



# **Improving Victoria's Menstrual Education: A Research Paper**

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# Introduction

Menstruation has in recent decades emerged from the shadows of the menstrual taboo in Australia. Historically, menstruation has been unmentionable, “shrouded in multiple veils of forbidden sexuality and silent patriarchy”, but today menstruation is a topic that has moved to the forefront of policy agendas both internationally and domestically (Bobel et al. 2020, p.485). Recent initiatives have pushed menstruation further into the public realm and garnered attention for the importance of menstrual wellbeing. Employees across Australia are advocating for menstrual wellbeing policies in their workplace, initiatives by ‘Share the Dignity’ and 2021 Young Australian of the Year, Isobel Marshal, have brought period poverty into public discourse, a greater number of studies and research publications are exploring the multifaceted experience of menstruation, and supermarkets have renamed ‘feminine hygiene’ aisles to ‘period care’.

Notably, research has begun generating evidence on links between social and educational outcomes with menstrual health and hygiene (MHH) (Balls 2017, p.3). MHH is defined by Kansime et al. (2020, p.2) as the umbrella term for “both menstrual health management and the broader systemic factors that link menstruation with health, well-being, gender equality, education, equity, empowerment and rights”. While effective MHH has been proven to lead to sustained benefits for health, productivity, and psycho-social outcomes of menstruators there has been limited investigation of MHH interventions to direct Victoria’s education policies.

A survey undertaken by the Victorian Women’s Trust (VWT) and the Chalice Foundation in 2021, painted a picture of the wide-reaching impacts of menstruation on menstruators’ day-to-day lives and school experience. What emerged from the survey was a compelling list of reforms that could overcome the barriers to a comfortable, supported, and well-informed education for young menstruators. Building on the survey, this research paper focuses on the impacts of the menstrual taboo in the school environment and aims to evaluate the main policy interventions to achieve a positive menstrual education for Victorian menstruators. Ultimately, this paper asks how a positive difference to the experience of menstruation at school can be made. The paper begins by exploring the context of MHH – both the importance of it and within an Australian and Victorian setting. Following this is a compilation of key interventions and components of positive menstrual education, including holistic menstrual education, improving understanding of menstrual pain, exploration of the full range of menstrual products, gender sensitivity and inclusivity, ongoing and age-appropriate education, teacher guidance, as well as national and sub-national guidelines. Young menstruators deserve to menstruate without discomfort, fear or

shame and the next step to achieving this is through reforming Victoria's educational system.

## Why MHH matters

There is growing recognition that girls and young women's experiences of menstruation can negatively impact their health, education, and psychosocial outcomes (Burnet Institute 2017, p.9). A body of research from around the world has documented the effect of the menstrual taboo on menstruators' physical and emotional health, school participation and attendance, employment and income generation, participation in the community, as well as the environment (Burnet Institute 2017; Kansiime et al. 2020). Where education and understanding of menstruation is low, menstruators "are unable to fully participate in educational, social and income-generating activities that could contribute to greater gender equality and greater economic productivity" (Burnet Institute 2017, p.13).

Many young menstruators worldwide lack the knowledge to sufficiently manage their period, and education programs are routinely deficient, inaccurate, negative, or too late (Bobel et al. 2020, p.277). Research across low and middle-income countries indicates that inadequate or inaccurate information about menstruation is one of the greatest challenges to menstrual wellbeing (Burnet Institute 2016, p.6). Much of the current menstrual literature does not focus on Australia, however, anecdotal evidence suggests that there are gaps in educational programmes that do exist. The VWT survey further revealed the stigma and silence surrounding menstruation at school. Respondents reported being teased, humiliated, and embarrassed at school:

"In Year 7 girls would say things like 'she must be on her period, she stinks'."

"I remember girls being laughed at for bleeding through their uniform, or even being shamed for the size of pad they used."

As Connolly (2020, p.7) indicates, this contravenes several basic human rights protected in the United Nations Convention on the Rights of the Child, like "the right to education (Articles 28 and 29) and the right to be healthy (Article 24)". The effects of the menstrual taboo and poor MHH on gender equality and women's basic human rights have been acknowledged in the United Nations Sustainable Development Goal 5.6: *Universal Access to Reproductive Health and Rights* (United Nations 2015). Additionally, the United Nation's ten-year agenda for MHM in schools (2014-2024), which addresses the intersections of gender, menstruation, health, and girl's education, likewise reflects a cultural push to put menstruation on the global agenda (Sommer et al. 2021, p.2).

