

CODE RED



A PRACTICAL RESOURCE FOR TACKLING PERIOD POVERTY

& 2024 Research on Period Poverty in the Netherlands



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Introduction

If you don't menstruate, you certainly know someone who does.

Half of the population will at some point menstruate, each person doing so for an average of 65 days a year for some 38 years. This adds up to some 400 menstruations over a lifetime.^{1,2} The degree of access to needed resources – information and essential products – and prevailing social attitudes about the experience of menstruation affect how all of us learn, work, and play and the extent to which we thrive.

'Bestaanszekerheid' today³

Another factor that broadly and deeply impacts people's lives is structural poverty. These effects compound over time. People experiencing poverty spend a proportionally greater amount on their essential needs, including period products. Period poverty is one type of poverty that specifically affects health and participation among those who menstruate. The greater the poverty, the greater the risk for period poverty.

While many define period poverty simply as the inability to access needed products, being able to maintain menstrual health also requires access to menstrual education and information about menstruation management.⁴ Globally, some 500 million people experience period poverty.⁵ The lack of access to menstrual products and harmful stigma impact people and societies the world over, including in the Netherlands.

¹ The Bureau for Statistics/Statistics Netherlands (CBS) sets the period of menstruation as between 15-50 years of age, a range NF used in its 2022 report. The medically accepted average age of menarche (first period) in the Netherlands is 13.1, however, with a normal start ranging from 11 to 15 (Van Zoonen et al., 2019) while the average age of menopause is 51 (Vrouwen in de Overgang, 2023). The normal range of a menarche is between 11-15 years of age, but it can occur as early as 8 or 9.

² NF refers to people who menstruate because all those who menstruate should be included in period poverty statistics and solutions. While research on periods and period poverty has focused on women and girls, non-binary people, intersex people and trans men can and do menstruate.

³ The right to *bestaanszekerheid* is constitutionally mandated alongside other fundamental social rights; a direct translation is to security of existence, which encompasses social and livelihood security.

⁴ Neighborhood Feminists and Opinium, 2022.

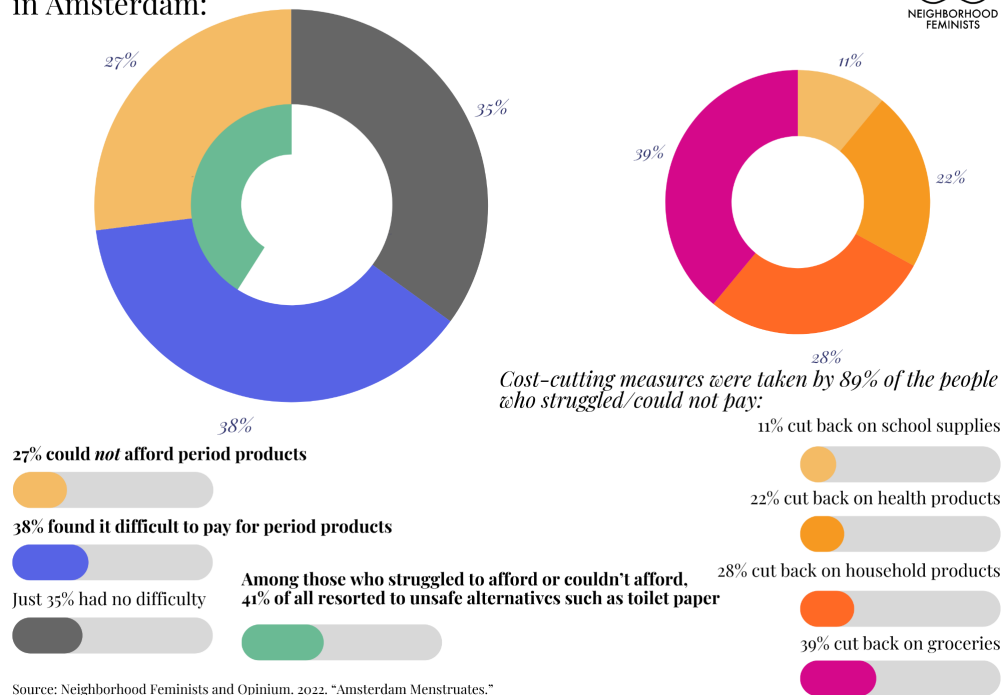
⁵ Jaafar, Hafiz, Suraya Yasmin Ismail and Amirah Azzeri, 2023.

Building on a baseline of clear local need

Since 2019, Neighborhood Feminists (NF) has taken direct action on period poverty by providing free products, building awareness, and advocating for longer-term solutions. In partnership with award-winning research agency Opinion, NF strengthened their advocacy with the publication of the first-ever quantitative research on period poverty in Amsterdam in October 2022. The research included 1,332 people who menstruate and live in the city, with conclusions analyzed from 870 respondents. It confirmed that period poverty was a significant issue (additional findings are available in [Appendix Section V](#)). Notably: **27% of people who menstruate could not afford to pay for period products at some point, and 38% said that while they managed, they had found it difficult to do so.**

Additionally:

In 2022, of people who menstruate and live in Amsterdam:



The 2022 research also analyzed the cost of menstruation in the Netherlands over a lifetime. It found that a person will spend €480-€5520 on roughly 12,000 single-use pads or tampons

over a lifetime. These costs have since increased.⁶

NF's 2022 findings confirmed the pervasiveness of the problem and propelled the introduction of a period poverty proposal in the city council, which was co-signed by seven political parties.⁷ The bill, passed in March 2023, called for making period products freely available for those who need them, regardless of legal status or gender identity. Furthermore, it called for clear menstrual health information – both educational and practical – to be provided in schools.⁸

Fast forward two years. Where do things stand in 2024? How has our understanding and approach to this issue changed in the Netherlands and across Europe over the past two years?

Connecting the levels...with national research

Considering the comparatively limited degree of period poverty research conducted in the Netherlands, data matters as much now as it did in 2022. Given that the general understanding of period poverty and the implementation of national policy are based on one 2019 study, NF strategically decided to include national analysis for a broader, more nuanced picture.

This second report more broadly examines the realities at the intersection of poverty and periods across the Netherlands, as well as the local level in Amsterdam. The enclosed research, developed by NF and Opinium, makes up the largest-ever quantitative study on period poverty in the Netherlands. This data provided should enable decision-makers in municipalities and at the national level to develop effective policies based on current, actual needs.

Beyond providing insight into the current state of menstrual access and equity in the Netherlands, this research report outlines the current degree of access to menstrual health. Menstrual literacy – i.e., a fuller understanding of the range of aspects and impacts of menstrual health – is an unmissable part of improving menstrual access and equity. An inadequate understanding of menstrual management results in unaddressed illnesses and

⁶ The range in cost is due to choice of type of products, such as those for sensitivity/allergy, based on October 2022 prices in Kruidvat and Etos and the shorter 35 year average length of menstruation as defined by CBS. Price inflation since 2022 and calculating using the medically accepted Dutch average of 38 years would increase the lifetime cost (Neighborhood Feminists and Opinium, 2022).

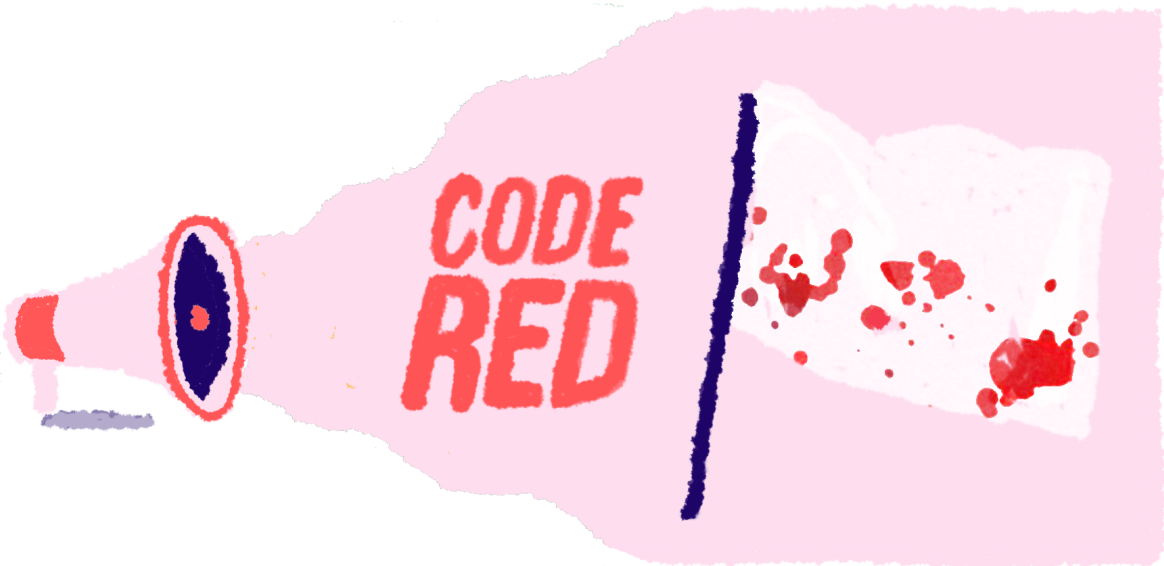
⁷ GroenLinks, Biji, PvdA, PvdD, Denk, D66, and Lijst Kabamba.

