Menstruating when Caring: Provisions, Experience, and Education

Introduction

- Under The Period Products (Free Provision) (Scotland) Act 2021, local authorities are now required to provide free and universal access to menstrual products for those who need them (1).
- Although they are now freely available to students in schools and universities, free
 point of use provision does not yet extend to other public service bodies, including the
- Importantly, little is currently known about the experience and understanding of menstruation among NHS healthcare workers.
- Anaesthetists, due to the nature of their work, may spend extended periods of time within theatre suites, often out of hours. Consequently, they may struggle to access menstrual products and so we chose to focus on them in this study.

Aims

- 1. To assess the provision of menstrual products in theatre suites in hospitals across South East Scotland
- 2. To understand the experience and impact of menstruation amongst anaesthetists
- 3. To consider the extent of understanding about menstruation in non-menstruating anaesthetists
- 4. To provide suggestions for potential measures that might improve the experience of menstruating

Methods



We surveyed the literature, using Medline and other databases, and found a lack of research regarding the experience of menstruation in health care workers. We referred to the FIGO (International Federation of Obstetrics and Gynaecology) Guidelines on Abnormal Menstrual Bleeding (2).

We designed three surveys on Survey Monkey, Google Forms and Microsoft Forms to distribute via email across anaesthetic departments in South East Scotland. The surveys were open for 2.5 weeks.



The first survey looked at provision of period products in theatre changing rooms in hospitals in South East Scotland.



The second and third surveys considered the experiences of menstruation in the workplace from the perspective of anaesthetists in South East Scotland who do and do not menstruate respectively.



We analysed responses including analysis of themes within free text comments. This established the various perspectives on current experiences and potential solutions.

References

1. Period Products (Free Provision) (Scotland) Act 2021, asp 1. Available at https://www.legislation.gov.uk/asp/2021/1/contents (Accessed: January 14, 2021).

2. Munro, M.G., Critchley, H.O., Fraser, I.S. (2018), The two FIGO systems for normal and abnormal uterine bleeding symptoms and classification of causes of abnormal uterine bleeding in the reproductive years: 2018 revisions. Int J Gynecol Obstet, 143: 393-408. https://doi.org/10.1002/ijgo.12666



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- Ideal frequency of product change
- Actual frequency of product change
- Expectations of people who not menstruate

76% of people who do not menstruate think the NHS should provide free menstrual products

"What the NHS pays for it then takes away from elsewhere. We should the NHS provide shower

> "How would we stop it being abused? People purloin soap and toilet already. Think of the hand wash stolen from the NHS during the pandemic."

Analysis of Free Text

- when necessary whilst on call.
- It could be uncomfortable or difficult to be discrete about menstruation.
- Some non-menstruating respondents agreed menstrual products should be provided conditionally, e.g. for emergencies, or entirely, like toilet paper.
- Non-menstruating respondents also often centred male experiences, for example by making analogies to male health or other necessities (such as shaving) which would not be used during work hours.
- of medicine, and the potential for abusing the system.

Discussion and Evaluation

- Only 1 out of 16 toilets in theatre suites within South East Scotland provided period products; this was a female staff toilet in the Royal Infirmary of Edinburgh. Notably, the products were provided only by other staff.
- 80% of menstruators and 76% of non-menstruators thought the NHS should provide free menstrual products, indicating cross-gender support for change. Most menstruators indicated they would only use menstrual products on occasion or in emergencies, suggesting financing provisions would not be unachievable.
- The most common timeframe for menstruators to change products at work was every 4-5 hours, despite the most common timeframe women wished to change within being 2-3 hours. This indicates that the personal needs of staff are not being met.
- Most non-menstruators thought they understood the experience of menstruating relatively well however it's unclear if they were referring to personal experience or science; this could have been clarified in our survey.
- The most popular changes identified to make the working experience of menstruating better were access to free products, more frequent breaks and closer proximity to bathrooms. Frequent breaks within surgery may be unrealistic however future theatre designs could incorporate easier-to-access bathrooms, and of course menstrual products can be supplied anywhere.

Strengths

- The surveys were distributed widely across SE Scotland.
- There was a mix of closed and open-ended questions.
- The provision survey had a 100% response rate
- The process of filling out the surveys may have raised awareness around the topic.
- Anonymity should have increased response rates and encouraged honest contributions.

- wellbeing of doctors. This is exacerbated by a lack of adequate supportive resources. that provision is necessary. Products would be utilised and would improve experiences of
- Menstruation at work can be a source of discomfort, affecting the productivity and • There was little period product provision in theatre suites despite an overwhelming opinion menstruating at work.
- Further discussion and education should be encouraged amongst non-menstruators. Although a majority were aware of difficulties and open to discussion to some extent, improved discourse would also work towards reducing stigma.
- Further work should be done to determine how an appropriate range of period products can be provided in hospitals in a cost-effective, accessible way.

• Menstruators had multiple experiences of being unable to change menstrual products

• Non-menstruators also discussed the limited budget of the NHS, the well-paid aspect

Weaknesses

- Surveys 2&3 had a low response rate, potentially due to the personal nature of the questions and 'survey fatigue'.
- Access to Google Forms surveys on NHS technology was blocked.
- Only anaesthetists were surveyed which may have generated specific views from a higher socioeconomic perspective.
- People with worse experiences were more likely to respond, leading to selection bias (combatted via incentives).

Conclusion