Staff Menstruation (Periods)
Guidance

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1. **Introduction and Support**

1.1. **Introduction**

University of Strathclyde is a *people-oriented*, socially progressive employer committed to creating an inclusive and supportive environment for all staff.

We recognise the impact of menstruation (periods) on staff health, wellbeing and productivity and are committed to supporting menstruating people at work through the [Staff Menstruation (Periods) Policy](#) and this guidance.

For staff experiencing symptoms, it can be a challenging and stressful time and/or a sensitive and personal matter. For their line manager, it is a health and wellbeing concern and a matter requiring sensitive, confidential, and empathetic support.

This guidance has been developed by Human Resources. If you have any feedback, please email Human Resources.

1.2. **Supplementary Information and Support**

Please refer to [Appendix A](#) for details on:

- Related definitions of conditions and terms used throughout this guidance.
- The steps menstruating people can take to ease related symptoms, as recommended by the [NHS Inform Scotland website](#), including pain management, and seeking additional medical support.
- On campus provision of period products.
- Period product provision from Glasgow City Council and other local councils, including how to access the [PickupMyPeriod app](#).
- Charities and organisations that support menstruating people.
2. Definitions, Symptoms and Challenges

2.1. Definitions, Symptoms and Challenges

Menstruation (periods) is the process of discharging blood and other material from the lining of the uterus, typically on a monthly cycle, from puberty until the menopause, except during pregnancy. Of note, the time of the monthly cycle can vary.

It is not only women who experience menstruation, and related symptoms. Some trans men, non-binary people and intersex people are also affected.

Although not an exhaustive list, for definitions of related conditions and terms, please refer to Appendix A.

2.2. Symptoms

Menstruating people experience symptoms differently, in both the variety and severity of the symptoms.

Common symptoms of menstruation include, but are not limited to, acne; abdominal pains/cramps; abdominal swelling; bloating; changes in mood and irritability; constipation; dehydration, diarrhoea; dizziness; fainting; fluid retention; food cravings; headaches; increased urination; low energy or fatigue; lower back pain; joint pain; nausea; sore breasts; and trouble sleeping.

2.3. Staff Challenges

In part due to associated stigma and myths, menstruating staff can experience a lack of understanding, support or empathy from their line managers and colleagues. Consequently, some staff members do not disclose their symptoms at work. Furthermore, some people who take time off work because of menstruation, do not declare the real reason for their absence.

For example, this can be because the staff member feels:

- They do not know their line manager well enough to confide in them.
- Their symptoms might be embarrassing for them and/or the person in whom they are confiding.
• Cautious because the person in whom they are confiding is a different gender to them, younger, older, or might be perceived to be unsympathetic.
• Their symptoms are a private and/or personal matter.
• That, because other staff do not appear to be negatively impacted by menstruation, their experience might not be taken seriously.

Other staff concerns can include that:

• Their symptoms will not be considered seriously or treated sensitively.
• Their symptoms will not remain confidential.
• They will be regarded as being less capable and competent.
• Their job security and/or prospects for promotion will be affected.

3. Responsibilities

3.1. All Staff

As a socially progressive employer it is important to foster an inclusive and supportive culture for all staff, including those experiencing menstruation. To support this, all staff are expected to familiarise themselves with the Staff Menstruation (Periods) Policy and this guidance. Doing so will help staff to support their colleagues who experience menstruation. Menstruation is associated with taboos and myths that need to be challenged to normalise discussions. As such, it is important to sensitively listen to - and empathise with - the experiences and needs of those experiencing menstruation.

3.2. Menstruating Staff

Menstruating staff who are experiencing symptoms - and whose health, wellbeing and productively are negatively impacted - are encouraged to discuss their needs with their line manager if they feel comfortable to do so.

Alternatively, if an individual feels that they are unable to do so, or feels that discussions have not been handled in line with the principles outlined in the Staff Menstruation (Periods) Policy, and this guidance, then staff are encouraged to contact the Staff Disability Adviser, Occupational Health, the Employee Assistance Programme (EAP) or Human Resources.
To support discussions, menstruating staff may find it helpful to:

- Compile a list of the symptoms which are impacting on their performance, health and wellbeing, or any other aspect of work, together with ideas on how these impacts could be mitigated.
- Chart their experience on a calendar/diary, as a predictor, to identify which symptoms are most likely to impact upon their work performance and when.
- Agree to have regular meetings with their line manager to review agreed actions.