Schools are a significant site for addressing MHH challenges, such as menstrual stigma, a dearth of menstrual literacy, and period poverty. A key step this paper

advocates for is to move beyond practical management issues such as water, sanitation, and hygiene (WASH) and product supply, to education. It is an important vehicle “to challenge negative attitudes and lack of awareness...thereby empowering women and girls with factual information about their bodies and how to look after them” (Kirk & Sommer 2006, p.10). Improving menstrual education is a crucial opportunity to also disrupt social beliefs and behavioural practices that contribute to gender inequalities.

## The Victorian Context

The Australian Government’s response to MHH issues has been to eliminate the GST and ‘luxury tax’ on menstrual products. Similarly, in 2020 Victoria announced the provision of free pads and tampons for every government school in the state. Positive menstrual wellbeing, however, is a complex vision that requires a suite of policies that extend beyond product supply.

While the Victorian Government believes that access to free sanitary products at government schools means that “in Victoria, periods are no longer a taboo”, such a policy intervention cannot overcome the long entrenched menstrual taboo alone (State Government of Victoria, 2020). Reducing the financial cost of menstrual products and eliminating accessibility problems is a key policy intervention to help address the menstrual taboo, however, change is also required within other institutions and settings (Connolly 2021, p.10; Cotropia 2019, p.299).

Research shows that education, alone or in concert with product interventions, is more effective in enabling menstruators to better manage their period, fostering a more supportive school environment, and improving attendance and performance in schools and health (WoMena 2020; Montgomery et al. 2012, p.6; Cotropia 2019, p.299). A study of the impacts of MHH interventions at school by Kansime et al. (2020, p.2) likewise stressed that interventions must address a wide range of sectors, particularly education. Victoria’s approach to issues of menstrual wellbeing can be informed by public policy responses in other parts of the world. For example, in England, students are jointly educated and provided with free menstrual products (Gulasekharam 2021).

At national level, in Australia, menstruation is covered through Health and Physical Education (P.E.) puberty units in primary years five and six, and again in high school years seven and eight (Lunette). However, as education falls within states’ jurisdiction, implementation of the Australian curriculum differs. Currently, in Victoria, it is also compulsory for state primary and secondary schools to deliver sexuality education through Health and P.E. lessons (State Government of Victoria 2020). Importantly, the Victorian Government acknowledges that “having periods is a normal

and healthy part of growing up, however taboos about menstruation mean that managing periods is often not talked about” (State Government of Victoria 2021).

‘Catching On’, the Department of Education’s sexuality program, is the main source for information relating to menstruation. At the primary level - ‘Catching On Early’, menstruation is addressed in relation to puberty, the biological process, and menstrual products, such as tampons and absorbent pads (Department of Education and Early Childhood Development 2011). Some challenges associated with puberty are discussed, including period pain. The secondary booklet for years seven to ten, ‘Catching On Later’, builds on this knowledge with greater detail on reproduction and the biological process of menstruation. Throughout the resource, menstruation is depicted as a function of child conception (Department of Education and Early Childhood Development 2013). Any information beyond this, such as menstrual products and dysmenorrhea, is classified as ‘teacher’s choice’.

‘Catching On’ has been provided in Victorian schools since 2004 and its approach to menstrual education urgently needs updating. Although Victorian menstruators have some access to information about menstruation, gaps in knowledge exist. The VWT’s survey of young Victorian menstruators found that 55% did not find their menstrual education useful and another 61% did not feel comfortable and supported having their period at school. So, just what are the interventions that can make a positive difference to menstrual wellbeing and education at school?

## Recommendation 1: Comprehensive and Holistic Menstrual Education

A positive menstrual education embraces, but also extends beyond biological and reproductive facts. Increasingly, around the globe, academics and advocacy groups are acknowledging that ‘menstrual health’ intersects with physical, social, and mental well-being (Hennegan et al. 2021, p.3). Mirroring the aforementioned shift, this paper recommends that menstruation education be taught comprehensively and transformed from a narrative of reproductive function to a presentation that captures the emotional, sexual, social, cultural, and physical aspects of the hormonal cycle as it is lived by menstruators around the world (Connolly 2020, p.29).

