


# Menstrual Health and Disability

GUIDANCE NOTE FOR PRACTITIONERS







This guidance note on menstrual health and disability has been developed collaboratively by the African Coalition for Menstrual Health, Liliane Fonds and AFRIpads, with technical oversight from the United Nations Population Fund's East and Southern Africa Regional Office (UNFPA ESARO). The purpose of this document is to support menstrual health practitioners in designing and implementing inclusive menstrual health interventions tailored to the needs of women and girls with disabilities.<sup>1</sup> Drawing from expertise across these organizations and real-world insights, this note aims to equip practitioners with practical tools, evidence-based approaches and key considerations to address the intersecting challenges of menstruation and disability. Together, we strive to promote dignity, autonomy and inclusion for all menstruators, ensuring that menstrual health interventions reach and serve everyone.

<sup>1</sup> This document uses the terms “women” and “girls” primarily for reasons of clarity, conciseness and consistency with existing data and research. While these terms are used throughout, UNFPA recognizes and respects the diversity of gender identities and expressions. We acknowledge that not all individuals who experience issues discussed in this document identify as women or girls, and that the experiences of gender-diverse individuals are crucial to understanding these issues fully.



# Introduction

Menstrual health plays a critical role in the health, dignity and autonomy of women and girls, and it is a fundamental component of sexual and reproductive health and rights (SRHR). However, managing menstruation may present challenges for persons with disabilities. The Convention on the Rights of Persons with Disabilities explains that: “Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.” In relation to menstruation, this group often encounters multiple stigmas, including misconceptions surrounding menstruation and those around disability, as well as possible compounded discrimination due to gender, age, ethnicity and more. Together, these barriers can lead to exclusion from essential information, resources and support systems, further marginalizing individuals who already face significant societal challenges.

This guidance note is based on the UNFPA [Regional Strategic Guidance to increase access to Sexual and Reproductive Health and Rights \(SRHR\) for Young Persons with Disabilities in East and Southern Africa](#) and its [accompanying situational analysis](#), as well as the [UNFPA Guidelines for Providing Rights-Based and Gender-Responsive Services to Address Gender-Based Violence and Sexual and Reproductive Health and Rights for Women and Young Persons with Disabilities](#). It draws on principles outlined in the [United Nations Children’s Fund’s \(UNICEF\) Menstrual Health and Hygiene \(MHH\) Guidance Note for Girls and Women with Disabilities](#) and the UNFPA-supported [Disability Awareness Checklist for Health Care Services](#) to strengthen support systems, improve access to materials, and create a safe environment for managing menstruation. Informed by UNICEF and UNFPA approaches, which highlight four pillars (social support, knowledge and skills, facilities and services, and access to appropriate materials), this guidance note introduces key considerations, challenges, success factors and recommendations for ensuring menstrual health practices are accessible to those with disabilities.

# Types of disabilities and their relation to menstrual health

Following the Convention on the Rights of Persons with Disabilities, this guidance note is grounded in the social and human rights model of disability, which emphasizes the barriers created by society, rather than individual impairments. These barriers exist across physical spaces, information and communication systems, societal attitudes, government policies and institutional structures, including health, welfare and education. By addressing these challenges, communities can foster more inclusive and equitable environments for persons with disabilities.

Embracing the diversity of disability is fundamental to ensuring menstrual health interventions uphold dignity, autonomy and inclusion. Women and girls with disabilities can face unique menstrual health experiences and needs shaped by social and environmental factors, as well as their impairments. Below are key disability categories and considerations to advance equitable and accessible menstrual health for all.

- **Physical disabilities:** These impact a person's mobility or ability to control physical movements. For example, wheelchair users may find it challenging to place, adjust and change menstrual products independently. Limited hand dexterity can also impact the ability to use standard products, requiring alternative designs or assistance.
- **Sensory disabilities:** Sensory disabilities, including visual and auditory differences, can interact with societal barriers that limit access to information, communication and participation.
  - › Individuals with visual impairments may face challenges with the placement and orientation of menstrual products, detecting when menstruation begins and recognizing when products need changing. Additionally, visual impairments can affect a person's ability to ensure they have fully cleaned themselves, which has implications for the type and quantity of products needed, such as increased soap usage.



- › Those with auditory impairments encounter communication barriers that limit their access to menstrual health-related communication materials. Persons with auditory impairments can benefit greatly from visual aids and accessible education materials.
- **Cognitive and intellectual disabilities:** Individuals with cognitive or intellectual disabilities may require tailored educational approaches and tools. Learning to manage menstruation can be challenging without accessible and clear information, and some may need ongoing support to build confidence in menstrual health practices. Additionally, the challenges associated with menstruation, such as mood changes, may be heightened or not appropriately recognized for individuals with intellectual disabilities, further emphasizing the need for sensitive and supportive approaches.
- **Neurodevelopmental conditions:** These include conditions like autism spectrum disorder, where sensory sensitivities can make certain products intolerable due to texture or smell. Emotional and sensory regulation difficulties can add stress to managing menstruation, necessitating carefully chosen products and additional support.



