

Submission by Northern Ireland Women's European to Health Committee on Period Products (Free Provision) Bill scrutiny process

December 2021

Introduction

Northern Ireland Women's European Platform (NIWEP) welcomes the Period Products (Free Provision) Bill as an important proposal that would strengthen protection and support for women and girls, and people who menstruate. NIWEP welcomes the opportunity to contribute to the Bill scrutiny process.

NIWEP is a membership organisation working to promote the implementation of international human rights standards in Northern Ireland, and in particular the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), in line with the international obligations of the UK. Locally, NIWEP coordinates representation of the women's sector in Northern Ireland within UN human rights processes and builds the capacity of the sector to utilise international human rights standards in their own work to strengthen gender equality. Acting as the Northern Ireland link to the European Women's Lobby, NIWEP also works to amplify the voice of women and girls in Northern Ireland internationally.

NIWEP views implementing the recommendations of CEDAW as a clear roadmap and mechanism to ensuring women's human rights are fully met and upheld in Northern Ireland. The comments in this submission are made within this context.

Summary

Addressing period poverty is part of addressing gender inequality and misogyny

NIWEP welcomes the Bill as an important step in empowering people who menstruate, on a number of levels including addressing the stigma associated with menstruation. This stigma serves to teach girls and people who menstruate to feel shame over their bodies at a very early stage in their lives, and in this way forms a critical element of gender based discrimination and misogyny. While women and people who menstruate in Northern Ireland do not face the extreme humiliation imposed on people who menstruate in some other countries, the negative, shame laden commentary and imagery around menstruation amounts to systematic, gendered humiliation that has direct impacts on the health and wellbeing of people who menstruate, while also perpetuating misogyny especially among young people. This Bill would have an important impact in breaking these taboos and contributing to a culture where healthier, physiologically accurate and supportive imagery and attitudes to menstruation can develop.

International obligations on the UK

NIWEP also believes that the Bill would strengthen equality and support the human rights of people who menstruate. The issue of period poverty is much more than a practical inconvenience, and amounts to a breach of the human rights of people who menstruate. The UK also has obligations in international law to recognise, uphold and strengthen the human rights of women and girls, and indeed all people who menstruate. The Universal Declaration of Human Rights engenders the right to dignity, the right to health, the right to gender equality and non discrimination, and the right to work¹, all of which are intrinsically relevant to the issue of menstruation. As a State Party to the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the UK is also required to take action on areas including meeting all reproductive health care needs, which the Convention defines as a prerequisite to women and girls enjoying their full human rights.² The overall aim of CEDAW is to strengthen gender equality, and the CEDAW Committee has highlighted the importance of meeting reproductive health care needs in their Concluding Observations to all recent periodic reports submitted by the UK.³

The UN Population Fund (UNFPA) is also highlighting the importance of tackling stigma around menstruation and providing concrete support to people who menstruate as a critical element of upholding and strengthening universal human rights⁴. As part of its COVID-19 response, the UNFPA has developed a nine point action plan on menstruation, which defines period products as essential items, prioritises access to period products in places including hospitals, and emphasises that information on menstruation and addressing harmful practices is essential for protecting people who menstruate⁵.

The UK is also a member of the Council of Europe, which integrates gender equality as one of its policy goals. The Council has adopted Standards for Gender Equality, which set out a list of measures to be taken across policy areas, including health care. The Standards state that 'Gender equality requires that women and men be given equal opportunities to realise their potential for health, including through equal access to services and quality of care', and emphasise that states must take measures including providing appropriate, gender sensitive education on all health matters including reproductive and sexual health, and providing equal access to healthcare as well as ensuring a gender sensitive approach to medical, including biomedical, research.⁶

Domestic legislation and addressing inequalities

At the level of domestic equality legislation, period poverty emphatically constitutes an inequality requiring redress. It is a gender inequality in that the vast majority of people who menstruate are women and girls, who face a cost for period products that people who do not menstruate are not required to bear. It is also a gender inequality in that, as noted in the consultation document, trans men and non binary people face specific issues with regard to menstruation and access to period products. In addition, it is also an age related inequality, as girls and younger people who menstruate are more likely to report difficulties in affording period products than older women and people who menstruate. Finally, it is an inequality related to disability status, as people with disabilities who menstruate are frequently