Including curricular content on the layered and multifaceted experiences of menstruation and societal beliefs associated with it is ever more important as menstruation gains attention within public health (Sommer et al. 2020, p.5). No matter the form of young menstruator’s education, it was common for the VWT survey respondents to characterise the information they received as “brief”, “limited”, “too late”, “basic” and lacking positive, practical, and in-depth information. Young

menstruators frequently described the need for lessons that “assist in creating open dialogue about issues and different experiences of women” and what to expect other than the mechanics of menstruation. Common themes of what respondents would like their menstrual education to address emerged, such as, the lived experience and individuality of menstruation, different menstrual products and how to use them, hormonal changes, dietary preferences, cramps, self-care, and menstrual shame.

Most frequently, education was described as focusing on menstruation from a biological perspective by VWT survey respondents. Educational resources in Australia focus predominantly on menstruation as a biological event, and in Victoria’s ‘Catching On Later’ secondary booklet menstruation is demarcated as an “indication that a person can produce a baby” (Department of Education and Early Childhood Development 2013, p.94). The value of education on biological concepts such as puberty, hormones, reproduction, and (WASH) must not be forgotten. But these aspects of menstruation “represent a fraction of the range of menstrual-related issues that must be explored” and sideline the thirty to forty years of menstruation women will experience (Sommer et al. 2020, p.5). Researchers have proposed that there be a shift in menstrual education from this ‘hardware’ oriented approach that focuses on WASH and product supply to ‘software’ interventions that address knowledge, feelings, attitudes and, health and social outcomes (WoMena 2020; Geertz, Iyer, Kasen et al. 2016, p.23).

This shift has been made in England, with the curriculum stating that “pupils should be taught key facts about the menstrual cycle including what is an average period, range of menstrual products and the implications for emotional and physical health” (United Kingdom Department for Education 2019, p.31). Irise International, an organisation based in the United Kingdom (UK) and Uganda that provides comprehensive menstrual education found that in the UK more than 50 percent of girls between 2014 and 2019 demonstrated improved confidence after their holistic support lessons (Irise 2019). Gertz, Iyer, Kasen et al. (2016, p.3) have stated that ‘hardware’ interventions have limited impact and “few governments, corporations, or NGOs are looking at menstrual health as a systemic problem, and thus, they are missing the opportunity to address the problems sustainably and at scale”.

Positive framing of the menstrual cycle and the role of hormones should also be emphasised in menstrual education. Respondents often described the education they received as having portrayed menstruation as shameful and a problem to be managed privately:

“I was embarrassed about having my period. I was paranoid that I would leak into my clothing and others would see. It was awkward getting out of class to go to the bathroom. Free sanitary products in toilet cubicles would have been helpful. It was

hard to get a pad or tampon covertly from your bag and put it into your pocket. I recall trying to covertly put a tampon in my bra.”

“We got taught how to hide our periods. I think at the age of 10 they also taught us [exactly what] a period was, what parts of the female reproductive system did what, and how the egg travels. However, this was all discussed with a level of secrecy, heightening the menstrual taboo. We were separated from the boys when having the discussion and taught of ways to hide tampons in bags.”

A review of New Zealand’s menstrual education by Diorio and Munro (2000, p.355) found that “the emphasis is on growing up to become an adult woman and learning to cope with pain, crankiness, and inconvenience so you can have babies”. Similarly in the Victorian curriculum, menstruation is not celebrated as a sign of health. Such a portrayal of menstruation “reinforces negative attitudes around menstruation and can have negative psychological repercussions on girls” (UNESCO 2014, p.14). For example, menstrual secrecy, concealment, and self-surveillance were a common theme among the VWT survey respondents. Teaching materials must emphasise that everyone’s experience of menstruation is unique, and that while they may not be a medical professional, each menstruator is the expert of their own body and cycle. Menstrual education should include the positives as well as the potential challenges of menstruation (Plan International UK 2018, p.51).

Any educational programmes that seek to encompass a ‘software’ approach should also be sensitive to the school environment that it is being delivered in (Kirk & Sommer 2006, p.12). Schools could produce a menstrual wellbeing policy that ensures, for example, toilets are not locked during the day or throughout exams to counter fears of leakages.

