

MENSTRUAL CYCLE EDUCATION & SUPPORT IN UK SCHOOLS

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This report is based on the research paper 'Teachers' perceptions and experiences of menstrual cycle education and support in UK schools'. The research was conducted and written by Dr Natalie Brown, Swansea University & Welsh Institute of Performance Science; Rebekah Williams, Stride Active & Whitecross Hereford; Dr Laura Forrest, University of the West of Scotland; Dr Georgie Bruinvels, Orreco & University College London; Dr Jessica Piasecki, Nottingham Trent University.

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RECOMMENDATIONS

A CALL TO ACTION TO IMPROVE MENSTRUAL EDUCATION FOR GIRLS AND BOYS ACROSS THE UK. IT IS ADVOCATED THIS SHOULD BE ACHIEVED THROUGH:

1

Making time available for delivery, particularly to increase the regularity of teaching and lowering the age at which young people are first taught.

2

Providing resources for teachers to deliver information relating to emotional, social and physical aspects of the menstrual cycle.

3

Providing training support to teachers, with the minimum expectation for teachers to receive online professional development through e-learning and/or webinar.

4

Developing peer support groups for young people within schools to encourage open conversations.

5

Reframing the narrative, addressing historical societal construct including amongst teachers, students and parents.

INTRODUCTION & METHODOLOGY

AIMS:

To explore:

- Current education provision in UK schools, including barriers to menstrual cycle education.
- Perceived support teachers receive to deliver menstrual cycle education.

Menarche, the onset of the first menstrual bleed, occurs at an average age of 12 years old. Females may experience a range of menstrual cycle symptoms including mood changes, fatigue and stomach cramps. Within adolescents, research has suggested the prevalence of severe and frequent menstrual cramps/pain (dysmenorrhea) can be as high as 93% (1). These menstrual cycle related symptoms can have a detrimental impact on adolescent girls' education, physical activity levels and overall wellbeing (2).

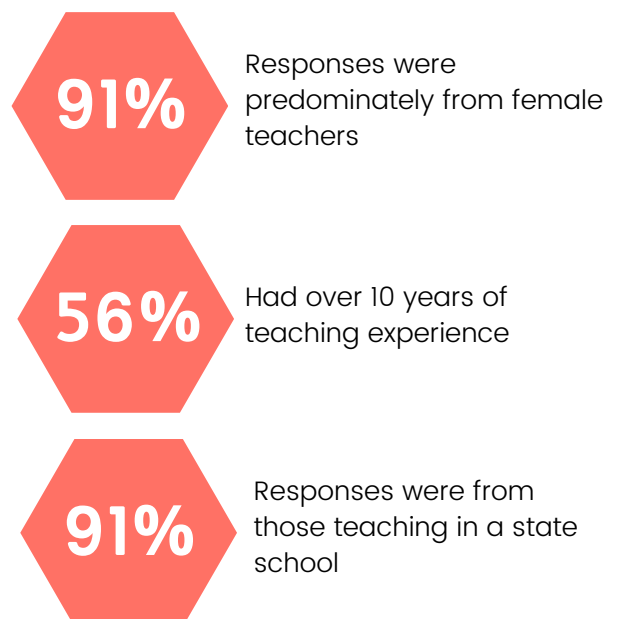
Previous research has highlighted girls tend to miss school, self-medicate and refrain from social interactions because of a lack of preparation, knowledge and poor practices surrounding menstruation (2).

This research seeks to address the current lack of understanding on what education is provided, how this is delivered, the support and guidance provided to teachers and barriers to delivery of menstrual health education, across the UK.

To address the aims of this study, an anonymous online survey was completed by qualified teachers (all subjects, year groups or levels and type of school) across the UK.

The survey consisted of a maximum of 48 questions; questions focused on lesson provision (e.g. content, frequency and audience), students' access to menstrual products, barriers to education and perceived support provided to teachers.

In total, the survey was open for 16 weeks, closing 28th February 2021. A total of 789 anonymous responses were included in the final data set. Alongside overall analysis, data has been analysed as subsets, specifically according to primary and secondary education (or relevant corresponding levels).



1 Parker MA, Sneddon AE, Arbon P. The menstrual disorder of teenagers (MDOT) study: determining typical menstrual patterns and menstrual disturbance in a large population-based study of Australian teenagers. *BJOG* (2010); 117(2): 185-192.

2 Chandra-Mouli V, Patel SV. Mapping the knowledge and understanding of menarche, menstrual hygiene and menstrual health among adolescent girls in low-and middle-income countries. *Reprod Health* (2017); 14(1): 30.

MENSTRUAL CYCLE EDUCATION IN SCHOOLS

53%

of secondary school teachers reported lessons were provided in their school.