¹ [Universal Declaration of Human Rights](#) 1948

² [Convention on the Elimination of All Forms of Discrimination against Women](#) (CEDAW, 1979), article 12. The UK signed the Convention in 1981 and ratified in 1986

³ [Concluding Observations](#) 2019, 2013, 2008 on examinations of the UK under CEDAW

⁴ UN Population Fund (2019) [Menstruation and human rights](#)

⁵ UNFPA news 28 May 2020 [Nine things you need to know about periods and the pandemic](#)

⁶ Council of Europe (2007) [Gender equality standards and mechanisms: Recommendation CM/Rec \(2007\) 17 of the Committee of Ministers and Explanatory Memorandum](#), p. 19

excluded from both service provision and access to information due to prejudice around disability, sexuality and reproductive rights and health, and as a key group vulnerable to low income and disadvantage are particularly affected by period poverty as well.

Above all, period poverty is a social and income related inequality, in that people who menstruate and have lower incomes are significantly more likely to report difficulties in affording period products. As lack of access to period products is associated with increased absences from work and school, period poverty directly deepens social and economic inequalities, further reducing long term life chances and opportunities of vulnerable and disadvantaged people. Action on period poverty is therefore entirely in line with equality legislation and will contribute to addressing persistent disadvantage and inequality. In addition, as noted in the consultation document, reducing time taken off work and school and strengthened confidence of people who menstruate that they are being valued and respected directly contributes to productivity and therefore the economic wellbeing of Northern Ireland as a whole, as well as the economic success of individual companies and workplaces.

Period poverty is relevant to the full suite of social inclusion strategies currently being developed through the Department for Communities, which includes a Gender Equality Strategy, a Sexual Orientation Strategy, a Disability Strategy and an Anti Poverty Strategy. It would be relevant and appropriate to begin addressing the issue through these strategies, in anticipation of further development of this Bill. Ensuring period poverty is reflected across the strategies would also strengthen the suite of strategies as a whole, by highlighting the interlinked nature of addressing disadvantage and tackling inequalities. It would also ensure that appropriate attention is given to the specific needs of specific groups, including the intersectional issues faced by people with disabilities who menstruate, trans men and non binary people.

Ensuring equal protection of people who menstruate across the UK and Ireland

NIWEP strongly supports the proposals in the Period Poverty Bill and would welcome legislation on the issue as a matter of priority. As noted in the consultation document, Northern Ireland lags behind other parts of the UK and Ireland in addressing period poverty. Legislation would ensure that support for people who menstruate are put on an equal footing across the UK, which is a key recommendation in the current Concluding Observations from CEDAW, following an examination of the UK in February 2019.⁷

Legislation is, however, only as effective as its implementation. It is essential that implementation of the legislation is undertaken to ensure duty bearers meet their obligations, with a particular emphasis on schools, colleges and universities, and also hospitals as major employers as well as service providers. It is also essential that action on period poverty is combined with strengthened education and information provision to ensure that all young people in particular have access to accurate, age appropriate information and that the stigma of menstruation is effectively addressed. This can most feasibly and effectively be achieved through mandatory, centrally regulated relationship and sexuality education, in place of the current patchwork provision. This has been a long standing recommendation of CEDAW to the UK⁸, and mandatory provision has been in place elsewhere in the UK since

⁷ CEDAW Committee (March 2019) [Concluding Observations on the 8th periodic report of the UK](#) recommendation 13, p.3

⁸ [Concluding Observations](#) 2019, 2013, 2008 on examinations of the UK under CEDAW

2019^{9,10,11}. In Ireland, a Bill that would make provision centrally organised and mandatory is currently passing through the Oireachtas.¹² It is timely that Northern Ireland updates its approach to raising healthy and knowledgeable young people who can enjoy healthy relationships to their own bodies and each other, and NIWEP would welcome reference to this in further debate around the Bill.