In England, the ‘Physical Health and Mental Wellbeing’ guidance directs schools to “make adequate and sensitive arrangements to help girls prepare for and manage menstruation including with requests for menstrual products” (United Kingdom Department of Education 2020). Similarly, in Northern Ireland schools are urged to “put arrangements in place to support girls” such as access to menstrual supplies (i.e., spare underwear and products), and ensure teachers are “aware of and sensitive to the physical, emotional and practical needs of girls during menstruation - these may include asking permission to leave class, not feeling comfortable doing PE lessons, mood changes, irritable behaviour, and lack of concentration” (Council for the Curriculum, Examinations and Assessments 2015, p.6).

This paper recommends a review of menstrual education in Victoria to ensure all school children receive an educational experience that extends beyond a biological, factual account and encourages the creation and implementation of school policies and staff training in how to be aware, sensitive, practical in their support of menstruators.

## Recommendation 2: Improving Understanding of Menstrual Pain

Besides being educated about the biological processes, young menstruators also wish to learn about “what to do ‘if things go wrong’” (Connolly 2020, p.33). An online survey of Australian young women by Armour (2021, p.135) found that “although learning about reproductive health, puberty, health care access and medical care is part of the Australian health and [P.E.] curriculum, most young women frame period pain as a normal part of becoming a woman”. This reflects a gendered expectation that menstruators must ‘soldier on’ without time for self-care and can create unsupportive and uncomfortable school environments for those experiencing menstrual pain (Plan International UK 2018, p.35).

Globally, anywhere from 12 percent to 37 percent of menstruators' schooling is affected by dysmenorrhea (Roux et al. 2019, p.3). Both Armour (2021, p.136) and the VWT's surveys found that many menstruators are unaware of the correct length of a regular menstrual cycle, symptoms of primary and secondary dysmenorrhea, how to obtain optimum pain relief, and what constitutes a healthy period. The normalisation of menstrual pain combined with inadequate menstrual health literacy further contributes to the underdiagnosis and undertreatment of chronic reproductive diseases, such as endometriosis and polycystic ovarian syndrome (Armour 2021, p.136). Menstrual education can assist women's health literacy and positively influence their ability to self-assess and identify menstrual symptoms that warrant investigation (Armour 2021, p.141). A factual understanding of period pain forms a crucial part of positive menstrual wellbeing by further providing menstruators the tools to engage in self-care.

Young Victorian menstruators were clear that they wanted to be better informed of menstrual health issues that may be experienced throughout the cycle, including irregular bleeding and reproductive disorders, as well as when to consider seeking professional assistance, and management or treatment options.

“Wish that they had explained other elements of menstrual cycles such as endo/PCOS and how factors such as stress/over-exercise/ disordered eating can impact menstruation and fertility... [we had] very little education around anything other than the “standard” period.”

“We were taught about the reproductive process and periods in relation to that, about pads and tampons but nothing about pain management, what's normal and what isn't, [and] related illnesses.”

“There wasn't a whole lot of info about ... how much pain was normal ... how we might feel at different times in our cycle, how to care for ourselves, or when to seek help.”

“When no one mentions the headaches, or fever, or pain, or nausea, it's hard to know what's normal and what's not. When the only advice is "cramps are normal", you suffer in silence. I didn't find Naprogesic or menstrual cups till I was in my late 20s and it changed my life! School and work would have been a totally different experience for me if I had been armed with more knowledge than where to find tampons in Woolies.”

In Australia and across the globe, a range of educational courses aimed at building awareness of period pain and dysmenorrhea have been developed. As a part of the National Endometriosis Plan, the South Australia Government has funded the delivery of the Periods, Pain, Endometriosis Program (PPEP Talk) by the Pelvic Pain Foundation of Australia at 80 different secondary schools across the state to encourage students to seek support for menstrual conditions (Australian Government Department of Health 2018). This paper encourages the expansion of this and similar programmes across Australia. Bobel et al. (2020, p.277) suggest that to increase menstruators' knowledge about dysmenorrhea, school nurses could also provide informational handouts to students to advance familiarity with conditions menstrual pain or discomfort, as well as promote reliable resources and services for additional guidance.