74%

of primary school teachers reported lessons were provided in their school.

For teachers who were aware of their school's menstrual cycle syllabus, 144 reported that a maximum of two lessons were provided within one academic year; this is consistent across primary and secondary respondents. Comments displayed perceptions that this was the total amount of education, rather than per academic year.

“Too often it is a one-off lesson.”

“Definitely not enough education around this topic in school, it is very limited...it's a big topic that needs more attention.”

WHEN MENSTRUAL EDUCATION IS TAUGHT

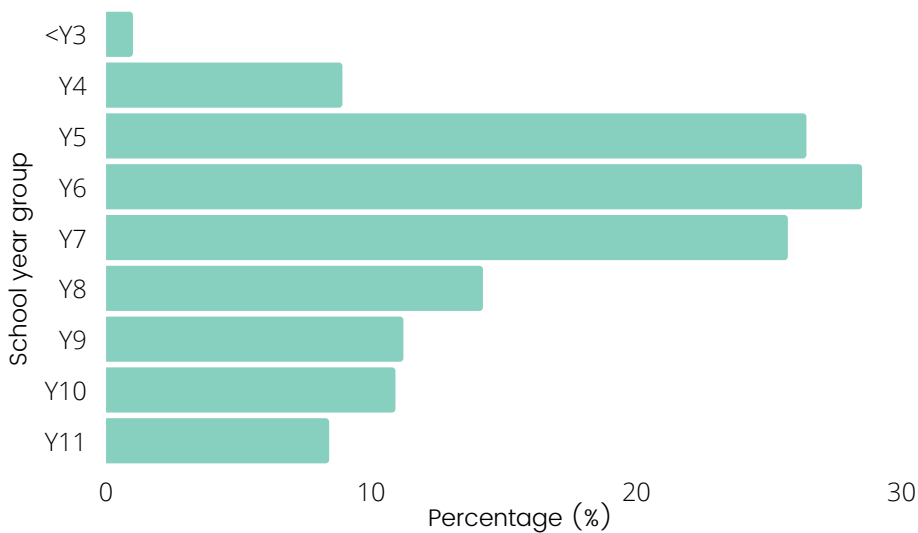


Figure 1: Percentage of lessons provided across year groups at school. Scotland has been matched to equivalent year groups in England, Wales and Northern Ireland.

Table 1: Comparison of menstrual education lessons provided in primary and secondary schools across the UK.

Country	Primary school (%)	Secondary school (%)
England	48	51
Scotland	77	22
Wales	37	61
Northern Ireland	36	68

BARRIERS PREVENTING INCREASED DELIVERY:



35% - teacher confidence & resources



40% - lack of time

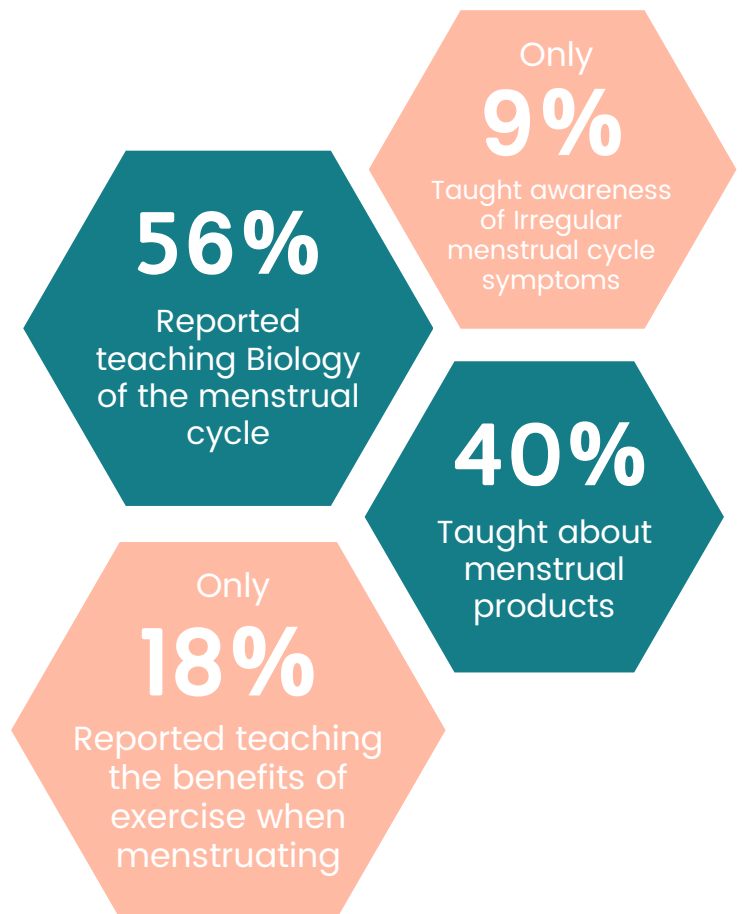


9% - parents

Teacher responses from primary school raised issues such as “[the] leadership team don’t see it as important”; “parental reaction, some [parents] would be mortified”. Secondary school teachers reported similar issues but also cultural factors and knowledge levels were described “my school is located in a predominately Asian area where these matters are not discussed” and “lack of knowledge for teachers”. Despite multiple reasons and barriers affecting menstrual education, there were some positive comments from teachers reporting there were no barriers and “Menstrual education is informative and well supported for children in our school”.