### 3.3. Line Managers

Although line managers are not expected to be experts on menstruation, they should have a basic understanding to support their staff.

Line managers are responsible for supporting menstruating staff confidentially and sensitively by:

- Familiarising themselves and acting in accordance with [Staff Menstruation (Periods) Policy](#), and this guidance, to understand how to best support menstruating staff.
- Attending and completing relevant training and development sessions and online courses.
- Recognising that conversations about menstruation can be challenging for both managers and staff and using resources from organisations such as [ACAS](#), [Chartered Management Institute](#) and [Harvard Business Review](#) to have supportive conversations. The [Menopause in the Workplace: Guidance for Managers](#) can also help with having discussions.
- Listening to and responding to staff in a sensitive, non-judgemental manner.
- Ensuring that line managers and other team members do not treat colleagues less favourably because of menstruation.
- Actively considering and supporting reasonable adjustments for staff experiencing menstruation symptoms to remove or minimise the impact upon their work.
- Confirming any agreements of actions/accommodations/adjustments in writing.
- Implementing any agreed actions/accommodations/adjustments.
- Agreeing with the staff member which, if any, other staff or services, should be informed about any accommodations or adjustments made (even if the reason is not disclosed).
- Maintaining regular dialogue and reviewing arrangements with the staff member to ensure that needs are being met.
Seeking additional advice from appropriate support services, such as: Human Resources; the Employee Assistance Programme (EAP), which includes resources on the menopause; Staff Disability Adviser; Occupational Health; and Health and Wellbeing; and signposting the staff member to these relevant support services.

4. **Legal Basis and Risk of Discrimination**

There are two main strands of law that may relate to the perimenopause and menopause:

- The Equality Act 2010 protects workers against discrimination, including because of their sex, a disability and their age.
- The Health and Safety at Work Act 1974 says an employer must, where reasonably practical, ensure health, safety and welfare at work.

Menstruation is not specifically protected under the Equality Act 2010. However, if a member of staff is treated unfairly because of menstruation, this may amount to discrimination because, for example, of their sex and/or a disability, and/or their age.

5. **Reasonable Adjustments for Disabled Staff**

The experience of some menstruating staff can be regarded as a disability, for example those who have endometriosis. For more details, please refer to the definition of disability in Appendix A, and the Disability Policy.

Reasonable adjustments may help to support staff with challenging menstruation symptoms affecting the quality and experience of their work. Appropriate adjustments may include:

- Review of allocation of work and responsibilities.
- Flexibility in working arrangements, including working environment, working hours and time off to attend relevant medical appointments - some of which may require short notice changes - as detailed in our Special Leave Policy, as appropriate.
- Adoption of agile working, role permitting, including flexibility around working hours and breaks.
6. An Intersectional Approach to Menstruation

The intersections between sex, gender reassignment, disability and other protected characteristics can combine to create interdependent modes of disadvantage, requiring another layer of consideration.

6.1. Trans, Non-Binary and Intersex People

For definitions, please refer to Appendix A and, for more details, please refer to the University’s Guidance and Support for LGBT+ Students and Staff.

It is not uncommon to assume that menstruation is only experienced by cisgender women. However, menstruation can be experienced by people regardless of their gender identity and gender expression, meaning that trans men, non-binary people and intersex people can also menstruate. As such, it is important to consider and account for the experiences of trans, non-binary, and intersex people in conversations about supporting menstruating people at work.

Transgender and non-binary people can experience gender dysphoria or other negative experiences during menstruation and may require additional support.

During this time, some trans, non-binary and intersex staff can benefit from agreed agile working arrangements.

6.2. Menstruation Post-Pregnancy

Following pregnancy, periods may change and can become more irregular, more painful, and heavier. Periods are affected by milk production hormones and, as milk production reduces, menstruation returns. Subsequently, accommodations to support staff may vary following pregnancy. Given this, managers should be responsive to individual staff needs.