Comments on the Bill

SECTION 1 – ABOUT YOU

See introduction to NIWEP above. NIWEP is content for this response to be published, and it can be referenced to NIWEP as Northern Ireland Women’s European Platform.

SECTION 2 – YOUR VIEW ON THE PROPOSAL

1. Which of the following best expresses your view of the proposed Bill?

- ✓ **Supportive**
- Neutral (neither support nor oppose)
- Opposed

Comments:

NIWEP strongly supports this Bill as a legislative measure that will contribute to gender equality and contribute to culture change around menstruation and gender stereotyping.

2. Do you believe that sanitary products should be free for those who need them?

- ✓ **Yes**
- No
- Unsure

Comments: CEDAW advocates access to free care, where necessary. Period products are essential for upholding the dignity and human rights of people who menstruate, in line with the Universal Declaration of Human Rights and CEDAW.

3. Do you agree that there should be a specific obligation on schools, colleges and universities to make sanitary products available for free?

- ✓ **Yes**
- No

⁹ Department of Education (England) (2019): [Guidance on Relationships and sex education \(RSE\) and health education](#)

¹⁰ Education Scotland (2019) [Curriculum for Excellence](#)

¹¹ Welsh Cabinet written statement 21 January 2020 ‘[Written Statement: Ensuring Access to the Full Curriculum](#)’

¹² [Provision of Objective Sex Education Bill 2018](#)

- Unsure

Comment: Schools, colleges and universities are critical for addressing period poverty, in that young people are most likely to report difficulties in affording and/or accessing period products. In addition, consideration should be given to including other key public institutions providing. This should include hospitals as a major employer and public service provider, as emphasised by the UN Population Fund¹³. Placing a duty on hospitals to provide products would underline the role access to period products plays for the physical and mental wellbeing of people who menstruate, while also highlighting the role of employers in ensuring the dignity, health and wellbeing of staff. It would also contribute to ensuring smooth service provision, by supporting typically low paid staff such as clerical and sanitation staff and enabling them to attend work regardless of menstruation.

If possible, consideration should also be given to mandating major shopping and leisure complexes to provide access to free period products for users of the facility. This would play an important practical role, as these are key destinations used by large numbers of people who could have increased confidence in using these facilities. It would also serve an important symbolic function in highlighting the duty of care of commercial facilities towards users. Sponsorship arrangements could be explored to address any concerns regarding cost, in all suggested settings.

4. Would you support a universal sanitary proposal that would ensure that those in need of sanitary products are given them?

- ✓ Yes
- No
- Unsure

Comments: The principle of universality is well established in international human rights law, and is intended to ensure equality for all. Free access for those in need of sanitary products is in line with the universality principle, in particular as it removes the stigma associated with means testing or other attempts at targeting services to groups deemed more vulnerable. This, in turn, is essential to ensure uptake especially among those most in need of products. It is essential, however, that care is taken in designing the service to ensure this stigma is fully addressed and people are comfortable to access it, in the context of the currently prevalent shame and secrecy around menstruation. For example, many schools already informally provide products through a nominated teacher or nurse, but there is significant anecdotal evidence that pupils are very reluctant to explicitly ask for products as it means letting people know that they are menstruating.

5. Which best expresses your view concerning a free universal provision of sanitary products?

- ✓ **Free products available to anyone**
- Limited use of the system (e.g. limiting the number of products that may be claimed each month)

¹³ UNFPA news 28 May 2020 [Nine things you need to know about periods and the pandemic](#)

- Available only to those on low incomes or in receipt of benefits
- There is no need for a universal scheme

Comments: The comments under Q4 above apply to this question as well. It is essential that no barriers to accessing products are put in place, and therefore products should be freely accessible to anyone. This is important also to ensure that it is possible for eg. carers to access products for a relative or friend, who may be unable to do this themselves through disability or illness; the issues related to the individual experience of pain and discomfort during menstruation are relevant in this context as well. In practice, concerns of inappropriate access can be addressed informally and on a case by case basis should the need arise; such systems are already in place in particular in GP surgeries with regard to repeat prescriptions.