⁸ Locations listed include schools, libraries, pharmacies, homeless shelters, and asylum seeker centers (Neighborhood Feminists, November 11, 2022).

disorders and impacts all aspects of a person's life. This report also acknowledges the limiting effect of inadequate research as well as prevailing stigmatizing attitudes toward menstruation in private and public and focuses on what can be done to shift these views.

CODE RED *for public health and equity*

As menstruating is historically steeped in shame, a great number of euphemisms have been coined across cultures over time. A slang term in English for menstruation is 'code red'.⁹ While NF prioritizes direct language and action, dubbing this research and advocacy report **CODE RED** seems fitting, not least because this document serves as a clarion call for awareness and action, without which the situation will worsen.¹⁰



While Neighborhood Feminists has centered its actions in Amsterdam thus far, the organization sees applications for its on-the-ground expertise and research well beyond Amsterdam. Whether in Amsterdam or elsewhere in the Netherlands, NF urges all sectors of society – spanning public sector to private, businesses to schools, communities to individuals – to actively support addressing and ending what is a very solvable matter of public health, gender equity, and participation. The investments required for the solution can result in economic benefits and directly improve a great many people's lives.

⁹ In 2016, a global study examining people's attitudes toward menstruation was published; media pieces on the research led with "5000 different euphemisms for menstruation" (O'Connor, 2016).

¹⁰ NF is not alone in making this connection: Belgian anti-period poverty NGO Bruzelle has partnered with others to address period poverty in Flanders under the name [Code Rood](https://www.code-rood.be/).

Advocating for an end to period poverty goes beyond adequately addressing a basic health need. **CODE RED** is an urgent call for equality, dignity, and the acknowledgment that menstruation is a natural part of life – wherever you are.



- ◆ This quantitative research on period poverty, developed by NF and award-winning research partner Opinion, is the largest ever conducted in the Netherlands.
- ◆ Period poverty 2022 versus 2024? How pervasive is the issue two years later in Amsterdam (lower or higher than the 27% of 2022) and across the whole of the Netherlands? This report both asks and answers these important questions.
- ◆ In addition to involving a lack of essential products, period poverty directly impacts physical and mental health and participation levels in school and work.
- ◆ Despite its wide-ranging and significant impacts, period poverty often persists, hidden in plain sight, because of the stigma around menstruation and shame about poverty. Coupled with education, research like this is crucial for making period poverty visible and deserving of a space on the policy agenda.

1. Pennies and pads

1.1 Poverty in the Netherlands – some facts and figures about those at risk



This report briefly addresses poverty because any understanding of *period poverty* is incomplete without understanding the extent to which *structural poverty* currently affects people in the Netherlands.

Policymakers and researchers, as well as numerous institutions and organizations, extensively discussed and examined structural poverty in the Netherlands and solutions to address it.¹¹ The use of varying definitions and scopes by different government agencies produces different results when measuring poverty and risks for poverty. This opens up the acknowledged likelihood of under-reporting and missed demographic groups and localities. To address this and unify the different approaches used by national agencies, the Central Bureau for Statistics (CBS), the National Institute for Budget Information (Nibud), and the Netherlands Institute for Social Research (SCP) will release a preliminary report in October 2024 containing newly updated standards to re-determine the number of people living in poverty in 2023.¹² These merged standards will hopefully better reflect actual societal poverty rates, allowing for evidence-based decision-making.

In the meantime, analysis by the Netherlands Bureau for Economic Policy Analysis (CPB) concludes that inflation pushed the number of those living in poverty up to 1.3 million in 2023. **This means that at least 7.5% of the population lives in poverty in the Netherlands, with poverty expected to increase again across the country during 2024.¹³ Another forty percent of Dutch households struggle to make ends meet, and these numbers are growing as fixed costs continue to rise while incomes stagnate.¹⁴** Poverty doesn't occur around and below the poverty line only. National agencies such as Nibud underscore that families scraping by at 20-30% above the low-income threshold set by CPB also experience significant financial worries.

¹¹ Vermeij et al., 2024; Kierks, Martijn, 2023; *Sociaal en Cultureel Planbureau*, 2023; *Centraal Planbureau*, 2022.

¹² *Ministerie van Volksgezondheid, Welzijn en Sport*, 2024.

¹³ This is due, in part, to interim government measures, like energy support and rent and healthcare allowances, being phased out (*Centraal Planbureau*, 2023).

¹⁴ Vermeer, Max, 2022.

What is the impact of poverty?

Despite differences in evaluation methods, there is data-based consensus on several key effects of poverty. Poverty has adverse effects on society, affecting overall security, societal cohesion, and trust in government. How much an individual is impacted by poverty, however, depends on the degree and length of time they spend in poverty, as well as their personal background.^{15,16}



The increased social isolation and reduced opportunities that result from poverty can create greater psychological stress.¹⁷ Stress contributes to an increased risk for a variety of mental and physical health problems.^{18,19} As explained by Tim 'S Jongers, director of the Wiardi Beckman Foundation, those at risk in the Netherlands spend 15 more years in poor health than wealthier citizens and live an average of seven years less.²⁰

Experiencing financial stress and insecurity affects decision-making. When making financial decisions, people will pay more attention to the most pressing and immediate concerns, which often carry greater consequences over the long term.²¹ The 'boots theory'

¹⁵ Knifton, Lee and Greig Inglis, 2020.

¹⁶ Research confirms that poverty clearly limits possibilities to engage in the community, both professionally and socially. (Vermeij et al., 2024.)

¹⁷ Brandt et al., 2022.

¹⁸ "Stress Effects on the Body", 2023.

¹⁹ Proportionally, among those aged 25 to 65 with low income, over 2.5 times as many people have poorer health compared to people with a higher income. *Centraal Bureau voor de Statistiek*, 2023; *"Armoede en Sociale Uitsluiting, 2023."*

²⁰ *"Armoede Uitgelegd: Armoedestress Leidt Tot Onnodig Ziek Zijn En Jong Sterven"*, 2024; 'S Jongers, Tim, 2024; *Armoede Uitgelegd Aan Mensen Met Geld*.

²¹ Hilbert et al., 2022.

gives a sense of the financial impact: Over the long run, being poor is more expensive because cheap boots (likely the only affordable choice) need more frequent replacement.²²

Being poor is expensive.

In the context of *period poverty*, the trap of poverty can mean that although a person prefers a reusable product (e.g., a menstrual cup), they can only afford single-use products. In the long run, single-use period products result in far greater costs.²³



Who is most impacted by poverty?

It is statistically clear that certain populations consistently face a greater degree of risk of living in or on the brink of poverty, such as:²⁴

People lacking secure housing

NGOs such as the Salvation Army report a significant increase in homelessness since 2022, particularly among youth who too often fall between the cracks of support organizations.²⁵

²² 'S Jongers, Tim, 2024.

²³ Hilbert, Leon P., Marret K. Noordewier, and Wilco W. Van Dijk, 2022.

²⁴ For more background, see [Appendix Section IV](#).

²⁵ Salvation Army/*Leger des Heils*, 2022.

► *Undocumented people*

Undocumented people across the country continue to face great uncertainty and higher rates of poverty.²⁶

► *Single mothers and children*

Poverty affects women and girls to a greater extent. When women were the primary income earners, 291,900 women fell below the poverty line in 2022 – double as many as men.²⁷ In total, some 460,000 children in the Netherlands live in poverty.²⁸

► *The working poor*

One third of those living in poverty have paid work but earn too little to cover their basic needs. In 2020, 147,000 people (1.9% of the working population) were part of a household with an income below the poverty line.²⁹

► *Students*

The National Institute for Budget Information (Nibud) has reported students increasingly rely on their parents due to cuts to financial support and spikes in costs for housing, healthcare, and basic necessities.³⁰

The aforementioned higher-risk populations can be found in major Dutch cities, including Amsterdam, in proportions higher than national averages.³¹

The price of poverty

Being poor has far-reaching consequences.³² Being financially unable to meet basic needs is heavily stigmatized, with negative conclusions drawn about an individual's ability that lead

²⁶ Van den Muijsenbergh et al., 2022.