TAUGHT CONTENT

Principle subjects for menstrual education delivery are Biology (33%) or Personal, Social, Health & Economic (PSHE) (35%). Other teachers reported it being taught within Relationship & Sex Education (RSE) (4%), health and wellbeing (14%) and PE (2%). Biology of the menstrual cycle was most commonly taught across primary and secondary schools.

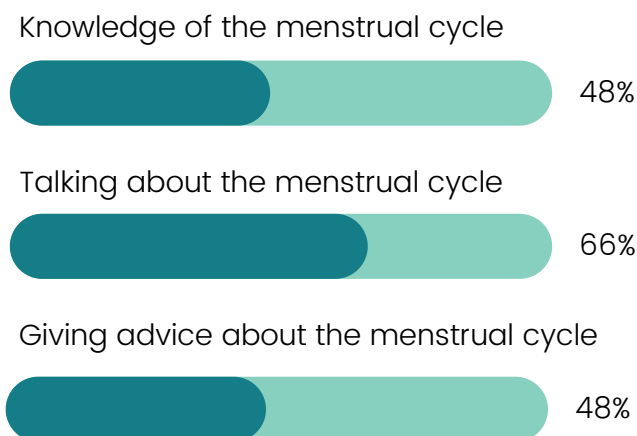


TEACHER CONFIDENCE & SUPPORT

Over three quarters (76%) of teachers reported educational content was provided to deliver menstrual cycle education; though this was notably higher in state schools compared to independent and in primary compared to secondary.

CONFIDENCE SURROUNDING MENSTRUAL EDUCATION

Percentage of teachers who rated their confidence levels as extremely confident or confident in the areas of:



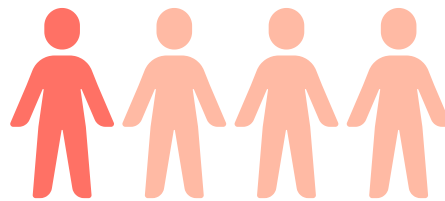
Overall, teachers felt more confident talking about the menstrual cycle than their knowledge of the menstrual cycle: "I'd be teaching from personal experience instead of what I have learnt through training." Teacher comments highlighted gender was an influencing factor on confidence.

"As a male I do not feel confident on this topic."

"As a woman, I feel quite confident being able to teach this."

PERSONAL COMFORT DELIVERING MENSTRUAL EDUCATION

Almost one in four (23%) were not comfortable teaching information about the menstrual cycle.



"I feel I know enough to teach it but having never done it before, I would be a little anxious."

It was common for individuals to reflect on their own personal experience of the menstrual cycle and how this influenced confidence and delivery of education.

"As a woman who has heavy periods that has struggled to get through teaching a lesson without leaking and has leaked all over my clothes before a lesson, I am sympathetic. If the teacher hasn't experienced heavy, painful periods then there is a lack of understanding of the effect on the child who is still learning. Sometimes I wish it was acceptable for me to teach wearing a heat pack, but I'm too embarrassed."

"I HAVE ALWAYS BELIEVED THAT KNOWLEDGE IS POWER FOR OUR YOUNG WOMEN. KNOWING AS MUCH BEFORE HAND IS ALWAYS BETTER THAN TRYING TO EXPLAIN AFTERWARDS."

"Being a Science teacher I am ready to explain this behaviour of the body to the girls because they need to know this basic information."

“ A PACK OF ECO FRIENDLY REUSABLE PANTS AND PADS ARE GIVEN TO EVERY SINGLE GIRL IN SCHOOL EACH YEAR - DISPOSABLE PRODUCTS (PADS AND PANTY LINERS) ARE AVAILABLE EVERY DAY ON REQUEST. ”

"It should be a health professional doing this with parental consent. Teachers can't be expected to do it all."

"Culture plays a huge part and many of the girls are discouraged from participating."