6. Do you have a view on which locations would be most suitable for dispensing free sanitary products?

- GP surgeries
- Health centres
- Community hubs
- Women’s refuges
- Homeless shelters
- Libraries
- ✓ **All of the above**

Comment: The service should be widely and easily accessible, and therefore all of these locations are relevant. In addition, as noted above hospitals should be included, specifically for staff and patients, but provision in outpatient clinics could also be considered as a mechanism for providing a comprehensive service and also enabling links to information and relevant additional health services to be made.

With regard to refuges, it would appear that these specialised services should focus on supporting service users only. Women’s centres as key community hubs would be ideal for providing access to the population as a whole, and would already have systems in place for providing a suitably discreet and targeted service as they will be familiar with and to local people.

It would be helpful to clarify how ‘community hub’ is defined to ensure clarity and enable an effective and accessible service to be developed, should the Bill be passed into legislation. The community and voluntary sector operates an extensive local infrastructure that could effectively support a service, particularly as local organisations will have local knowledge and are often trusted by local people and service users.

7. Where will the Bill have the biggest positive impact?

- Equality of women and girls
- Relieving pressure on the NHS
- Schools (e.g. attendance rates)
- Workplaces (e.g. less women taking time off)

- Reducing the stigma of periods and period poverty
- ✓ **All of the above**

Comments: As outlined in the introductory section, the Bill can have a significant positive impact at both the symbolic and practical levels. As an initiative, it is important in opening up debate on the stigma around periods, which as outlined above is fundamental to gender inequality and misogyny. The practical impacts are equally essential in strengthening gender equality, including equality for trans men and non binary people who menstruate, and can significantly support individual people who menstruate to remain active at a level they feel comfortable with during their period. This, in turn, is important for strengthening confidence of all people who menstruate in their bodies and in their ability to actively engage with society overall.

8. Do you think the coronavirus pandemic has made period products harder to access?

- ✓ **Yes**
- No
- Unsure

Comments: While NIWEP does not have first hand evidence in this regard,

9. Would you support a delivery scheme for those unable to leave their home (e.g. isolating, disability, etc.)

- ✓ **Yes**
- No
- Unsure

Comments: A delivery service would be helpful to ensure the service operates in an equitable and accessible manner. Examples of delivery services are available, including a recently launched scheme operated by Dundee City Council in Scotland.¹⁴ Such schemes could provide a basis for designing an accessible service, taking into account factors such as privacy, benefits and disadvantages of online ordering systems, and access to additional support for those who may need it.

While it is outside the scope of this Bill, it remains worth noting that delivery services for example in Africa include contraceptives¹⁵, to enable women to continue family planning despite lockdowns and/or other reasons why they cannot leave their homes. Should a period product delivery scheme be established, consideration could be given to incorporating this into a full family planning mobile service.

10. Do you think local councils should be involved in the management and distribution of sanitary products?

¹⁴ *The Courier* 20 April 2020 '[Free period product delivery service launched in Dundee](#)'

¹⁵ UNFPA news 30 July 2020 '[Eswatini SMS service helps women access family planning, food amid pandemic](#)'

- ✓ **Yes**
- No
- Unsure

Comment: Councils could effectively be involved in the management and distribution of period products, through existing mechanisms such as community and leisure centres. As noted above, councils could also play a role in supporting delivery schemes. In particular, councils could have an important role in sharing information and encouraging uptake of services, which would also serve to open debate on the taboo of menstruation in a critical civic leadership forum.

SECTION FOUR - GENERAL

1. Do you have any other comments or suggestions on the proposal?

In conclusion, NIWEP strongly supports the proposed legislation. It would be relevant, however, to establish a clear steering group and mechanism to oversee the service. Women's centres along with organisations for young people, trans and non binary people, lesbian and bisexual women and people with disabilities should play a key role in such a mechanism, as they will have the intelligence, expertise and experience to inform and support a service that users are confident to engage with.