²⁷ 5.8% of primary income earning women lived below the poverty line, compared to 2.9% of primary income earning men. (Centraal Bureau voor de Statistiek, 2023; "CBS Statline: Laag en Langdurig Laag Inkomen van Personen CV; Huishoudenskenmerken").

²⁸ NPO Radio 1, 2024.

²⁹ Centraal Bureau Statistiek, 2023.

³⁰ Groen, Annette, and Nannette Houtsma, 2022.

³¹ Poverty is not evenly distributed across the city, however, nearly 25% of low-income households are in Amsterdam Southeast district, followed by 20% in North and 20% in New West.

³² Ministerie van Justitie en Veiligheid, 2023.

to an increased chance of discriminatory behavior and actions.³³ In this way, being poor increases social isolation while reducing opportunities, including in education and work.³⁴

Beyond limiting opportunities that impact everyday living, poverty has a direct impact on health. Chronic poverty translates to chronic stress,³⁵ and chronic stress affects decision-making in the short term and increases the risk for disease in the long term.³⁶ Practically speaking, people will avoid needed medical care if they cannot afford the premium or medications.³⁷



- ◆ Poverty is more extensive than officially recognized, with impacts across all aspects of life that are far-ranging and often long-term for individuals, their families, and society.
- ◆ Certain populations, such as people who are homeless, undocumented, single mothers, and (increasingly) students, face greater challenges than reported and a higher risk of poverty (see [Appendix Section IV](#) for more detail).
- ◆ Poverty doesn't occur only at or under the official poverty line; there is a large number of working poor under or around the poverty line.

³³ Fiske, Susan T., 2015.

³⁴ Noordhoff, Floris J. and Amsterdam School for Social Science Research (ASSR), 2008.

³⁵ Brisson et al., 2020; Haushofer and Fehr, 2014.

³⁶ Hilbert et al., 2022.

³⁷ In this way, health problems go untreated, compounding overall conditions (*Centraal Bureau Statistiek*, 2023; *Armoede en Sociale Uitsluiting*, 2023).

1.2 Period poverty – who is impacted and how

For people with limited means, costs for basic needs, such as menstruation, quickly add up. In the Netherlands – depending on needs – menstruation costs one person anywhere from €498 to €5730 over a lifetime.³⁸ That's just for period products.

► *People at risk of poverty can also be at risk of period poverty*

Adding to the many hardships tied to low income, people who menstruate with little income in the Netherlands have a greater chance of experiencing period poverty. This means they struggle to maintain the practices required for a healthy period. Period poverty brings an additional layer of health and participation issues, further reinforcing the gender gap in income and health.^{39,40}

► *Period poverty impacts physical health*

Chronic stress, inadequate menstrual education, and trauma, among other factors, directly impact menstrual symptoms, with an increased risk of hormonal imbalances that can trigger more serious menstrual disorders.⁴¹ Common menstrual disorders include irregular cycles, heavy bleeding, and painful periods. These abnormal levels of bleeding require more menstrual products and medication, thereby increasing individual expenses. If not managed appropriately, the risk of infections, anemia, strokes, and heart disease rises.⁴² Period poverty can make needed medications unaffordable, further increasing the impact and burden of menstruation management.⁴³

³⁸ Adjusted for inflation from 2022 research (Neighborhood Feminists, 2022).

³⁹ Jaafar et al., 2023.

⁴⁰ In 2024 (just as in 2023 and 2022), the Netherlands ranked 28th worldwide in gender equality, behind European neighbors France, Portugal, Belgium, Spain, Ireland and Germany. ("Global Gender Gap Report 2024," World Economic Forum.)

⁴¹ Naz et al., 2022

⁴² A survey revealed that up to 22 percent always have to use painkillers during their menstruation because they could not manage the pain otherwise. (Kamphuis, Lotte, 2021.)

⁴³ Neighborhood Feminists, 2022.

Period poverty often involves inefficient, *ad hoc* solutions to managing menstruation, including resorting to medically unsafe alternatives such as toilet paper, textile (such as a sock), or newspaper.



Another hard reality is that experiencing period poverty can entail using products longer than medically recommended, increasing health risks such as Toxic Shock Syndrome, or reusing period products, risking bacterial infection and other related issues that are painful and costly to address.⁴⁴

► *Period poverty impacts mental health*

Beyond impacting one's physical health, period poverty also impacts one's mental health. Those experiencing period poverty are more likely to report symptoms of depression and anxiety, with a significant association between period poverty and poor mental health outcomes. Stigma can further compound these symptoms.⁴⁵



There is an extra layer of stress with period poverty which comes from searching for ways to access needed products, the fear of leaking when using inefficient, unsuitable substitutes such as toilet paper, or from self-isolating when no solution is found.

While less of an issue in the Netherlands than in other countries, period poverty here can also involve irregular or insufficient access to free sanitation facilities (e.g., for those who lack secure housing and/or papers). Even if statistically limited, the impact of access to sanitation facilities is very significant for those experiencing it.

► *Period poverty impacts participation in school and work*

Period poverty can directly translate into a cycle of missed school opportunities and decreased school performance. Without the needed products, or information on how they

⁴⁴ Billon et al., 2020.

⁴⁵ Gouvernet et al., 2022.

can access products, sometimes people have no choice but to stay home from work or school during their periods, as confirmed by previous NF research.⁴⁶ Many people under 21 are still in educational settings, meaning that periods and the lack of adequate accommodation to their needs during menstruation can hinder them from pursuing an education. Over time, these overlapping challenges hamper attempts at future stability and result in reduced job opportunities and a lower range of wages.⁴⁷

► *Period poverty hides in plain sight*

After food, period products were the top request at Dutch aid organizations, according to a 2023 survey. Over half the responding aid groups experienced an increase in requests for support. Requests for support stemmed particularly from single-parent families, along with significant increases from families, single people, and people with a migrant background.⁴⁸ While food banks have increasingly been able to offer period products, access is limited, leaving many, such as those who experience period poverty but lack housing or papers, completely on their own.



Despite the need and growing media attention, period poverty continues to carry a double layer of shame (e.g., about poverty but also menstruation) which continues to weigh on many. In 2021, a national survey looked at prevailing attitudes, awareness, and practices around menstruation and found that 17% reported that talking about menstruation feels taboo to them, and 21% responded that menstruation is “dirty”.⁴⁹ The shame and knowledge of prevailing menstrual stigma ensure that far too many continue to experience period poverty in unsupported silence.

⁴⁶ Neighborhood Feminists, 2022.

⁴⁷ Among those at risk of period poverty are those who are incarcerated. The Dutch Department of Correctional Institutions policy is that essentials for dental, eye and menstrual care must be paid for by detainees themselves (*Dienst Justitiële Inrichtingen*, 2024).

⁴⁸ NGO *Armoedefonds* surveyed 375 anti-poverty aid organizations to get an on-the-ground sense of needs among the poor (*Stichting Armoedefonds*, 2023).

⁴⁹ Weighted survey by *3Vraag/EenVandaag* with 2,275 participants, of whom 1,238 menstruated (Kamphuis, Lotte and *3Vraag*, 2021).



- ◆ Period poverty in the Netherlands affects physical and mental health, deepening the health gender gap and increasing the challenge to exit the downward spiral of poverty.
- ◆ Period poverty affects participation in school and work across the country, translating into decreased participation, missed opportunities, and further effects on income level and work options.
- ◆ As the visibility of the issue grows, so does demand, but shame continues to keep many silent.

2. What's changed since 2022 in policy, research and direct action

2.1 In the Netherlands

Over the past two years, there has been growing media coverage of period poverty as the issue begins to receive legislative attention.

