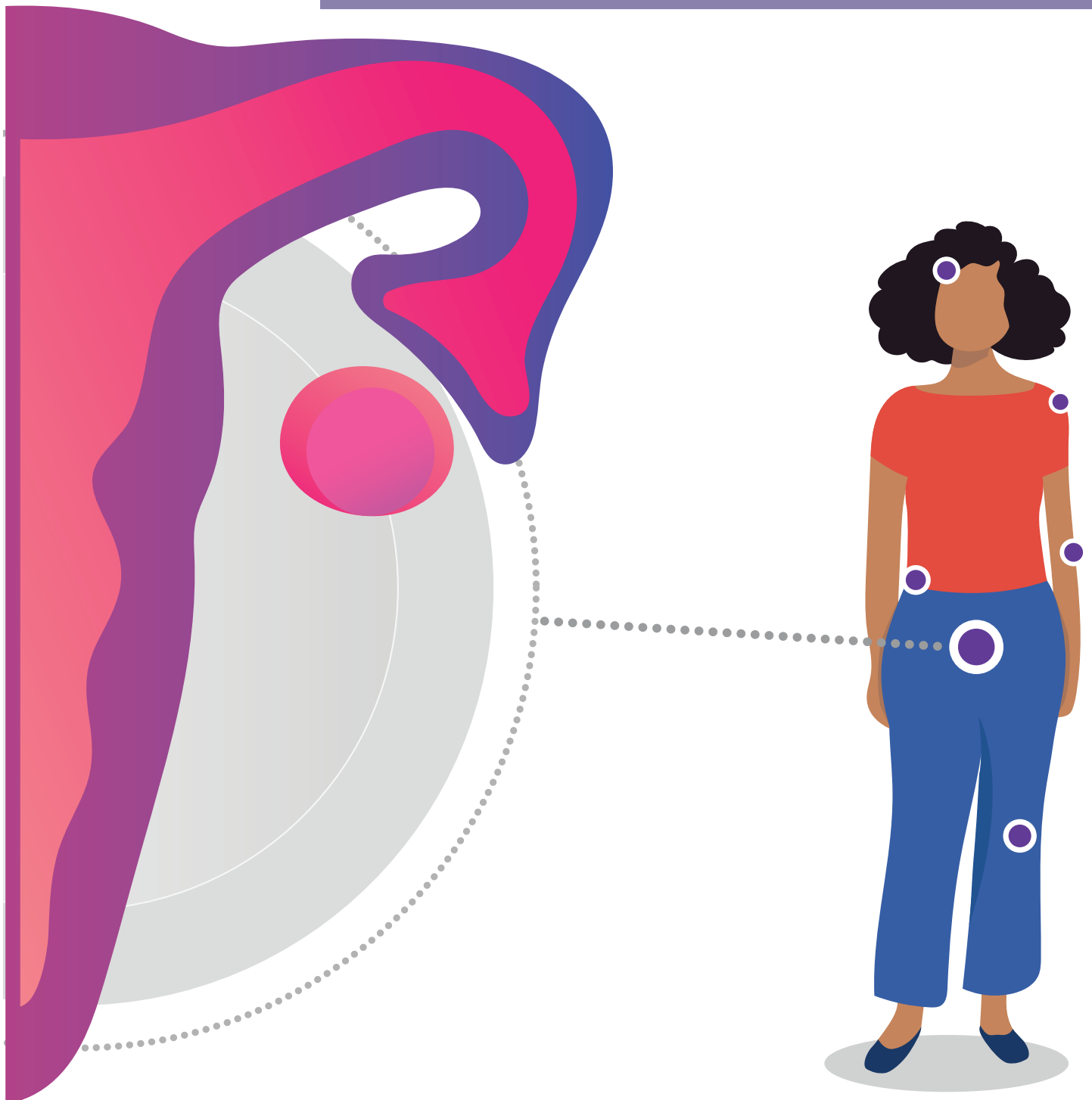


# MENSTRUATION MATERNITY MENOPAUSE

THE 3 'M'S ON OCCUPATIONAL HEALTH & SAFETY



A Practical Guide for Trade Unionists

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## FOREWORD

We are proud to publish this new series on occupational health and safety with a gender perspective, focusing on the three 'M's: menstruation, maternity and menopause. It will support trade unions' efforts to incorporate these important themes throughout their work, with their staff representatives and with their membership bases.