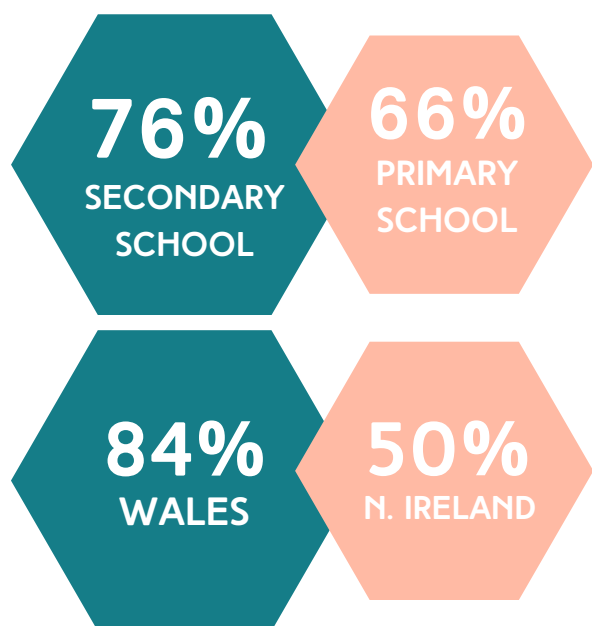
"PE IS COMPULSORY FOR ALL PUPILS, WE ADAPT THE ACTIVITY BASED ON INDIVIDUAL NEEDS, FOR EXAMPLE IF A PUPIL IS REALLY STRUGGLING WITH PERIOD PAINS THEY MAY TAKE ON MORE OF A LEADERSHIP/COACHING ROLE THAT LESSON."

“ Days absent because of menstruation ultimately effect performance. ”

MENSTRUAL PRODUCT PROVISION

The availability of free menstrual products within school was acknowledged by 72% of teachers, though this varied based on school type and country. Products were commonly located or accessed through staff including student services, classrooms, or reception as a result of products being misused if left out in public spaces. Yet many teachers felt the need to request access to menstrual products affected provision.

PERCENTAGE OF SCHOOLS PROVIDING MENSTRUAL PRODUCTS



Highest and lowest provision by country

“To access these [menstrual products] children have to go to the office to ask, which they are often embarrassed to do”.

“We have a very active girls group prompting period hygiene and trying to break the barriers.”

“Senior girls do presentations to everyone re. availability and where to access them (in all toilets and support areas, plus in PE).”

Menstrual products are most frequently provided by staff, although in some instances resources were sourced and funded from external organisations; “Our school is in a very deprived area and therefore the Period Poverty grant has enabled us to stock up to have enough provisions available at all times”.



PERCEIVED IMPACT OF THE MENSTRUAL CYCLE

THE MENSTRUAL CYCLE WAS PERCEIVED TO AFFECT MULTIPLE AREAS OF GIRLS' LIVES IN SCHOOL.

88%

"Some will not participate when menstruating. If they do participate, they can be less enthusiastic."

Of teachers reported a perceived impact on participation in Physical Education, attendance at school and girls' confidence as a result of menstruation.

"Reduced engagement, increased non-participation, reduced energy levels and effort in class, reduced confidence."

"Attendance can be an issue for many girls."

"The young ladies are reluctant to get stuck in, some in fear of the boys noticing something. Some are clearly in physical discomfort. Some are drained and emotional."

Furthermore, teachers also perceived the following areas to be impacted by menstruation:

Attitudes and behaviour



Learning



Exam results



% reported by teachers

Teachers also commented on relationships, self-esteem and "focus in class" being affected by the menstrual cycle. A contrasting view of "it doesn't affect anything" was shared, yet this does not represent the majority of teacher responses which indicated numerous impacts. One respondent summarised the menstrual cycle affects "All aspects of learning and life".

CONCLUSION

The findings of this study highlight the urgent need to address menstrual cycle education in schools across the UK to increase information provided to young people that goes beyond the science of the menstrual cycle. Social and emotional dimensions must be considerations in menstrual cycle education. It is vital we empower girls to manage their menstrual cycle and seek appropriate help where needed to reduce the potential negative impact on attendance, health and performance at school.

Crucially, this requires support for teachers to increase their confidence and knowledge to deliver this. This can be achieved through provision of teaching resources, training and timetabling; consequently, delivering lessons to pupils at a younger age and on more than one occasion. Teachers need to address their own discomfort when discussing and teaching menstrual education. Training should focus on increasing awareness of the impact of the menstrual cycle on school attendance, performance and girls' overall health and wellbeing. Though, it is important to note that education in schools is only one aspect in achieving a cultural shift and reducing the stigmatisation surrounding menstruation; parental support is also paramount to normalising conversations within society and freely communicating about the menstrual cycle.

The timing of this report means we must also highlight the impact of COVID-19. With the enforcement of home schooling during national lockdowns, there is a group of young people with significantly less menstrual education than previous years.





GET IN TOUCH

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OPTIMAL.PERIOD