Just two months after the publication of the NF research report in 2022, a parliamentary anti-period poverty bill was submitted by D66, Volt, and PvdA. Following the passage of the bill in early 2023, €2 million was released to combat period poverty at the national level. The funds were to be used by national NGO *ArmoedeFonds* to expand the number of their period product distribution points from 1,500 to 2,500.^{50,51}

In 2022, NF also noted that the critical shortfall of (free) public toilets in Amsterdam greatly increased challenges for people unable or unwilling to use urinals. This makes managing menstruation needs all but impossible for people with insecure or no housing.⁵² Following a highly publicized 2015 court case and 7 years of campaigning, in 2024, €4 million is being invested in more public (and wheelchair-friendly) restrooms for Amsterdam.⁵³

With the passage of the municipal bill against period poverty in Amsterdam in early 2023, Neighborhood Feminists received its first public funding for an additional fifteen Menstruation Stations. Previously, private donations funded these self-serve cabinets filled with period products. Together with *Armoedefonds*, NF continued to expand the number of distribution points in Amsterdam, receiving public funding for twenty Menstruation Stations in 2024.

While bringing additional visibility and meeting some of the immediate demand, the national and local policy measures, unfortunately, fall short of the actual need and needed outreach, such as education. As we expect the ongoing health and housing crises to

⁵⁰ *Ministerie van Sociale Zaken en Werkgelegenheid*, 2023.

⁵¹ From 2021, NGO *ArmoedeFonds* began opening distribution points initially with both private and public support, with support from the Red Cross. “*Rode Kruis Helpt Armoedefonds Tegen Menstruatiearmoede – Rode Kruis Gooi En Utrecht*”, 2022.

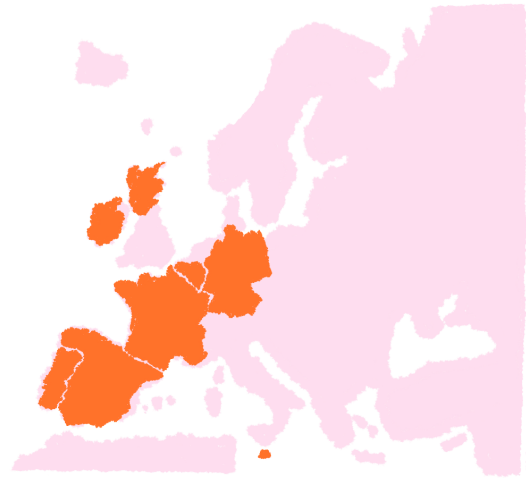
⁵² While Paris and London have 1 public toilet per 5,500 residents, and Antwerp has 1 per 4,300 residents, there is just 1 toilet per 10,750 residents in Amsterdam (Gool, Joanne, 2019).

⁵³ The first restroom will be built in Oosterpark in October 2024, but the total number of toilets planned has not been disclosed (Weel, Frederieke, 2024).

continue, period poverty will not diminish. Yet the outlook for longer-term support remains uncertain because there has been no articulation of any national strategic investment beyond the one-time 2022 bill.

2.2 In Europe

Thanks to sustained advocacy and mobilization, there is increased visibility on period poverty by European governments. Still, there is wide variation in approach, including the degree of comprehensiveness, sustainability, and focus on short-term gains versus longer-term benefits (e.g., product provision and/or education, free products, or tax reductions or exemptions). As anti-period poverty programs are new policy and practice developments, they will require follow-up research, monitoring, and ongoing fine-tuning.



Belgium

From 2023 onwards, 300,000 free, single-use period products have been made available to the 500 women detained in Belgian prisons.⁵⁴ This builds on significant measures already taken in 2022 by the Walloon government (i.e., the distribution of 2.5 million period products in three provinces). Additionally, free product initiatives have been launched in select schools in Ghent and other cities, including Brussels, from 2024.⁵⁵

France

After leading French NGO *Règles Élémentaires* published research in 2023 indicating that menstrual poverty had doubled in two years – increasing from 2 to 4 million affected – the French ministries of health and social security announced reimbursement of reusable period products for those under 26 and participants of “complementary health security” (which includes some 6.7 million people).⁵⁶ This reimbursement program, introduced in 2023 and going into effect from September 2024, will include governmental support for the communities and organizations to install period product dispensers. Support will go

⁵⁴ Klingert, 2022.

⁵⁵ Walker, 2022.

⁵⁶ Association *Règles Élémentaires*, 2023.

through to 2027, enabling the purchase and distribution of reusable products intended to meet the menstruation needs of 30-40% of all at-risk people through reusable sanitary protection. However, the program rollout, still under development, is behind schedule. As of August 2024, the program includes on-demand reimbursement of some reusable period products purchased in pharmacies by the national health care system and additional health care systems.⁵⁷

Thanks to the multi-year advocacy work of *Règles Élémentaires*, *Fondation des Femmes*, the Georgette Sand Collective, and others, a national decree requiring the publication of composition, appropriate product usage, and health risks on period product packaging came into force in France in April 2024. While promising, the decree still falls short in terms of actual utility insofar as including only products added “intentionally” by manufacturers. As pointed out by *Règles Élémentaires*, “almost all of the potentially toxic residues found to date in menstrual protections come either from contamination of raw materials or finished products, or formed during manufacturing processes (e.g., bleaching and gluing). Additionally, textile products are exempted, despite the boom in reusable period underwear and the discovery of potentially toxic substances in period underwear.”⁵⁸ As this quote demonstrates, this means many potentially toxic and harmful substances are excluded.

Germany

Despite donation initiatives, awareness campaigns, and calls for broader actions led by activists over the years, the needed structural changes to policy (and practice) are unfortunately yet to be enacted by decision-makers.⁵⁹

Ireland

Menstrual products can be sold in EU member states without VAT since 2022. Thus far, Ireland is the **only country** to take advantage of the new ruling. Additionally, Ireland made reusable products, such as cups, period underwear, and sponges, tax-free in 2023.⁶⁰

⁵⁷ French government and French Ministry of Public Health, 2023.

⁵⁸ *Association Règles Élémentaires*, 2024.

⁵⁹ Plan International *Deutschland: Gesundheit des Plan-Jugendbeirats*, 2021.

⁶⁰ Griffin, 2022.

Malta

In 2023, the Maltese government confirmed the rollout of a €500,000 pilot in secondary schools to provide free period products, which is set to be followed by a national rollout in all schools.⁶¹

Portugal

Portugal's government will support the free distribution of menstrual hygiene products in primary and secondary schools and health centers from September 2024, a program that could "cover up to 120,000 people". While the estimated number of people covered is based on women and girls who receive welfare benefits, the government underscores that "the measure will not exclude anyone based on income or other criteria".⁶²

Scotland

Scotland has been a world leader in addressing period poverty since 2020. Thanks to extensive, collaborative efforts led by Member of Parliament Monica Lennon, the ability to access needed period products is enshrined in the constitution as a basic health right. Country-wide implementation of this policy has been made possible by many, including social enterprise Hey Girls who developed an app with the government to provide detailed information about product locations, as well as extensive information and resources on menstrual health. Because maintaining the app also depends on under-resourced local authorities and distribution locations, information updates aren't always optimal. As in other European countries, many of those most at risk are from minority ethnic communities and struggle with digital access and English. Despite this, the app is only currently available in English. Campaigner Dr. Jennifer Martin recommends that the National Department of Health be engaged in product provisioning as well, since "this is a public health and human rights issue." Given the newness of this far-reaching national policy, limitations in delivery and access are not surprising. It is anticipated that refinements in implementation will ensure the program reaches its full potential.⁶³

Spain

Spain made international headlines in 2023 as the first country in Europe to grant menstrual leave. One year on, similar to other countries offering menstrual leave, critics point to serious limits in the legislation that have resulted in very low rates of actual leave taken. Spain's policy requires a medical doctor's sign-off—and only allows people to take menstrual leave if they have been diagnosed with endometriosis, which sharply decreases the number of eligible people. In a country with the highest unemployment in Europe, job security

⁶¹ Sansone, 2023.

⁶² The Portugal News, 2024.

⁶³ McCole, Devon, and Samar Jamal, 2023.

concerns also impact the amount of leave taken.⁶⁴

In Catalonia, the distribution of free reusable period products began in May 2024 as part of a pioneering government initiative to reach all those who menstruate (some 2,5 million people aged 10–60) while simultaneously aiming to reduce the 9,000 tons of single-use product landfill waste generated each year by the region.⁶⁵ Thus far, 3,300 pharmacies have distributed 400,000 reusable products, reaching 14.5% of the target population. The initiative also includes an ambitious education program covering “menstrual education in childhood, adolescence, and young adulthood; menstrual education in the field of social-community intervention; measures in the workplace; training for professionals (including pharmacists distributing products); fostering research and knowledge; and dissemination and awareness-raising.” It will also specifically include information on perimenopause and menopause.⁶⁶

2.3 Beyond Europe

Over the past two years, period poverty has continued to garner global attention. Significant policy measures have been launched in countries beyond Europe, including in Kenya.⁶⁷



- ◆ While there is an increase in media coverage in the Netherlands, and some welcome national and local policy measures have taken shape, the strategies are not yet comprehensive, structural, or long-term.
- ◆ Thanks to the tireless efforts of advocacy groups, structural solutions to period poverty continue to be launched and expanded within and beyond Europe. The greatest successes have resulted from extensive collaboration between governments, NGOs, advocates, and the private sector.
- ◆ There is wide variation across Europe in terms of approaches, with the anti-period poverty programs in Scotland and Catalan (Spain) standing out for their sustainability and comprehensiveness. France, Walloon (Belgium), and Portugal have also been

⁶⁴ Kassam, Ashifa, 2024.