Although natural biological experiences, the three 'M's are still taboo subjects in many cultures and workplaces. Yet, they have a significant impact on the professional development of the workers who experience them; many of us are going through them now, as I write these lines.

It is crucial for trade unions to consider occupational safety and health through a gender lens. This approach acknowledges that the distinct tasks, roles and social stereotypes attributed to workers, along with the expectations and responsibilities imposed on them, can heighten their susceptibility to certain physical and psychological hazards. Such recognition leads to the adoption of occupational health policies, control and prevention strategies that are tailored to address these gender-specific risks.

Stereotypes surrounding the three 'M's, such as the embarrassment of discussing hot flashes with menopause or calling a woman dirty, in the case of menstruation, render the three 'M's invisible and shameful.

While we use the words "woman/women" in this document in order to simplify communication, our campaign and recommended policies are intended for all people with a uterus.

We hope this campaign will continue to strengthen gender equality in trade unions and in the world of work, providing knowledge and tools for workers to defend their rights and build better, stronger, diverse and more equal workplaces around the world.

We hope that the first installment of this series will help you better understand why these themes are trade union issues as well as advocate for – and win – change around the first 'M,' menstruation.

**Veronica Fernandez Mendez**  
*Head of Equal Opportunities*  
UNI Global Union

# THE THREE 'M'S AS PART OF EXISTING GENDER INEQUALITY IN THE WORLD OF WORK

## THE GENDER GAP IN THE WORLD OF WORK

**Gender inequalities in the world of work impact everyone** and are rooted in widespread gender stereotypes and norms, as well as discrimination related to sexual orientation or gender identity.<sup>1</sup>

Even though gender roles and the visibility of diverse gender identities are rapidly changing worldwide – along with the nature of households, markets and societies – discrimination, inequalities and prejudices remain anchored in economic and social institutions, to the detriment of women and diversity.

### Participation rate in the world of work

**Only 47 per cent of working-age women worldwide are engaged in the labour market versus 72 per cent of all working-age men.**



### Unemployed and vulnerable

- ▶ Compared to men, women are less likely to work full-time, more likely to be employed in lower-paid occupations and less likely to progress in their careers. As a result, gender pay gaps persist and women are more often in poverty.
- ▶ The disparity in female and male unemployment is highest in the Middle East and North Africa, followed by Latin America and the Caribbean.<sup>2</sup>



<sup>1</sup> The Gender Gap in Employment: What Holds Back Women's Advancement?  
<https://www.ilo.org/infostories/es-ES/Stories/Employment/barriers-women#unemployed-vulnerable>

<sup>2</sup> Gender gaps in the workforce - Global Gender Gap Report 2023 | World Economic Forum (weforum.org)



## Several obstacles block women's access to work,<sup>3</sup> for example:

- Globally, women spend almost three times as many hours on unpaid domestic labour<sup>4</sup> and care as men. This invisible work consumes time women could spend doing paid work.

**Women spend almost three times as many hours on unpaid domestic labour and care as men.**

- In 38.5 per cent of all countries, there are no legal rights to maternity leave.<sup>5</sup> In the United States, for example, only 12 per cent of women in the private sector<sup>6</sup> have access to any paid maternity leave.

## THE THREE M'S AND THE GENDER GAP

Discrimination in the workplace is complex and can be influenced by multiple factors such as gender, race, ethnicity, age and education level, leading to varying degrees of inequality. This phenomenon, known as intersectional or multiple discrimination, is particularly evident when considering the three 'M's. These areas are often affected by cultural and social stereotypes, contributing to discrimination and inequality.