6.3. Religious Observance and Cultural Practices

Religious and cultural practices can affect how societies and/or individuals regard and experience menstruation. This means that faith and belief can influence the needs of staff during menstruation.
For example, some Christian, Orthodox Jewish, and Hindu staff may exercise purity practices during menstruation. Such practices of purity can require menstruating staff to refrain from handling specific items, or items to be handled by others during menstruation, such as ritual objects.

Other staff following Jainism may expect menstruating individuals to rest and refrain from performing any religious, and some normal daily duties. Given this, staff are encouraged to speak to their line managers about their particular needs.

Accommodations could include agreed agile working arrangements on days during menstruation.

6.4. Race and Ethnicity

Evidence from medical experts, sociologists, and people of colour demonstrates that reports of pain or discomfort from people of colour are not taken as seriously as reports from white people due to racial biases. This is compounded by the fact that women in pain are often ignored, are deemed to be “emotional” or are not taken seriously, as compared to men in pain. As such, women of colour can experience an additional layer of disadvantage. Line managers and academic staff receiving reports of negative experiences from people of colour must take matters seriously and act appropriately.

From this perspective, it is important to listen to and ask people of colour what support they require as they know themselves and their needs best.

6.5. Neurodiversity

Neurodiverse people can experience menstruation differently from their neurotypical colleagues. This can include sensory differences such as heightened sensitivity to pain or a reduced ability to inhibit certain behaviours. As such, neurodiverse people are more likely to experience painful periods, heavy periods, menstrual hygiene problems, and cyclical mood and behavioural changes, similar to Premenstrual Tension (PMT), than their neurotypical counterparts.

Suitable support may include agreed agile working arrangements, providing auxiliary aids such as noise-cancelling headphones or fidget toys and engaging with appropriate staff support services.
6.6. Other Disabilities

Disabled staff may face barriers, and stigma, in discussing their health, condition, needs and adjustments. Given this, disabled people who experience menstruation symptoms may be more reluctant to disclose and discuss this with their line manager, or relevant staff, due to negative past experiences or a perceived unsupportive response.

Clearly signposting staff to general support, such as agreed agile working arrangements, and engaging with appropriate staff support services may enable disabled staff experiencing menstruation to access support without disclosing.

7. Appendix A: Supplementary Information and Support

7.1. Definitions

Although not an exhaustive list, the definitions of relevant conditions and terms include:

- **Adenomyosis** is a condition that causes the inner lining (endometrium) of the uterus (womb) to bury into the muscular wall of the uterus. Whilst not life-threatening, its symptoms can significantly impact daily life.
- **Cis or Cisgender** is a term used to describe a person who identifies with the sex they were assigned at birth. Cisgender is the word for anyone who is not transgender.
- **Disability** under the Equality Act 2010 is defined as a physical or mental impairment (including health or medical conditions) which has a substantial (more than trivial), long term (more than 12 months) and adverse effect (negative impact) on their ability to do normal day to day activities (including work). As such, the experience of some menstruating staff can be regarded as a disability. Furthermore, the symptoms of other pre-existing physical or mental impairments can be exacerbated during menstruation.
- **Dysmenorrhoea** is the term for painful periods. Symptoms can range from dull, achy cramps to intense pain that feels unmanageable and cannot be easily relieved.
- **Endometriosis** is a long-term chronic condition in which tissue similar to the lining of the uterus grows in other parts of the body. A common symptom of Endometriosis is Dysmenorrhoea.
• **Gender Dysphoria** is a term that describes a sense of unease that a person may have because of a mismatch between their biological sex and their gender identity, which can be so intense it can lead to depression and anxiety and have a harmful impact on daily life.

• **Gender Identity** refers to how we see ourselves in regards to being a man or a woman or somewhere in between/beyond. An individual’s gender identity can change or fluctuate over their lifetime.

• **Intersex** is a term used for people who are born with variations of sex characteristics which do not always fit society’s perception of male or female bodies. Intersex is not the same as gender identity or sexual orientation.

• **Menorrhagia** is when a person experiences heavy or prolonged menstrual bleeding/periods. This is common and may be normal for an individual.