⁶⁵ The Guardian, 2024.

⁶⁶ Government of Catalonia, 2023.

⁶⁷ A selection of global developments in period poverty policy and practice from the past couple of years is available on the NF website (Neighborhood Feminists, 2024).



building on increasingly far-reaching period poverty programs. Beyond Europe, the engagement of the Kenyan government has been noteworthy for structurally addressing the issue for quite some time.

- ◆ Anti-period poverty programs are new policy and practice developments that require follow-up research, monitoring, and ongoing fine-tuning.

3. The 2024 CODE RED quantitative research

3.1 Research partners

Neighborhood Feminists partnered with Opinium, an award-winning international insight agency, to quantitatively establish the scale of period poverty in the Netherlands.⁶⁸ Since 2017, Opinium has worked for Plan International UK, conducting annual research into period poverty among young people aged 14–21, with a focus on lack of access to products, inadequate education, and societal stigma. Their research revealed robust, evidence-based insights that have led to real-world changes. Plan International UK’s research and campaign efforts were instrumental in the Department for Education’s 2020 launch of a period poverty initiative, which provides free period products in schools across England and Wales.

“

As an independent agency, one of Opinium’s fundamental principles is that we should conduct research that makes a difference to not only our clients, but also to our teams and the wider community. We call it ‘research for good’ and it’s the reason many of us initially chose to work at Opinium and the reason we stay. For the past 15 years we have partnered with charities and NGOs across Europe to support causes and issues that tackle social and economic inequality and discrimination.

Period poverty is one of these issues. It is an issue that too few people talk about. An issue that we assume isn’t relevant in our neighborhoods and cities. An issue we assume isn’t affecting the people that we know. In 2022 we were able to prove this assumption was categorically untrue.

Two years on, we hope that our continued partnership with Neighborhood Feminists shines a light on the scale of period poverty and its impact on the lives of those living in the Netherlands. We hope these figures drive lasting change in how we view and tackle period poverty once and for all. But most of all, we hope that those with the power to make a difference in so many lives take this opportunity to do so.
-- Emily Dickinson, head of Opinium Amsterdam

”

⁶⁸ Opinium’s clients include Just Eat Takeaway.com, the European Commission, Vodafone, and Greenpeace International, among others.



Neighborhood Feminists has also partnered with Perspectivity, a social enterprise that facilitates social change. The professional facilitators who make up Perspectivity navigate complexity using Sprockler, their own specific methodology for narrative and participatory research fueled by an innovative software tool. Through this partnership, NF and Perspectivity aim to deepen understanding and gather more nuanced insights into what it means to experience period poverty in the Netherlands, using the Sprockler tool and method. Perspectivity will – both qualitatively and quantitatively – collect and make sense of period poverty narratives while quantifying overall narrative patterns.

The Sprockler inquiry, open from July 2024 to December 2024, will enable people across the Netherlands to share their personal experiences with period poverty confidentially, whether online or in person, with experienced facilitators.

Given the taboo nature of menstruation and poverty, every precaution is taken to ensure full consent and anonymity. For more information on the process and participation, please refer to [Appendix Section III](#).

While acknowledging that experiences of menstruation and poverty vary widely and are greatly affected by individual context, the shared stories collected by Perspectivity will add detail to the quantitative data gathered by Opinium, giving us a fuller and more robust picture of period poverty in the Netherlands in 2024.⁶⁹

3.2 Scope and methodology

Survey

Opinium Research, with feedback from Neighborhood Feminists on survey questions, developed and conducted an online and paper survey of people aged 12–55 who had menstruated in the last 12 months. The survey was available in Dutch and English. Fieldwork took place between July 2 and August 22, 2024, covering the entire country with additional coverage in Amsterdam in order to compare results with the 2022 findings. Survey results were weighted for age and geographic distribution to be in line with actual population proportions (as recorded nationally by CBS and locally by the municipality of Amsterdam) with adjustments for likely menstruation rates in the last 12 months among various age groups (see Methodology for more info).

⁶⁹ The Perspectivity report will be made public in January 2025 and featured on the NF website.

Scope

The total sample size was 3,547, with 3,503 responses collected online via a panel survey and 44 responses collected through paper surveys. Out of 3,503 online responses, 2,512 were collected nationally, and 991 were collected in Amsterdam responses so that figures could be reported both at a national and local level. The panel and paper surveys ensured a sufficient range of age and geographic representation.

A separate, unweighted dataset was created that merged all the data, but this is only used in this report if the base size for a particular neighborhood or age group is too low in a particular question from the weighted representative survey to be robust (i.e., below 50 respondents). This is mentioned in the report whenever the full unweighted dataset is used.

Having both panel and paper surveys ensured a sufficient range of age and geographic representation, involving communities not typically included in the research, such as undocumented people and people with insecure housing.

Methodology

The survey was sampled and weighted to be representative of age and area. Data from Eurostat, Central Bureau for Statistics (CBS), and *Onderzoek en Statistiek* (Gemeente Amsterdam) were used to determine representation figures. As there are no official statistics on the number of people who menstruate in the Netherlands, a proxy question was run on Opinium's UK nationally representative omnibus to find out how many people have menstruated in the last year per age group, on the assumption that this would be similar between the UK and the Netherlands. These percentages by age group were used as a proxy and applied to the data from Eurostat, CBS, and *Onderzoek en Statistiek* for more accurate representation than the statistics alone would permit.

To enable comparison with 2022 findings, with the exception of an additional section on individual experiences with flow and menstrual symptoms, the same questions were used.

For the online survey, both minors and parents were required to provide informed consent before the survey was taken by respondents below the age of 16. All paper survey respondents were over age 16.

Additional steps for greater inclusivity were taken to ensure that, just as in 2022, a wider demographic would be represented in Amsterdam. Hence, paper surveys were distributed

to coordinators in support centers who engage with undocumented and homeless people. In this way, the research included the experiences of those often missing in research and online panels. Conducting research among undocumented and homeless people presents particular challenges. These questions were reviewed by a researcher who conducts qualitative research among undocumented people. The purpose was to anticipate complexities and review ethics and sensitivities for people already experiencing ongoing pressure and stress and, in some cases, outright trauma. The language of the survey was reviewed by the researcher with these respondents in mind. Specific attention was also paid to inclusive language to help ensure that menstruating trans men, non-binary people, and non-native speakers would not be excluded.

In this report, we have included figures that estimate the number of people impacted by period poverty. These figures were based on the CBS standard of menstruation age range, namely 15-49, due to available data.⁷⁰ This is mentioned in the report whenever this age range is used. The remaining figures in this report are based on the full dataset, which is among 12-55-year-olds.

⁷⁰ Note from NF: the medically accepted range in the Netherlands is age 13 to 51, which, at 38 years, is longer than CBS' 34 years. As mentioned in footnote 1: The Bureau for Statistics/Statistics Netherlands (CBS) sets the period of menstruation as between 15-50 years of age, a range NF used in its 2022 report. The medically accepted average age of menarche (first period) in the Netherlands is 13.1, however, with a normal start ranging from 11 to 15 (Van Zoonen et al., 2019) while the average age of menopause is 51 (Vrouwen in de Overgang, 2023). The normal range of a menarche is between 11-15 years of age, but it can occur as early as 8 or 9.



3.3 Research results for the Netherlands, with additional focus on Amsterdam

Period poverty is significant and widespread in the Netherlands.

The Netherlands

Over the past year, 25% of people who have menstruated in the last 12 months couldn't or struggled to afford to pay for period products at some point. This equates to over 765,000 people.⁷¹

13% of people who menstruated in the last 12 months have been unable to afford to pay for period products at some point. This equates to over 400,000 people.⁷²

While rates in North Holland are higher (17%), figures are relatively consistent across all provinces. **20% of people say they have managed to pay for period products but found it difficult to do so.⁷³** Across the country, one in five (20%) of all those who menstruated said that they struggled to locate the products they needed.