For instance, societal norms and misconceptions around menstruation can result in stigma and a lack of access to sanitary products and facilities, while the gender pay gap exacerbates women's ability to afford sanitary items. Similarly, attitudes towards maternity can lead to inadequate support and legal protections for pregnant employees or those returning to work after childbirth. Menopause, too, is often overlooked in workplace policies, leaving those experiencing menopausal symptoms without the necessary accommodations or understanding from their employers.

In each case, the lack of education and information exacerbates the situation, reinforcing stereotypes and preventing the implementation of supportive measures.

This interconnected web of discrimination highlights the need for a more informed, supportive, and collectively negotiated approach to addressing the three 'M's in the workplace.

<sup>3</sup> *The invisible door: Three barriers limiting women's access to work (worldbank.org)*

<sup>4</sup> *The World's Women 2020: Trends and Statistics | United Nations*

<sup>5</sup> *More than 120 Nations Provide Paid Maternity Leave (ilo.org)*

<sup>6</sup> *Maternity Leave in the United States: Facts You Need to Know (healthline.com)*

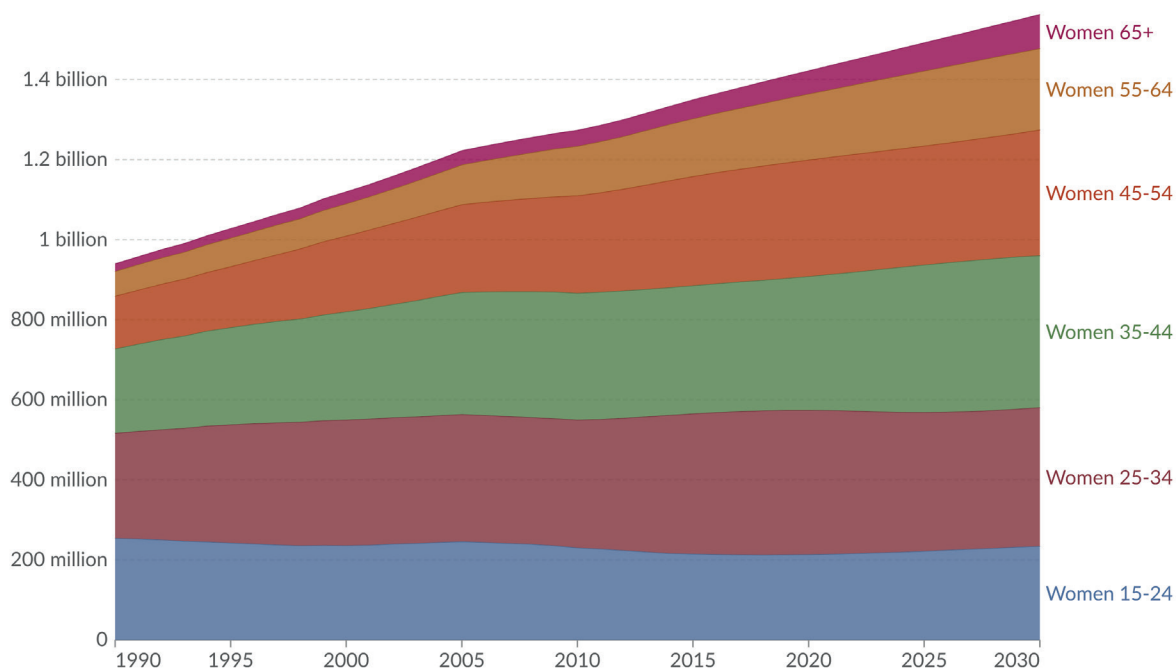
As discussed by the International Labour Organization's (ILO) new Global OSH Strategy, there must be a 'gender transformative' approach<sup>7</sup> to health and safety. Gender-transformative refers to an approach that accounts for the diverse realities of the world of work and the unique characteristics of workers. In other words, work environments must be designed, amongst other things, with women's health in mind. It adds that, in order to reduce inequalities, factors such as gender, disability and age, as well as special vulnerabilities must be mainstreamed into occupational health and safety policies and programmes and their impacts on gender, age and disabilities, further investigated.