Understanding the diversity within these categories is essential for designing effective menstrual health interventions that respond to the characteristics of persons with disabilities.



# Key challenges in menstrual health for women and girls with disabilities

Women and girls with disabilities face a range of challenges when it comes to managing their menstrual health. Below are some of the most common obstacles that practitioners should consider. Please note that this list is not exhaustive, and we acknowledge that there are a wide variety of specific challenges for specific persons and their experiences.

- **Double stigma:** Menstruation is a sensitive topic in many communities, and it can be even more stigmatized for persons with disabilities. This dual stigma leads to limited open discussion, restricted access to menstrual health information and products, and increased social exclusion. Navigating overlapping needs, such as managing incontinence alongside menstruation, requires tailored support and resources. Addressing these combined needs requires access to suitable materials and support systems to manage both effectively. The double stigma of disability and menstruation prevents persons with disabilities from getting the support they need.
- **Physical barriers:** Persons with different types of disabilities experience physical challenges in various ways. Wheelchair users or those with limited hand mobility may find it difficult to place, secure and adjust menstrual products or maintain hygiene. Standard bathrooms and sanitation facilities may not be equipped to support those with disabilities in managing menstruation independently.
- **Inaccessible menstrual health materials:** Persons with disabilities can have different needs than persons without disabilities when it comes to menstrual health products. For individuals with cognitive or intellectual disabilities, such as autism or cerebral palsy, sensory sensitivities can make standard products distressing. Meanwhile, those with visual or auditory impairments may face different challenges, requiring tools like tactile or auditory aids to manage their menstrual cycles and hygiene effectively. Furthermore, individuals with physical disabilities, especially those who move on the ground, often require additional hygiene materials, such as soap to maintain cleanliness during menstruation. Ensuring access to sufficient supplies is essential for their health and dignity.
- **Social and emotional factors:** Many persons with disabilities rely on caregivers or family members for daily support, including managing menstruation. The lack of privacy and dependency on others can contribute to feelings of embarrassment or loss of dignity. In some cases, caregivers lack the knowledge or comfort to assist with menstrual health effectively, which can lead to neglect or substandard care and support.



- **Educational barriers:** Traditional menstrual health education may not be accessible to individuals with intellectual or developmental disabilities. Commonly used materials and approaches often need adaptation to be inclusive, using simple language, braille and visual aids or sensory-friendly materials to meet different learning needs. For those with sensory disabilities, materials in different formats, such as braille and sign language can help. Furthermore, individuals with cognitive disabilities may need repeated instruction and practical demonstrations to build the skills needed for independent menstrual health management.
- **Financial barriers:** Persons with disabilities may face more challenges in finding employment or starting a business, due to societal misconceptions around disability and exclusive work environments. The consequence of this is, on the one hand, that limited livelihood opportunities, in interaction with other societal barriers, make persons with disabilities at greater risk of poverty. On the other hand, being in poverty makes the challenges persons with disabilities face larger. This also has an effect on menstrual health management for women and girls with disabilities. Financial barriers often stand in the way of having access to proper care, assistance, information and menstrual health products.
- **Underrepresentation:** Stakeholders in menstrual health management for young women often run awareness campaigns on menstrual health and management. However, the visible lack of representation of young people with disabilities in these campaigns complicates the effectiveness of these efforts to achieve independent menstrual health, education and management for young women with disabilities.
- **Insufficient capacity:** Actors in menstrual health management often fail to recognize the variety of needs of young women with disabilities, which has curtailed the reach of menstrual health management and education among young women with disabilities. This insufficient capacity has limited appropriate service delivery of menstrual health care products and materials to young women with disabilities, leaving them locked out of targeted initiatives for dignified menstruation. In addition, focus on other important topics, such as family planning methods, sexually transmitted infection prevention and prevention of maternal and prenatal mortality and morbidity, has enforced the insufficient capacity around menstrual health and management for young women with disabilities.



Addressing these challenges requires intentional planning and inclusive design to support the diverse needs of persons with disabilities.



# Critical success factors for inclusive menstrual health

For practitioners to develop effective menstrual health interventions for individuals with disabilities, they must consider the following success factors.