Amsterdam

In Amsterdam, despite a significant drop since 2022, the picture remains concerning. **The number of people unable to afford to pay for period products has fallen 13 percentage points (from 27% in 2022 to 14% in 2024).**

⁷¹ NF note: the number of people is based on the CBS standard of menstruation age range, namely age 15-49, while the medical standard includes more of the population: age 13-51. Further, grossing-up figures are estimated numbers of people based on data from nationally-representative samples and actual population statistics. They are calculated by multiplying the data percentage with the population number. This grossing-up calculation is based on an assumption that females aged 15 to 49 in the Netherlands have menstruated in the last 12 months. In a nationally representative survey of 2,329 15-49-year-old Dutch females who have menstruated in the past 12 months, 318 have not been able to pay for period products. $605 / 2,329 * 2946650$ (the population of 15-49-year-old menstruating females in the Netherlands) = 765,446 (shorthand 765,000). [Data source](#).

⁷² In a nationally representative survey of 2,329 15-49-year-old Dutch females who have menstruated in the past 12 months, 318 have not been able to pay for period products. $318 / 2,329 * 2946650$ (the population of 15-49-year-old menstruating females in the Netherlands) = 403,599 (shorthand 400,000). [Data source](#).

⁷³ Difficulties were tied to having to make compromises (e.g., cutting down on other necessities, such as groceries) and/or making accommodations (e.g., borrowing money or staying home).



One out of every seven Amsterdam residents who menstruate – some 28,000 people – have been unable to afford to pay for period products at some point in the last 12 months.⁷⁴

A further quarter (24%) say that they have managed to pay for products but struggled to do so. This represents a decrease of 14 percentage points since 2022. Over one in five (23%) of all those who menstruated in Amsterdam also said that they struggled to locate the products they needed, owing to a range of factors that are not just financial (i.e., language barriers, stigma, and specific health needs).

Across the capital, the rates of people unable to pay for period products in the last 12 months are highest in the Southeast district (24%). This is followed by the East and Center districts (18%), then North (13%), and West and New West (12%).⁷⁵

⁷⁴ In this report, due to availability of Amsterdam population data, the age range of 15–49 years old was used to gross-up the findings to estimate numbers in the population of Amsterdam, filtering the data set to only those aged 15–49 years old to match the population statistics of the Amsterdam population data. This is the same CBS standard age range as for the national figures. Therefore where grossed-up figures are shown, these are related to those aged 15 to 49 *only*.

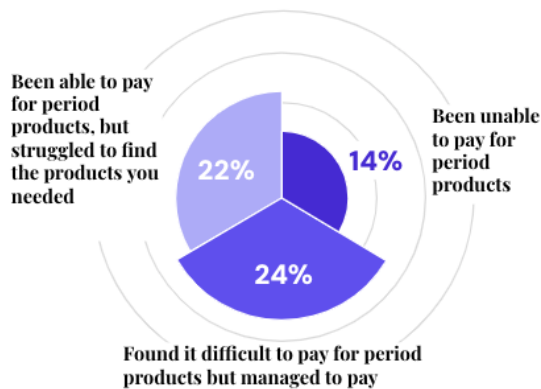
This grossing-up calculation is based on an assumption that females aged 15 to 49 in Amsterdam have menstruated in the last 12 months. In a representative survey of 967 15–49-year-old Dutch females who have menstruated in the past 12 months, 141 have not been able to pay for period products. $141 / 967 * 196307$ (the population of menstruating 15–49-year-old females in Amsterdam) = 28,584 (shorthand 28,000). [Data source](#).

⁷⁵ Districts have seen decreases since 2022, when the rate of people unable to pay for period products in the last 12 months in Southeast was 31%, (a decrease by 7 percentage points), 36% in North (–23 points), 33% in East (–15 points), 17% in Center (–1 point), 23% in West (–11 points), and 16% in New West (–4 points).

Period poverty continues to be widespread in the Netherlands

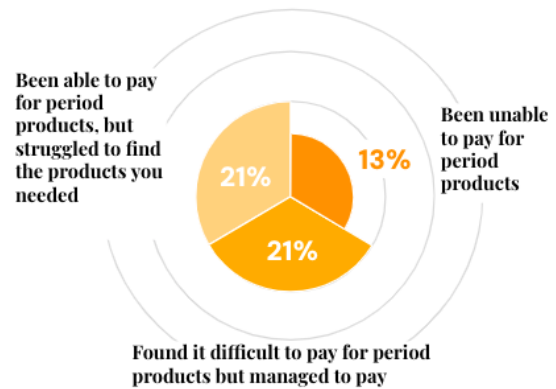
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% of people who menstruate answering "Yes" to each question



THE NETHERLANDS

% of people who menstruate answering "Yes" to each question



Q1. In the last 12 months, have you experienced any of these issues?
Base: All respondents. Base size: The Netherlands: 2539, Amsterdam: 1035

The cost-of-living crisis continues to exacerbate period poverty nationally and in Amsterdam, with many resorting to inferior, unsafe alternatives to period products.

The Netherlands

At a national level, **one quarter (24%)** of respondents found it increasingly difficult to afford to buy period products. This rate increases among those with heavy menstrual flows (34%) as well as among younger adults, with a third of 18–24-year-olds (32%) saying it has been more difficult for them (compared to 16% of 45–55-year-olds).

Of those finding it increasingly difficult to afford products, **over two-thirds (68%) attributed this to the increased cost of living**, while nearly a third (30%) reported that their income had significantly decreased.

21% – over 610,000 people – have had to resort to inefficient, unsafe alternatives to their usual period products.⁷⁶ Once again, this figure is calculated using the CBS standard for the menstruation range, age 15-49. When it comes to alternatives, over two-fifths (44%) of these resorted to using toilet paper, with that number rising to 59% amongst those living in North Holland (+15 percentage points). Almost one in ten (9%) used pieces of fabric to manage their period, with a similar number (7%) using other paper products like paper tissue or newspaper.

Amsterdam

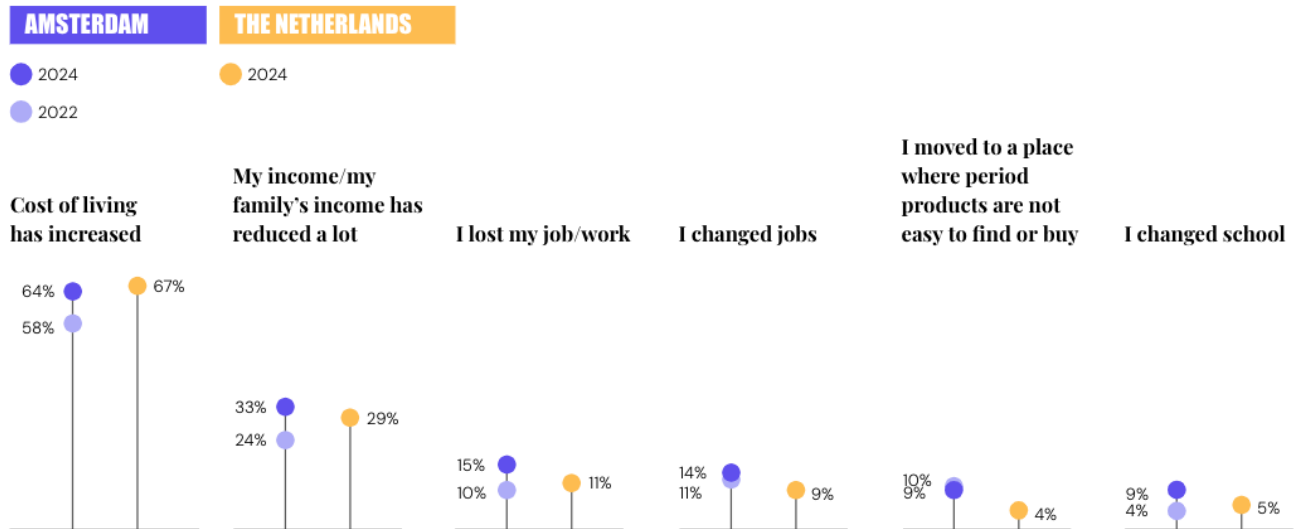
The financial pressures felt nationally due to inflation are echoed in Amsterdam.