Therefore, **understanding and attending to the specific health needs of women** at different stages of their lives is critical to achieving their physical and emotional well-being, as well as making sure they continue to thrive in the workplace.

Trade unions are vital in ensuring the inclusion of the three 'M's in health and safety policies and practices to reduce the existing discrimination and inequalities faced by women workers.

## Female labor force by age, World, 1990 to 2030

Population in the labor force are those recorded as economically active. It includes both employed and unemployed people looking for jobs. All figures correspond to 'modelled ILO estimates' (see source for details).



To better understand these issues, and how we, as trade unions can provide support, we will first focus on one of the most invisible issues: menstruation. Subsequent publications will delve into how trade unions can support women experiencing menopause and maternity.

<sup>7</sup> [https://www.ilo.org/global/topics/safety-and-health-at-work/policy-documents/WCMS\\_897539/lang-en/index.htm](https://www.ilo.org/global/topics/safety-and-health-at-work/policy-documents/WCMS_897539/lang-en/index.htm)

# MENSTRUATION

## What is it?

Menstruation is the regular, natural process in which the body sheds the lining of the uterus and the remains of an unfertilized egg, resulting in bleeding through the vagina. Bleeding typically lasts between three and seven days, and this cycle occurs roughly every 28 days. This process begins at puberty and continues until the end of fertility, known as menopause, at which point menstrual cycles end.

## The stigma and myths surrounding menstruation

It is often very difficult to talk about menstruation, especially at work, and people with menstruation-related health conditions have had trouble seeking help. Almost all women have some menstrual pain in their lives, but because of vast differences in these experiences, it is hard to know what is “normal”.

Throughout history, menstrual cramps have been underestimated and even today these problems are often thought to be imaginary or exaggerated, leading to women suffering unnecessarily only to be diagnosed with a medical condition later in life.

At the root of this problem is the **stigma associated with menstruation and beliefs that have undermined women’s ability to manage menstruation healthily.**

## Some of these beliefs are:

### 01 - MENSTRUATION SHOULD NOT BE DISCUSSED PUBLICLY;

Silence leads to ignorance and neglect, including at the political and workplace levels. This affects all aspects of women’s and girls’ human rights, including their rights to equality, health, housing, water, sanitation, education, freedom of belief, safe and healthy working conditions, as well as their right to take part in cultural and public life without discrimination.<sup>8</sup>



<sup>8</sup> Women's menstrual health should no longer be a taboo, say UN human rights experts. United Nations Declaration on International Women's Day, 2019. <https://www.ohchr.org/en/news/2019/03/international-womens-day-8-march-2019?LangID=E&NewsID=24256>

## 02 - MENSTRUATION IS DIRTY OR DANGEROUS;

Menstrual blood comprises normal blood and tissue, with no special or dangerous properties. However, many communities think the mere presence of menstruating women is harmful or dangerous to their environment.

Considering people “dirty” for menstruating can affect their overall hygiene and health, as some cultures prohibit touching or washing the genitals during menstruation, which can contribute to infections. This can be further exacerbated by a lack of access or opportunity to use welfare facilities/toilets for women in the workplace with a supply of clean water, and a reluctance of employers to provide sanitary protection.

The appearance of blood stains on clothes or places such as chairs continues to be a source of shame and fear amongst those who are menstruating in our societies.