Deep-rooted cultural norms concerning menses-related pain must be challenged and gaps in health knowledge must be bridged. Menstrual education programmes should aim to enhance literacy and understanding of painful menstruation, therefore “affording access to better, earlier care and improving the lives of the millions suffering” (Bobel et al. 2020, p.279).

This paper thus recommends that more thorough literacy of dysmenorrhea and common menstrual conditions, including heavy bleeding, irregular cycles and premenstrual dysphoric disorder, than currently exists in Victoria's sex education curriculum be developed. But while it is important to stress the importance of self-care and increase awareness of period-related illnesses, it is also vital to educate menstruators on how to manage menstruation, so that it does not limit them from everyday activities.

## Recommendation 3: Access to Menstrual Products and Exploration of the Full Range of Menstrual Products

Although freely available tampon and pad supplies at schools is only one part of a suite of solutions to the menstrual taboo, the impacts should not be underestimated. Without access to or knowledge of how to correctly use and manage period products, young menstruators' fears of leakages or stains may distract them at school (Burnet Institute 2017). However, Victorian menstruators described the need for greater practical and comprehensive information about menstrual products:

“Really practical education on how to insert a tampon would have helped.”

“Alternate forms of sanitary products such as period underwear and diva cups were not discussed.”

Although free pads and tampons have been available at Victorian government schools since 2020, additional problems surround dignified and comfortable access and secure supply (State Government of Victoria 2020). 79 percent of survey respondents indicated that easily available menstrual products in toilets would ensure a more positive and comfortable experience of menstruation at school. VWT survey respondents indicated the shame and secrecy of menstruation, which was exacerbated by the need to ask for menstrual products:

“We also had period products [available] in our nurse's office. However, it was embarrassing to ask for [them] because they wanted our names and everything before we could receive them.”

“We were all told at the get go that the health teachers and sickbay had pads and tampons if we ever got stuck. We didn't have a dispenser in the toilets though - there used to be one and it was taken out for some reason, but it would have been helpful.”

“Pads/tampons were not made easily available... [we] had to go to [the] student reception to ask for products if needed.”

This paper strongly encourages Victorian schools to consider and design a menstrual wellbeing policy for their school community in which menstrual products and supplies, including analgesics, heat packs, or spare clothing, are made easily

available so menstruators can manage their period at school comfortably and without shame.

The provision of free and easily accessible menstrual products in schools should also be dovetailed with information on the range of different menstrual products. Studies of school-aged menstruators, by both Plan International UK (2018, p.20) and the Burnet Institute (2016, p.18), found an increasing interest in reusable, and environmentally friendly period products. Guided conversations around issues such as leaks and embarrassment are also very important.

Anxiety about stains and leakages reveals the stigmatisation of menstruation as dirty, and disposable period products disseminate the ideal menstruator as discreet, and periods as a hassle best kept hidden. Arguably, companies advertising disposable period products capitalise on the menstrual taboo, by developing products that erase the reality of menstruation. Equally, concern surrounds the role of companies within schools. Often 'femcare' corporations provide free disposable products to schools as a part of 'free' education programmes – a convenient option for resource or time-poor schools. These educational programmes by menstrual product companies may be viewed as a tool to increase profit by marketing to a young and vulnerable audience, thus feeding into a "disposable culture" (Quint 2017). We need to ask ourselves would we allow producers of contraceptives to provide sex education? Or pharmaceutical companies to provide health education? The environmental dimension should also not be overlooked. Plan International UK (2018, p.20) notes that the average "menstruating person will use up to 250 pads or tampons every year", and every single pad or tampon takes a minimum of 800 years to decompose.

Companies do, however, play an important role in dismantling the menstrual taboo and the environmental challenges associated with disposable period products. Plan International UK (2018, p.52) recommends that principles be developed to guide period product companies' engagement with schools. Such principles should ensure educators give information in equal measure about both disposable and reusable menstrual products. The Sustainable Period Project advises that "where possible an element of sustainability should be included into lessons" on menstruation and resources be provided to schools. The 'Eco Friendly Periods 4 Vic Schools' petition led by McIntosh (2020) calls on the Victorian Government to introduce reusable menstrual products to their selection of free period products available at state schools and encourages students to manage their period in a sustainable way. Echoing the sentiment of this paper, McIntosh (2020) writes that by presenting students with the option of eco-friendly period products, "young people [can] make their own decision about how they wish to manage their period".