Among those struggling to afford to pay for period products in the city, 64% attributed it to the increased cost of living (+6 percentage points since 2022). Over a third (33%) said it was the result of a significant decrease in their own or their family's income, which is an increase of 9 percentage points since 2022. **Over half (54%) of people who struggled resorted to using toilet paper as an alternative** while 10% used other paper products and 9% used fabric.

In 2022, 41% of people surveyed in Amsterdam stated that they found it increasingly difficult to afford to buy period products compared to the previous six months. In 2024, at 30%, this figure remains worryingly high.

⁷⁶ The following grossing up calculation is based on an assumption that females aged 15 to 49 in the Netherlands have menstruated in the last 12 months. In a nationally representative survey of 2,329 15-49-year-old Dutch females who have menstruated in the past 12 months, 483 have had to resort to alternatives to their usual period products because they could not afford, struggled to afford, or struggled to access period products. $483 / 2,329 * 2946650$ (the population of 15-49-year-old menstruating females in the Netherlands) = 611,091 (shorthand 610,000). [Data source](#).

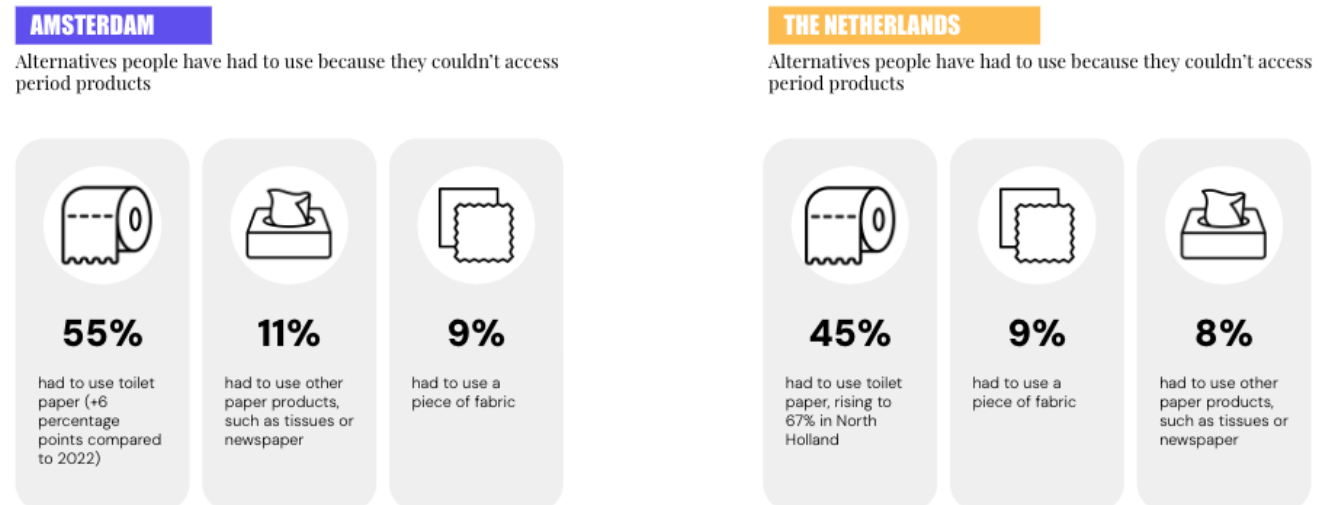
Top reasons people have found it more difficult to pay for period products in the last 6 months



Q5. Why did you find it more difficult to afford period products in the last 6 months? If someone else buys your period products, please answer based on their experience or select 'don't know' if you are not sure. Please select all that apply.

Base: Respondents who found it more difficult to afford period products in the last 6 months. Base size: The Netherlands: 635, Amsterdam: 301

Those who could not afford or struggled to afford period products, or struggled to find the period products they needed, had to resort to alternatives to fulfill their menstrual needs



Q8. You mentioned that you have not been able to afford or struggled to find period products in the past 12 months. Have you had to use any of the following as an alternative to your usual period products?

Base: Respondents who have not been able to afford or struggled to pay for period products, or struggled to find period products they needed. Base size: The Netherlands: 940, Amsterdam: 398



Those who struggle to pay for period products are often more reliant on family and friends.

The Netherlands

People have had to turn to different sources to meet their menstrual health needs.

Over the last 12 months, more than one in four people in the Netherlands have had to turn to family members (28%), and one in five sought support from friends (21%) and their workplace (19%). More than one in ten have also sought support from schools (14%) and non-profit organizations (12%).

Those living in the province of North Holland are more likely to obtain products from a range of places, with one in three (32%) having received period products from friends in the last 12 months and another 15% from medical professionals.

Amsterdam

In Amsterdam, a significant number of people turned to their workplaces for help, with one third (35%) obtaining free period products from their offices. This is double the rate of 2022 (18%). Family (23%) and friends (22%) followed suit as a source of support. Compared to the national level, one in five Amsterdam residents sought support in schools (20%), and more than one in 10 (17%) obtained support from social or non-profit organizations.⁷⁷

Looking at various parts of the city, those in the Center are more likely to access products from their family (45%), while also obtaining products from medical professionals (32%) and faith-based organizations (30%). In comparison, those in the Southeast are more likely to visit social or non-profit organizations for period support (28%).

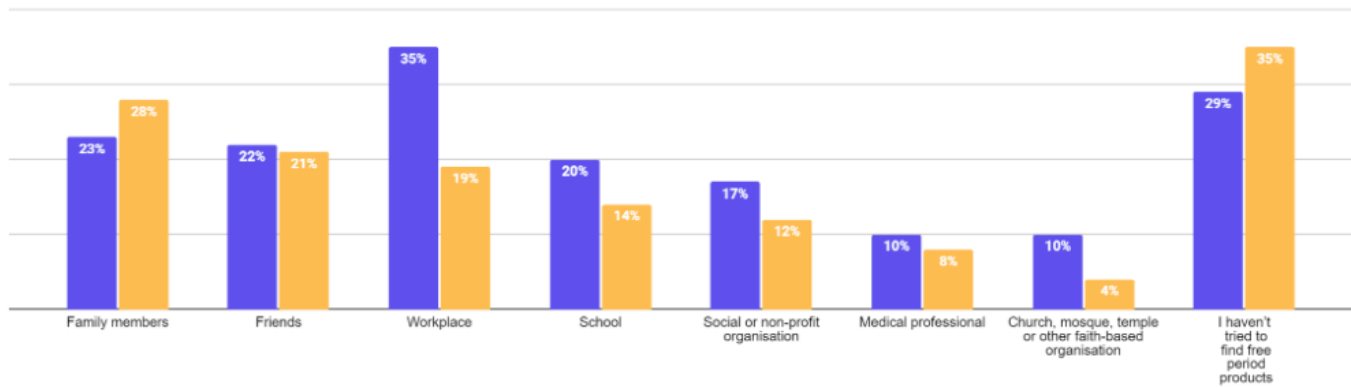
⁷⁷ Self-serve cabinets such as NF's Menstruation Stations are rarely if ever identified as originating from a non-profit, with users linking the cabinet to its location, whether a neighborhood center, faith-based organization or school.

Where those who have struggled to pay for period products have found free period products in the last 12 months

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In the last 12 months where did people who struggled to find period products get them from?



Q7. Thinking about the times you have struggled to afford period products in the last 12 months, did you try to find FREE products from any of the following places? If someone else buys your period products, please answer based on their experience or select 'don't know' if you are not sure. Please select all that apply.

Base: Respondents who struggled to or couldn't afford period products. Base size: The Netherlands: 639, Amsterdam: 289



Regardless of income, accessing period products can be stressful and for many continues to carry a social stigma.

The Netherlands

At a national level, one third (33%) experience negative emotions when acquiring period products. Just under one in five (17%) stated that they feel embarrassed, with the level rising to a quarter (24%) among those aged 18-24. **One in seven of all surveyed also stated that they experience annoyance and stress (both at 13%).**

Younger people are more likely to experience negative emotions when accessing period products, with one in five (20%) 18-24-year-olds saying they feel stressed when trying to access period products.

Amsterdam

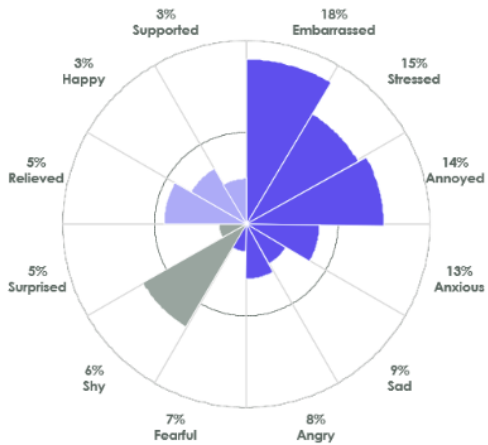
In Amsterdam, these negative feelings are echoed by greater numbers of people. Two in five (40%) reported experiencing negative emotions when trying to access period products. One in five (19%) experience embarrassment, increasing to a quarter (23%) among 25-34-year-olds. Feelings of stress (13%) and annoyance (15%) were also reported.