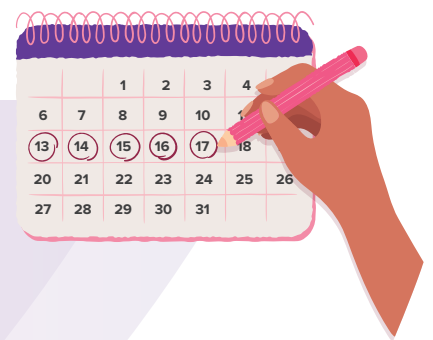
## 03 - MENSTRUATION LIMITS WOMEN'S ABILITIES;

It is commonly believed that menstruation limits women's physical or mental abilities. Women may face degrading comments about menstruation affecting their physical or emotional state and may be excluded from certain roles or leadership positions as a result.<sup>9</sup>

# Symptoms and/or health conditions related to menstruation

Menstruation is different for everyone and can change over a lifetime. But in some cases, menstruation prevents people from doing their usual activities and affects their overall capacity to work.

These issues can be physical, like abdominal cramps, fatigue and bloating;<sup>10</sup> or psychological, like mood swings, irritability and feelings of low mood;<sup>11</sup> to more severe menstrual health conditions.



<sup>9</sup> Menstruation and human rights - Frequently asked questions, UNFPA, 2022

<sup>10</sup> Menstruation and support at work | CIPD

<sup>11</sup> Ibid

## SOME MENSTRUAL HEALTH CONDITIONS INCLUDE

### DYSMENORRHEA

Menstrual cramps or painful periods. In some cases, this pain can be debilitating. Studies show that dysmenorrhea is a major gynaecological problem among people around the world, contributing to absenteeism from work, as well as a decrease in quality of life. The WHO estimates that 50 per cent of women of childbearing age experience dysmenorrhea in their life and 10 per cent are incapacitated for one to three days each month, since pain can last from 48 to 72 hours during their menstrual flow, with the biggest amount of pain happening between the first or second day of their period.



### MENORRHAGIA

Abnormally heavy or prolonged bleeding, which could indicate a hormonal imbalance or other health conditions.

### AMENORRHEA

Is the absence of or missed menstruation periods, which can be associated with work-related stress or be a symptom of polycystic ovary syndrome (PCOC).

### ENDOMETRIOSIS

The lining of the uterus grows elsewhere in the body and causes excruciating pain and/or excessive bleeding during menstruation. It affects 10 per cent of women of childbearing age.

### POLYCYSTIC OVARY SYNDROME

It can cause hormonal imbalances, irregular periods, excessive levels of androgens and cysts on the ovaries. It can lead to difficulties in conceiving, infertility and other distressing issues such as excess body hair, thinning hair on the head, weight gain or skin issues. It affects about 8 to 13 per cent of women of childbearing age, and 70 per cent of these cases are undiagnosed.

### ANAEMIA

Extremely heavy periods can also increase the risk of iron deficiency, leading to extreme fatigue, weakness, dizziness and other symptoms.

Source: WHO 2023

## WHAT IS MENSTRUAL HYGIENE?

According to the WHO/UNICEF Joint Monitoring Programme, menstrual hygiene management means women have:

- Access to clean material to absorb or collect menstrual blood.
- Private spaces where people can change clothes and menstrual products as often as necessary.
- Access to soap and water to wash their bodies as needed.
- Access to safe and convenient facilities.
- Basic education about the menstrual cycle and how to manage menstruation without discomfort and without fear.
- Access to medical information and care, ensuring they can make informed decisions about how to manage their menstruation and allowing them; to seek care if they experience disorders related to it.

Lack of access to the right menstrual products can increase risk of infection.

In addition to pain, fatigue and other related symptoms, women's health is at risk because, in the absence of specific policies, they continue working despite these symptoms, even when these have a debilitating effect on their ability to do so normally. This situation not only puts a physical burden but also an emotional burden on workers.

As a result, health conditions related to menstruation and menopause can lead women to ask for sick days regularly.<sup>12</sup> This can sometimes lead to additional scrutiny and disciplinary action, even dismissal, as a result of lack of attendance.