By teaching about the wide selection of menstrual products, menstruators will be better placed to find a product that suits their unique menstrual experience. Young

menstruators should understand that menstruation is not something to be embarrassed about and menstrual product choices are enmeshed with the environment and broader societal beliefs about menstruation.

## Recommendation 4: Gender Sensitivity

To achieve a positive menstrual health education, menstruation must transcend being a 'girls-only' issue to include all genders (Armour 2021, p.142). Boys and young men especially influence girl's attitudes and behaviours relating to menstruation, yet most menstrual education is targeted to girls (Burnet Institute 2016, p.22). A review of the literature around the world shows that young menstruators are advocating for everyone, no matter their gender, "to receive a comprehensive menstruation education" (Connolly 2020, p.15; Plan International UK 2018, p.16; Armour 2021, p.142; Geertz, Iyer, Kasen, et al 2016, p.10). Educating boys and young men about menstruation could foster supportive peer relations and improve the maturity and empathy of boys (Montgomery et al. 2016, p.18; Connolly 2020, p.30; WoMena 202). Integrating a gender lens into menstrual education could also help to address fears of being bullied or teased about menstruation. Throughout VWT's survey, menstruators detailed how boys contribute to the menstrual taboo:

"Mostly males would say it was disgusting"

"A boy took my tampons out of my bag, threw them around and made fun of me."

"We were separated from the boys when having the discussion and taught of ways to hide tampons in bags."

Sustainable and meaningful change to menstrual wellbeing relies on addressing the sources of menstrual stigma. Educating only half of the population undermines this purpose (Gulasekharam 2021). The evidence is compelling; In Indonesia, following the distribution of UNICEF menstruation comic books to both boys and girls, almost all the boys surveyed in one receiving town were opposed to bullying girls for their periods (Daniel 2020). Plan International UK (2018, p.27) suggests that girls and boys be taught about menstruation in "integrated classes", but girls also be given "separate safe spaces" to speak about their concerns in confidence.

Northern Ireland's 'Relationships and Sexuality Education' (RSE) guide (Council for the Curriculum, Examinations and Assessments 2020) directs teachers to comprehensively discuss periods to both girls and boys from a young age, "to break common taboos about periods, prevent stigma, and reduce negative perceptions and behaviours". Similar explicit statements can be found in teaching guides for South

Australia (Department for Education South Australia 2021) and England (United Kingdom Department for Education 2020). Educating all students about menstruation sends a strong message that periods are not ‘secret girl’s business’ or shameful – they are natural.

Several sources on menstrual education also highlight the fact that most menstruation conversations are gendered (Burnet Institute 2016, p.13; Plan International UK 2018, p.15). Menstrual education programmes should not assume that all who identify as female menstruate and that not all who menstruate identify as female. Accordingly, the agreed upon definition of ‘menstrual health’ by the Global Menstrual Collective refers to “women, girls, and all other people who experience a menstrual cycle” to “[communicate] the relevance of menstrual health for all those who experience a menstrual cycle, regardless of their gender identity” (Hennegan et al. 2021, p.3).

The “feminisation of language” excludes the experiences of those who identify as transgender, intersex, and non-binary from the conversation, further contributing to menstrual stigma and shame (Burnet Institute 2016, p.13). While there is growing recognition of this, most of the research and policy in the menstrual space has focused on women and girls (Sommer et al. 2020, p.1). Additional information relating to the experiences of those who identify as transgender, intersex, and non-binary is required within menstrual education programmes and further research should be undertaken. This paper suggests that although women and girls must not be omitted from the conversation, a positive menstrual education recognises and is inclusive of all who experience menstruation.

Positive menstrual education is inclusive of all, including those who menstruate, future menstruators, and those who will never menstruate. Inclusive and gender-sensitive menstrual education is a key tool for policymakers to create supportive school environments for menstruators, improve attendance, and target gender inequalities.