- **Supportive systems:** In many cases, caregivers, family members and community workers play a central role in providing both practical and emotional support. Effective programmes should involve these individuals in education and training to ensure they can offer informed and compassionate assistance. Such involvement can also help reduce stigma and promote openness around menstrual health and disability.
- **Inclusive menstrual products:** Menstrual products should be designed with consideration for different physical and sensory needs with inputs from end-users. Liliane Fonds and the [UNFPA Situational Analysis: Access to Sexual and Reproductive Health and Rights \(SRHR\) for Young Persons with Disabilities in East and Southern Africa](#) highlights specific technical adaptations that enhance accessibility, such as:
  - › **Comfortable and easy to use:** Large and comfortable pads that dry quickly.
  - › **Adapted fastening:** Pads that are easy to secure and stay in place, for example with adapted fastenings.
  - › **Visual and tactile cues:** Tactile elements or auditory reminders for persons with sensory impairments, such as colour coded or textured indicators to help users identify the front from the back.
  - › **Disposable menstrual products:** Where it is difficult to access water and other hygiene facilities, such as displacement and refugee camps, boarding schools and other similar situations, disposable menstrual health products need to be delivered.





These features help to ensure that individuals can use these products with ease, dignity and confidence. Additionally, these materials should be accompanied by clear, easy-to-understand instructions on their use, such as in braille, large print or with audio guides. They should be tailored to the target audience or made universally accessible. Additionally, individuals with disabilities should have adequate access to menstrual products and soap, as they may require more than those without disabilities. By implementing these technical adjustments, menstrual products can promote autonomy, dignity and comfort for all users, regardless of ability.

- **Tailored educational resources and knowledge building:** Providing clear, accessible education around menstrual health is essential. Teaching about menstrual cycles, hygiene practices and product use should be adapted for different abilities and learning styles. Practitioners can incorporate tools, like visual schedules, tactile calendars or sensory-friendly materials to support learning, independence and confidence.
- **Safe and adapted facilities:** Ensuring access to disability-inclusive and accessible water, sanitation and hygiene facilities is a priority. Facilities should include adequate privacy, accessible toilets and product disposal options. Using tools like the UNFPA-supported [Disability Awareness Checklist for Health Care Services](#) and the associated [Disability Awareness Checklist Facilitator Guide](#) can guide persons in assessing and improving accessibility. The checklist emphasizes critical aspects, such as ramps with appropriate slopes, wide doorways, accessible sinks and toilets, as well as clear signage, including braille. Involving individuals with disabilities in the design of these facilities can further enhance their usability and safety. For those without access to adapted facilities, appropriate assistance is recommended to support their dignity and autonomy.
- **Community engagement and empowerment:** Building understanding within communities about the menstrual health needs of individuals with disabilities helps normalize conversations around menstruation. Community-led initiatives are effective in educating, reducing stigma and building inclusive support systems.





## Key recommendations for inclusive menstrual health interventions

Building on the success factors and challenges, here are key recommendations for practitioners to improve menstrual health access and inclusivity for persons with disabilities:

- **Co-design solutions with persons with disabilities and organizations of persons with disabilities:** Centre individuals with disabilities and organizations of persons with disabilities in the design and evaluation of menstrual health solutions. This participatory approach not only ensures that interventions are relevant and user-friendly but also empowers persons with disabilities to play an active role in shaping their care.
- **Adapt menstrual products and educational materials:** Make menstrual products and educational materials accessible by tailoring them to specific needs. For example, use simple language, visual aids and interactive tools for those with cognitive impairments, while tactile or auditory cues can assist those with sensory disabilities. Additionally, ensure the products are high-quality and non-leaking to avoid exacerbating challenges related to frequent changing and washing.
- **Involve families and communities:** Care and support givers and family members are often central to the menstrual health experience for persons with disabilities. Engage (male) individuals through community workshops and training sessions that foster understanding, reduce stigma and provide practical tools for supporting menstrual health. When distributing menstrual products, provide caregivers access to them to ensure proper understanding and prevent misuse.
- **Invest in data-driven approaches:** Collect and analyse data on the menstrual health needs of individuals with disabilities. Disaggregated data allows for a clearer understanding of barriers, informing targeted policies, resource allocation and programme designs that meet the specific needs of different disability groups.




- **Promote inclusive policies and practices:** Advocate for policies at the institutional, community and national levels that support menstrual health for individuals with disabilities. Policies that mandate accessible facilities, disability-inclusive education and funding for adaptive menstrual health resources create a supportive environment for sustainable change.
- **The Twin-Track approach:** The Twin-Track approach makes interventions more disability-inclusive by taking two paths. On the one hand, the approach includes women and girls with disabilities in mainstream menstrual health interventions by integrating disability-inclusion strategies. On the other hand, it recognizes the importance of tailored services and activities for women and girls with disabilities, considering their needs and barriers in managing their menstrual health.


## Conclusion


Menstrual health for persons with disabilities is an essential component of the realization of human rights. By addressing the intersectional challenges of menstruation and disability, practitioners can help create a world where every person has the resources, knowledge and support they need to manage their menstrual health confidently. This guidance note provides an overview of the key challenges, success factors and recommendations to ensure menstrual health interventions are inclusive and accessible. Continued collaboration among practitioners, care and support givers and individuals with disabilities will strengthen efforts to make menstrual health a universal reality, benefiting both individuals and the communities in which they live.




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
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
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