This “considerable” use of sick leave reinforces negative stereotypes about women's trustworthiness as workers.<sup>13</sup>



<sup>12</sup> According to a survey carried out by the Flo app exploring the impact of the menstrual cycle in workplace productivity, the majority of respondents reported a moderate to severe impact of their cycle on workplace productivity, with 45.2% reporting absenteeism (5.8 days on average in the previous 12 months). 48.4% reported not receiving any support from their manager and 94.6% said they were not provided with any specific benefit for issues related to their menstrual cycle, with 75.6% declaring wanting them. (Menstrual cycle-associated symptoms and workplace productivity in US employees: A cross-sectional survey of users of the Flo mobile phone app - Sonia Ponzo, Aidan Wickham, Ryan Bamford, Tara Radovic, Liudmila Zhaunova, Kimberly Peven, Anna Klepchukova, Jennifer L Payne, 2022 (sagepub.com))

<sup>13</sup> ABC of women workers' rights and gender equality, ILO, 2007

## WHAT IS PERIOD POVERTY?

Period poverty refers to the increased economic vulnerability posed by the cost of menstrual supplies (not only pads and tampons but also related costs such as painkillers and underwear).

**THE PRICE OF THESE PRODUCTS IS A KEY ELEMENT IN THIS TYPE OF POVERTY. AS A RESULT, CERTAIN COUNTRIES HAVE LOWERED, REDUCED OR ELIMINATED TAXES ON PADS AND TAMPONS.**

In Canada, India, Ireland, Kenya, Malaysia, Nicaragua, Tanzania, Trinidad and Tobago, Uganda, United Kingdom, and several states in the United States, menstrual products are exempt from taxation. Scotland<sup>14</sup> was the first country in the world to offer free menstrual health products.



<sup>14</sup> The global fight against period poverty, inequality and stigma | World Economic Forum (weforum.org)

# HOW CAN TRADE UNIONS SUPPORT MENSTRUATING WORKERS?

The right to a safe and healthy working environment is a fundamental human right,<sup>15</sup> and menstruation is not a hygiene issue but a health issue with physical, psychological, and social dimensions that needs to be addressed in the perspective of a life course – from menarche (the first period) to after menopause.<sup>16</sup>



## Trade unions can support menstruating workers by:

1. Negotiating menstrual leave policies in workplaces that secure paid leave or remote working options and adjusted hours for workers facing painful menstrual or other reproductive symptoms.
2. Negotiating better workplaces that include bathrooms with privacy for workers to change in; facilities to dispose sanitary pads or menstrual cloths; access to sanitary materials; and reasonable physical accommodations like ergonomic workstations to alleviate pain and discomfort.
3. Campaigning to eradicate workplace stress and stigma associated with menstruation and menopause in order to create a supportive culture open to discussions and understanding.
4. Providing education and awareness for both employers and employees about the challenges menstruating workers face and advocating for their rights.
5. Training to facilitate open discussions about menstruation and offering guidance on supporting and accommodating affected employees.
6. Carrying out risk assessments with a gender perspective to ensure that the working environments do not exacerbate menstruating employees' symptoms, such as temperature, ventilation, facilities, etc. These assessments must result in actions to address the problems identified as well as challenges to assumptions regarding 'women's work'.
7. Ensuring that employers uphold confidentiality and privacy and that they will not share information regarding the employee's menstrual cycle or symptoms without the employee's explicit consent.

<sup>15</sup> A safe and healthy working environment is a fundamental principle and right at work (Safety and health at work) (ilo.org)

<sup>16</sup> WHO statement on menstrual health and rights



## BEST PRACTICES

# SECURING WOMEN'S TOILET FACILITIES AT SUPERMARKET IN BANGLADESH

Water, sanitation and hygiene are big issues in Bangladesh. For women and girls, these issues are crucial, particularly during menstruation and pregnancy. Without proper sanitation facilities, women avoid relieving themselves until they are somewhere safe like their homes, which can in time increase the risk of urinary tract infections, kidney problems and other health issues.

Furthermore, the lack of access to proper sanitation facilities, means women workers often must use common facilities, risking exposure to violence and harassment.