• **Menopause** is when a person stops having periods for 12 consecutive months. Typically occurring between the ages of 45-55, it is a natural part of the aging process for affected people. For some, this can happen earlier in life, for example due to an auto-immune disease or cancer treatment. For more information on Menopause, please refer to our [Menopause in the Workplace Policy and Guidance](#).

• **Menstruation (Periods)** is the process of discharging blood and other material from the lining of the uterus, typically on a monthly cycle, from puberty until the menopause, except during pregnancy. It should be noted that the time of the monthly cycle can vary.

• **Neurodiversity** is a term that identifies people who have neurological developmental differences or disabilities such as, but not limited to, ADHD, Autism, Dyslexia, and Dyspraxia.

• **Neurotypical** is a term used to describe people whose brain functions, ways of processing information and behaviours are seen to be standard.

• **Non-Binary** is a term used to describe a person who identifies as either having a gender which is in-between/beyond the categories of “man” and “woman”, as fluctuating between “man” and “woman”, or as having no gender, either permanently or some of the time.

• **Polycystic Ovarian Syndrome (PCOS)** is a common condition that affects how ovaries function, causing irregular ovulation, or no ovulation at all.
• **Premenstrual Dysphoric Disorder (PMDD)** is a much more severe form of PMS/PMT. It is a chronic and complex medical condition in which affected people may experience difficulties with their mental health as well as physical symptoms.

• **Premenstrual Syndrome/Tension (PMS/PMT)** (PMS/PMT) refers to the physical and mental symptoms experienced before a period, which vary from person to person.

• **Primary Amenorrhea** is the delayed start to menstruation during puberty and **Secondary Amenorrhea** is paused or missed menstruation for over 3 months, in the absence of pregnancy.

• **Reasonable Adjustments for disabled staff** are modifications made to the working environment or structure to support disabled staff to carry out their role. As stated, the experience of some menstruating staff can be regarded as a **disability** under the **Equality Act 2010**.

• **Trans or Transgender** is an umbrella term used to describe trans men, trans women, non-binary people, and cross-dressing people.

### 7.2. Self-Managing Symptoms

We recognise that menstruating people experience symptoms differently, in both variety and severity. As such it may not be possible to self-manage and alleviate symptoms. However, if you are experiencing menstrual symptoms and feel it would be of benefit, the University would encourage you to:

• Seek medical advice from your GP or nurse at your doctor’s surgery. Prescriptions are free of charge in Scotland for those who are resident in the country.

• Take the positive steps the [NHS Inform Scotland website](https://www.nhsinform.scot) identifies to help alleviate symptoms and treat:
  - Dysmenorrhea.
  - Menorrhagia
  - Milder period pain.
  - Premenstrual Syndrome/Tension (PMS/PMT).
7.3. On Campus Provision of Free Period Products in April 2023

For the location of buildings outlined in this section, please refer to the online campus maps.

7.3.1. Female Toilets

- Barony (BH105).
- Cathedral Wing (CW 252, 352, 452, 552 & 651).
- Curran (CU 100C, 201, 303, 326, 401, 5091 & 605).
- Graham Hills (GHB 209a, 209b, 505, 517, 625 & 706a).
- Hamnett Wing (HW102 & 206).
- Henry Dyer (HD 105).
- James Weir (JW 201, 307, 409a, 509a, 609a & 702b).
- John Anderson (JA 324, 514, 735 & 838).
- Livingstone Tower (LT 252, 352, 552, 752, 952, 1152 & 1352).
- Lord Hope (LH113C, 212 & 315).
- Lord Todd AQ 217a & 201b).
- Roberston Wing (RW105).
- McCance (MC 159 & 305d).
- Stenhouse East Wing (SW 154, 252, 351, 452, 551 & 654).
- Stenhouse West Wing (As above).
- Strathclyde Sport (SH 213).
- Steppes (Female Changing Room).
- Thomas Graham (TG 201, 402 & 801d).
- Teaching & Learning (TL 108, 137 & 451(M), 107, 136, 206, 233, 308, 321, 331, 435, 452, 507, 555, 607, 707 & 807(F)).
- Technology Innovation Centre (101b, 105, 208, 222, 319, 428b, 438, 529b, 536, 627b, 634, 724b, 731 & 905).
- Royal College (256d, 370d, 428, 560c & 612).

