Ensure proper access to private sanitation facilities (including toilet, clean water, soap, and disposal bins) and period products that are culturally appropriate and non-stigmatising.
5. Ensure traditionally male workplaces and remote workplaces are menstrual-inclusive workplaces, with preparation and planning for menstruation included in employee manuals and guides, and that all uniforms and equipment anticipate employees' menstruation.
6. Ensure people receiving paid support and personal care services are not required to be on LARC or sterilised to receive those services from paid support and personal care workers on the grounds of work health and safety.
7. Eradicate discrimination, including harassment, because of menstruation and ensure no adverse action is taken against menstruators who seek menstrual-friendly workplaces.
8. Protect the privacy of employees' health care information relevant to their menstrual cycle.

Public Buildings and Housing

E. Require Menstrual-Inclusive Social Housing and Adequate Facilities in Buildings

Public buildings:

1. Provide properly maintained menstrual-friendly bathrooms for people irrespective of gender (since menstruators can include cis women and girls, trans men and boys, non-binary, gender diverse and intersex persons), with clean running water, private toilets, disposal bins. Provide soap and period products in a culturally appropriate manner.
2. Provide training of staff in public buildings regarding menstruation (comparable to that recommended for menstrual education (above)) and normalise discussion of menstruation to create a period positive environment.
3. Eradicate discrimination, including harassment, because of menstruation and ensure no retaliation against menstruators who seek menstrual-friendly buildings.

Social housing:

1. Ensure adequate and appropriate water and sanitation, proper ventilation, washing and laundry facilities and private space for dignified menstruation.

Prisons:

1. Ensure adequate and appropriate sanitation, bins, and provision of culturally and conditionally appropriate period products and pain relief.

Healthcare Environments, including Hospitals:

1. Ensure adequate and appropriate sanitation, bins, and provision of culturally and conditionally appropriate period products and pain relief.

Discrimination and Coercion

F. Regulate to Prohibit Discriminatory Coercion of Menstruators

1. Reform laws to prohibit non-consensual use of LARC and sterilisation of menstruators with disability, including in National Disability Insurance Scheme funded services.
2. Introduce supported decision-making laws to enable menstruators with disability to make their own decisions about menstrual management.
3. Consider development of a redress scheme for individuals subjected to non-consensual use of LARC and sterilisation.
4. Ensure open and free access to menstrual products in carceral settings including prisons, holding cells, refugee detention, youth detention and immigration detention.
5. Support education in sport to ensure that menstruation is accommodated rather than stigmatised or suppressed.
6. Eradicate discrimination, including harassment, because of menstruation (including forced strip searches in the carceral setting) and ensure no adverse action is taken against menstruators who seek menstrual-friendly, non-coercive institutional settings.



Based upon the research and shared expertise of the signatories to this letter, we ask Australian governments to build on the good — but incomplete — work governments have already accomplished addressing menstruation by taking the above actions to reduce menstrual injustices.

Sincerely,

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Endnotes

1. For any questions relating to these Policy Recommendations please contact Linda.Steele@uts.edu.au and Beth.Goldblatt@uts.edu.au.
2. The Conference was convened by [Dr. Beth Goldblatt](#), Professor, University of Technology Sydney (Law Health Justice Centre, Faculty of Law) and [Dr. Linda Steele](#), Associate Professor, University Technology Sydney (Law Health Justice Centre, Faculty of Law). The presenters included the following: [Dr. Mike Armour](#), Associate Professor, Western Sydney University (Reproductive Health); [Dr. Marian Baird AO](#), University of Sydney Business School (Industrial Relations); [Dr. Dani Barrington](#), Lecturer, The University of Western Australia (Population and Global Health); [Sydney Colussi](#), Researcher, University of Sydney Business School (Industrial Relations); [Commissioner Helen Connolly](#), South Australia's Commission for Children and Young People (Children and Young People Affairs); [Mary Crooks AO](#), CEO, Victorian Women's Trust; [Maree Davenport](#), CEO, Endometriosis Australia; [Dr. Elizabeth Hill](#), Associate Professor, University of Sydney (Political Economy); [Danielle Howe](#), Ph.D. Candidate, Western Sydney University (Reproductive Health); [Dr. Kathryn James](#), Senior Lecturer, The University of Melbourne, Melbourne Law School (Law); [Margaret E. Johnson](#), Professor, University of Baltimore School of Law (Law); [Minnie King](#), an Indigenous woman, Adjunct Lecturer, The University of Queensland (Public Health), and Co-Founder, Women on Country (Indigenous Women's Health); [Dr. Nina Lansbury](#), Division Head and Senior Lecturer, The University of Queensland (Public Health); [Dr. Meredith Nash](#), Professor and Associate Dean, Australian National University (Sociology); [Dr. Jane M. Ussher](#), Professor, Western Sydney University (Translational Health); and [Alexis Wolfe](#), (former) CEO, Endometriosis Australia.
3. We use the term "menstruators" to include persons who have or had the capacity to menstruate as well as those that experience endometriosis and polycystic ovary syndrome (PCOS), including cis women and girls, trans men and boys, non-binary, gender diverse, and intersex persons.
4. In general, the term "menstrual" as used throughout the recommendations includes related to menstruation, the menstrual cycle, perimenopause, menopause, endometriosis, PCOS and other related conditions. In addition, this document uses the term "menstruation" or "menstruation and related conditions" at times to incorporate endometriosis, PCOS, perimenopause, and menopause.
5. Menstrual health education should be evidence-based and address accurate biological information, health information regarding endometriosis, PCOS and other menstrual conditions, menstrual cycle over the life cycle, debunking stigma, privacy issues, respectfulness, cultural responsiveness, bathroom access, sanitation issues, administrative accommodations for bleeding and pain, period product selection (including access, safety, and environmental-impact), personal integrity and autonomy relating to menstruation, legal and other protection from discrimination and harassment of menstruators, the risk of forced long acting reversible contraception (LARC) and sterilisation and how to access related legal and advocacy supports, students' concerns about their energy and pain levels, socialising, engaging in sport, dressing, and attending school, work, religious, and cultural activities

during their menstrual cycle. In addition, because the use of the term “period poverty” can be stigmatising, it is recommended to discuss the lack of affordable period products or other specific issues instead.

6. Menstrual health education should occur in primary education before menarche because the average age of a student’s first period is 12.9 but could happen before the age of 11.