## Recommendation 5: Ongoing, Age-Appropriate Menstrual Education

Providing timely and ongoing education for young menstruators is critical to creating a healthy and dignified environment for the management of menstruation. Menstrual education is most effective when addressed on an ongoing basis, rather than treated as a singular, 'one-off' information session. Age and developmentally appropriate menstrual education affords space to respond to the growing needs of young menstruators (UNICEF 2019, p.50). Currently, in Victoria, schools must teach sex education, the domain under which menstrual education falls, from foundation to year 10. However, there is no clear mandate on when and how often content about menstruation should be delivered.

In Northern Ireland, the RSE guide states that “teaching [about periods] should be built into the curriculum on an ongoing basis, building on knowledge and understanding, rather than being treated as a one-off lesson” (Council for the Curriculum, Examinations and Assessments 2020). The VWT’s survey responses echo this, where 70% of respondents wanted ongoing menstrual education. Presenting menstruation as a one-off topic contributes to menstrual shame and stigma by entrenching beliefs that the only purpose of the menstrual cycle is reproduction. On the other hand, regular discussion groups with a supportive and knowledgeable person and the provision of a safe space enables health agency and dignity among menstruators.

Menstrual education should also, as far as possible, occur before menarche. An absence of information pre-menarche can result in anxiety and unpreparedness among young menstruators. The VWT Survey respondents indicated that the menstrual education they received was “far too late”:

“[I] already had my period two years before the presentation.”

“I already had my period before secondary education and did not find out anything more than I already knew.”

“[I] don’t remember the education but I do remember my first period, which arrived one afternoon at school. And I felt totally unprepared.”

As Gertz, Iyer, Kasen, et al. (2016, p.35) find, accessing this “window of opportunity” is a valuable chance “to set [girls] on a path to an empowered, healthy, and fulfilling life”. In England, the Physical Health and Mental Wellbeing Guidance for Primary (United Kingdom Department for Education 2020) asserts that “this should ensure

male and female pupils are prepared for changes they and their peers will experience”. There is a compelling case for teaching about menstruation before menarche to better prepare menstruators and those around them, as well as, continuing this throughout the educational pathway so students can develop their understanding of the many aspects of menstruation.

## Recommendation 6: National Guidelines

As education falls within the responsibility of states, implementation of a national curriculum on menstrual education can differ, resulting in a ‘patchwork’ approach. The absence of clear guidance on menstrual education, at both the state and Commonwealth level, may impact schools’ capacity to support young menstruators. An essential aspect of positive menstrual education is therefore the development of sub-national policies. The creation of such policies will ensure the distribution of resources to deliver and support programmes, indicators that can be measured and monitored, and systems of accountability (UNESCO 2014, p.39; Mademba 2020). Institutionalisation of menstrual education also means making it systemic – sub-national guidance can advance systemic change within the patriarchal structures that perpetuate menstrual shame (Mademba 2020). Most importantly, it will ensure that no menstruators fall through the cracks of a patchwork system.

UNICEF (2019, p.50) advises that a curriculum be designed for the delivery of formal education programmes to ensure consistency and accuracy of information. Kenya is an example of a country that has developed national menstrual health guidelines and is a potential model for other countries or states, like Victoria, to follow. The ‘Kenya School Health Policy’ (Republic of Kenya Ministry for Education & Ministry of Health 2018, p.28) recognises that MHH affects multiple areas of life and society and has strong statements on the importance of menstrual health in schools:

“Menstrual Hygiene Management (MHM), is a crucial element of the School Health Policy, being important for dignity, gender equality and the human rights of women and girls. This policy recognizes that women and girls who experience challenges with MHM will also experience negative effects on multiple areas of life; relevant to the human rights of women and girls, including in particular the rights to health, work and education, as well as gender equality.”

The policy sets out well-defined goals and indicators to achieve positive MHM across schools in Kenya. Complimenting this is Kenya’s ‘Menstrual Health Management Policy 2019-2030’ that outlines clear objectives for key stakeholders and government bodies to “ensure that all women and girls in Kenya can manage menstruation hygienically, freely, with dignity without stigma or taboos, and with access to: the right

information on MHM; menstrual products, services and facilities; and to safely dispose of menstrual waste” (Republic of Kenya Ministry of Health 2020, p.11). These policies in Kenya provide a helpful framework for other states to follow and demonstrate how government commitment is needed to transform menstrual education and eradicate taboos.