7.3.2. Accessible, Gender-Neutral Toilets

- Barony (BH 106).
- Curran (CU 203a, 324, 503a & 635).
7.3.3. **Gender Neutral Toilets**

- Royal College (256b, 256c, 303f, 461a, 461b, 560b & 657).

7.3.4. **Restocking Period Provision Products**

If products run out, please email estates.helpdesk@strath.ac.uk to explain which toilet needs restocked. The help desk will then forward requests onto the relevant cleaning supervisor for the building.

7.4. **Support from Glasgow City Council and Local Councils**

Local councils currently provide free period products across a range of locations. According to [Glasgow City Council’s website](https://www.glasgow.gov.uk/services/health-and-social-care/free-period-products), free period products are available from council buildings, Glasgow Life venues, Police Stations, and Health and Social Care Partnership (HSCP) offices.

[Contact your local council](https://www.glasgow.gov.uk/services/health-and-social-care/free-period-products) to find out where you can access free products in your local area.

You can also use the [PickupMyPeriod app](https://www.pickupmyperiod.com) to find out where you can access free period products:


7.5. **Charities and Organisations**

There are several charities and organisations that can provide general support for people menstruating. These include:
• **Action Aid**, an international charity that works with women and girls living in poverty to support those menstruating.

• **Bloody Good Period**, a charity fighting for menstrual equity and the rights of all people who experience menstrual bleeding.

• **Endometriosis UK**, a national organisation that provides support services, campaigns for change, and supports research for those affected by endometriosis.

• **Freedom 4 Girls**, a charity fighting against period poverty.

• **Hey Girls**, a charity dedicated to eradicating UK period poverty, improving access to quality products, and increasing education around period health.

• **Mama Cash**, a rights-based charity to support women, girls and intersex people who menstruate.

• **Switchboard**, a charity for LGBTQ people looking for a sense of community, support or information.

• **Terrance Higgins Trust**, a charity which provides resources on support and sexual health for trans and non-binary people.

• **The Gift Wellness Foundation**, a charity that supports women in crisis by providing non-toxic pads, and campaigns against period poverty.

• **Wellbeing of Women**, a charity to improve the health and wellbeing of women, girls and babies through research, education, and advocacy.

There are several charities and organisations that provide specialist support for people with **Polycystic Ovarian Syndrome (PCOS)**. These include:

• **AskPCOS**, a comprehensive online resource guide to PCOS.

• **Cysters**, a grassroots charity, dedicated to supporting individuals and improving the health, education, and welfare of those with reproductive and mental health issues.

• **PCOS Awareness Association**, a non-profit organisation dedicated to the advocacy of PCOS.

• **PCOS Challenge**, the National Polycystic Ovary Syndrome Association, is a non-profit support and advocacy organisation.

• **PCOS Vitality**, a charity aiming to raise awareness of PCOS, provide peer support, and tackle related stigma.
• Royal College of Obstetricians and Gynaecologists which provides online PCOS information and resources.

• Verity, a self-help group for those with PCOS.

• Wellbeing of Women, a charity to improve the health and wellbeing of women, girls and babies through research, education and advocacy, and has dedicated PCOS Resources.

There are several charities and organisations that provide specialist support for people with Premenstrual Dysphoric Disorder (PMDD). These include:

• Harvard Health Publishing, the consumer health education division of Harvard Medical School, which provides resources to support those with PMDD.

• Mind, a charity providing advice and support to empower anyone experiencing a mental health problem, which provides resources to support those with PMDD.

• The International Association for Premenstrual Disorders (IAPMD), a US based organisation, providing a lifeline of support, information, and resources to support those with PMDD.

• The National Association for Premenstrual Syndrome (NAPS), a UK based organisation to provide information, advice, and support to those with PMS/PMDD.

• UpToDate, an online evidence clinical guidance resource to support those with PMDD.

• WebMD, a US based medical and health communication organisation, with resources to support those with PMDD.