With these factors in mind, activists from the National Shop Employees Federation (who are part of UNI Equal Opportunities Mentoring Programme), began drafting proposals with a gender-perspective to health and safety in negotiations for a new collective bargaining with employer Uttara Syed Grand Market. As a result, the women were able to achieve access to separate toilet facilities at the supermarket.

## STOP THE STIGMA

### Irish trade unions

In 2023, Ireland's largest trade union organizations – FSU, CWU, INMO, INTO, SIPTU, UNITE and the Irish Congress of Trade Unions -, launched their “Stop the Stigma” campaign,<sup>17</sup> aimed at implementing reforms that will enhance protection and support for those experiencing menstruation and menopause in the workplace.

The campaign has included a position paper as well as a list of best practice solutions for a proper menstrual and menopause workplace policy.

<sup>17</sup> What is the Stop the Stigma Campaign? - Forsa

## ACTIVITY 1

### MENSTRUATION: MYTHS AND REALITIES

**OBJECTIVE:** to debunk negative myths about menstruation

**MATERIALS:** paper and pencils

#### ACTIVITY

##### ► Presentation

Explanation of the purpose and objectives of the meeting.

##### ► Each participant is invited to write on a piece of paper:

- How do you or would you inform others that you are menstruating?
- Complete the phrase “Menstruation is...” or “Menstruation is like...”

Everyone will keep this paper until the end of the activity.

#### ACTIVITY:

1. The group is divided into subgroups of no more than five people.
2. Each subgroup is given a phrase that will remain hidden from the rest.

##### ► We propose some phrases that the facilitator will use according to the audience that participates in the workshop

- When we menstruate, we can't bathe.
- When we are indisposed, we cannot do physical activity.
- When your period comes, you're ready to be a mother.
- You can tell you're menstruating because you get cranky.
- Staining your clothes when you're menstruating is shameful.
- Menstruation is a private matter and is only a woman's business.
- Menstrual cramps aren't so terrible that you miss work.

3. Participants in each group are invited to talk and discuss the phrases recorded: whether anyone ever told them to you, whether they heard it, and whether they believe it to be true or false. It is suggested that you reflect on the origin of this statement.

Then, participants are invited to think of a way to share the phrase with the rest but without mentioning it.

They can choose a song, a poem, role playing.

Finally, they will choose two people to share what was discussed.



### ► Closing

Each subgroup presents the phrase they were given in the way they choose to present, without saying what the phrase was so the rest can guess which phrase it is.

Once the rest of the participants have guessed, the two chosen people from the group presenting will further share with the group which conclusions they reached.

At the end, there will be a sharing of the phrases and what sensations they produce in the participants (Fear, loneliness, anguish...) and they will be invited to read aloud what they wrote at the beginning of the activity, reflecting the paper they wrote at

Participants, at the end, those who wish to do so will read aloud the paper they wrote at the beginning of the activity. They will be instructed to reflect on how and why we give names and definitions to the concepts that we have just discussed. **Symptoms and/or disorders related to menstruation.**

## ACTIVITY 2

### **MENSTRUATION IS A TRADE UNION ISSUE: DISCUSSING POLICIES AND MEASURES TO SUPPORT MENSTRUATING**

**OBJECTIVE:** to brainstorm policies and measures that protect and provide support for menstruating workers and make gender related issues visible as union issues.

**MATERIALS:** paper and pencils, two flip-charts

#### **ACTIVITY**

1. The group is divided into subgroups of no more than five people. The groups can change to provide for new exchanges and insights.
2. After reading the six suggested points of how trade unions can provide support for menstruating workers, participants are invited to discuss in their subgroups other ways in which trade unions can provide support or protect menstruating workers' rights. They should focus their discussions on two areas: within trade unions as affiliates and within the workplace as trade unions representatives.
3. Each subgroup will choose one person to report back to the plenary.
4. During the plenary discussion, the trainer will have two flip-charts. One for suggestions on how trade unions can support their affiliates internally and another one as how trade unions can support their affiliates in the workplace.