As UNICEF (2019, p.22) explains, MHH often falls within the scope of several ministries, such as health, education, and women’s affairs, and may therefore lack clear leadership. The determination of an ‘MHH working group’ led by a ministry can drive effective “coordinated strategic planning” and “government-led multi-stakeholder action” (UNICEF 2019, p.22; Geertz, Iyer, Kasen et al. 2016, p.32). UNICEF (2019, p.22) asserts that “working groups have been essential for generating new evidence, sector-wide learning from such evidence, and successful interventions in many countries around the world”. Geertz, Iyer, Kasen, et al. (2016, p.32) also posit that due to ministerial turnover and administrative change, rather than a ministry taking the lead, a group committed to coordinating action is more important. Either way, this paper recognises the need for government action to achieve positive menstrual education and encourages the take-up of sub-national guidelines for key sectors in menstrual health, especially schools.

## Recommendation 7: Teacher Training

Regardless of whether menstruation is included in a school curriculum, teachers may feel unequipped or unprepared to teach the subject (Burnet Institute 2017, p.5). A key component of successful menstrual education should include “continuing training and capacity building” for teachers and the school community (Geertz, Iyer, Kasen et al. 2016, p.32). Although mothers, and female friends or relatives are significant information sources, they may not have a comprehensive understanding of menstruation or discussion of menstruation may be proscribed amongst women of various ethnic cultural backgrounds (Burnet Institute 2017, p.5). Given this, young menstruators depend on teachers and schools to deliver high-quality, accurate information about menstruation.

A literature review by Roux et al. (2019, p.3) observed how many teachers, in Australia, however, do not have the confidence or training to deliver RSE. Other formative research has found that teachers frequently neglect puberty units because they are under pressure to understand and teach a wide range of other topics and may be emotionally uncomfortable discussing menstruation (Geertz, Iyer, Kasen et al. 2016, p.8).

The absence of well-defined guidance on menstrual education both nationally and sub-nationally means that the quality of teaching varies across the country. RSE

training is not compulsory for teachers in Australia and there are no regulations that ensure teachers are qualified before providing RSE (Roux et al. 2019, p.3; Hendriks 2020). It is imperative that teachers have reliable and up-to-date information to deliver menstrual education and support menstruators (Armour 2021, p.141). Teachers should receive training on an ongoing basis, so they are engaged with any new information, and this training should be comprehensive – including information on both the biological and psychosocial aspects of menstruation, as well as hygiene and management practices.

The United Kingdom Department for International Development in collaboration with WaterAid and Share has produced a training guide for practitioners that serves as a helpful example for other programmes to follow (Mahon & Cavill 2015). A peak body of menstrual educators to deliver this training would further enable consistency and accuracy of information. Understanding and awareness from all school staff is needed too, rather than just those that teach RSE, so that young menstruators can be supported throughout their education. Supplementary training for male teachers could also be considered as studies have found they are often insensitive to menstruators' needs (Geertz, Iyer, Kasen et al. 2016, p.28). This finding is reflected in the results of the VWT's survey:

“Teachers (especially male) make lessons awkward exhibit responses which exacerbate the taboos in our society.”

“I remember being told in year 8 by a male PE/Health teacher that having a period wasn't an excuse not to participate in swimming classes and mocking people for using it as an excuse.”

To help menstruators manage their period proudly and comfortably at school several interventions are required, which include menstrual education training of school staff and the design of an informational handbook for teachers (UNESCO 2014, p.23). Teachers must be better prepared and informed for menstrual education to be successful.

## Conclusion

There is a strong social, economic, health, and environmental case for ending the stigma that surrounds menstruation. An important component of that requires improving the quality of menstrual education provided in Victorian schools. Young menstruators in Victoria have told us that menstrual education in Victoria is not satisfactory to support the navigation of periods comfortably and proudly at school and have voiced their desire for further reform and change to menstrual education. These changes include comprehensive, holistic, age-appropriate and ongoing formal

education, as well as skillfully facilitated conversations provided by well-informed teachers to all students, irrespective of gender. Programmes from around the globe provide hope and an encouraging example for Victoria's menstrual education future.

The vision presented in this paper is entirely within arm's reach, but it will require commitment and investment from schools, families, teachers, menstrual educators, and government. The difference a positive menstrual education will make to the lives of menstruators today and in the future represents nothing short of a revolution.

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