One quarter (24%) of 18-24-year-olds in Amsterdam find it stressful to obtain period products, making these negative feelings more prevalent than for any other age group.

Accessing period products still comes with social stigma and stress

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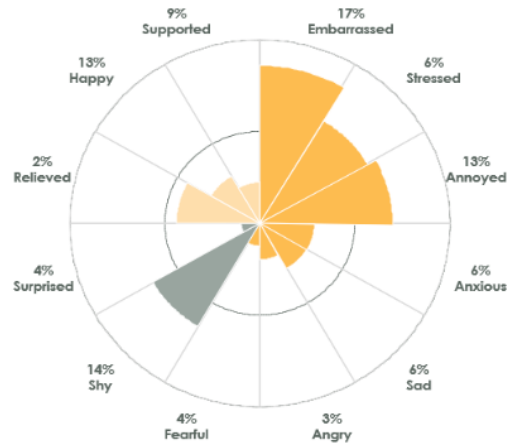
How do you feel trying to get period products?



Q9. How do you feel trying to get period products? Please select all that apply.
Base: All respondents. Base size: The Netherlands: 2539, Amsterdam: 1035

THE NETHERLANDS

How do you feel trying to get period products?



Many people make sacrifices in their basic needs to afford period products.

Out of those struggling or unable to afford period products in the Netherlands in the last 12 months, nearly all (86%) have taken alternative action to be able to buy essential menstrual products. This occurs primarily by cutting spending on basic needs.

- **Nearly half (48%) cut back on groceries.**
- One third (33%) cut back on household products.
- Over a quarter (27%) cut back on hygiene products.
- **Over a fifth (22%) cut back on health products, such as medicines.**

For those who sought alternative sources of money, over a fifth (22%) relied on money borrowed from family or friends, while nearly the same number (19%) tried to find an additional source of income to be able to afford menstrual products.

In Amsterdam, the number of those struggling or unable to afford period products and, therefore, must take alternative action to be able to buy essential menstrual products stands at 87%. This figure is unchanged since 2022. What has changed, however, is that a greater percentage of those struggling to afford to buy period products are now cutting back on other essential items.

- **Half (46%) cut back on groceries (a 8% increase since 2022).**
- One third (33%) cut back on household products.
- One quarter (24%) cut back on hygiene products.
- **Over a fifth (22%) cut back on health products, such as medicines.**

Of this group, a quarter (26%) have borrowed money from friends and family, which is unchanged since 2022.

At the district level, of those struggling in the Southeast, well over half managed by cutting spending on groceries (64%), while a quarter (24%) cut household products. Meanwhile, those in the Center were most likely to cut back on hygiene products (36%) and school supplies (21%), while many also tried finding an additional source of income (34%).⁷⁸

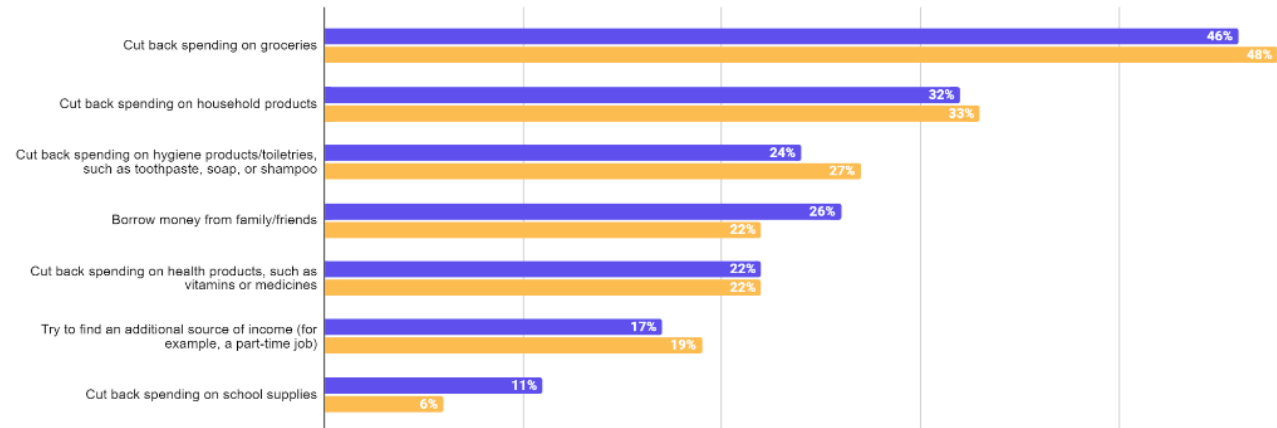
⁷⁸ Data for Southeast and Center districts were taken from an unweighted dataset due to low base sizes from weighted panel and paper surveys.

Actions taken by those who have struggled to afford period products in the last 12 months

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Have you had to do any of the following to be able to afford period products?



Q6. You mentioned that you have been struggling to afford period products in the past 12 months. Have you had to do any of the following to be able to afford period products? If someone else buys your period products, please answer based on their experience or select don't know if you are not sure. Please select all that apply.
Base: Respondents who struggled to or couldn't afford period products. Base size: The Netherlands: 639, Amsterdam: 289

Unsurprisingly, difficulty affording and accessing period products negatively impacts day-to-day life in a range of ways.

The Netherlands

Among those who struggled or could not afford period products, nearly a quarter had to alter their day-to-day routines. More than one in five (21%) had to stay home for some of their period, and nearly one in ten (8%) remained at home for the duration of their period. Additionally:

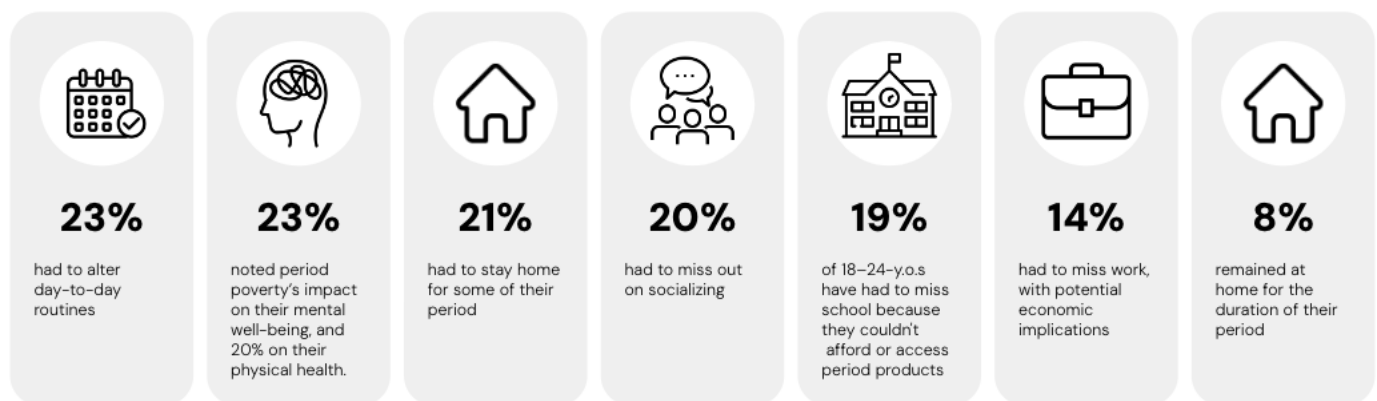
- Nearly one in four (23%) noted period poverty's impact on their mental wellbeing.
- One in five (20%) experienced a negative impact on their physical health.
- **One in seven (14%) had to miss work.**
- **One in five (19%) 18–24-year-olds have had to miss school because they could not afford or access period products.**

Among those who could not afford or struggled to afford period products, lack of access to period products came with a range of consequences



THE NETHERLANDS

Consequences people have experienced because they couldn't access period products



Q10. Have you experienced any of the following because you couldn't access period products you needed? Please select all that apply.
Base: Respondents who struggled to or couldn't afford period products, or struggled to find period products. Base size: The Netherlands: 940

Amsterdam

People in Amsterdam continue to indicate significant impacts on their daily lives. The reported effects include:

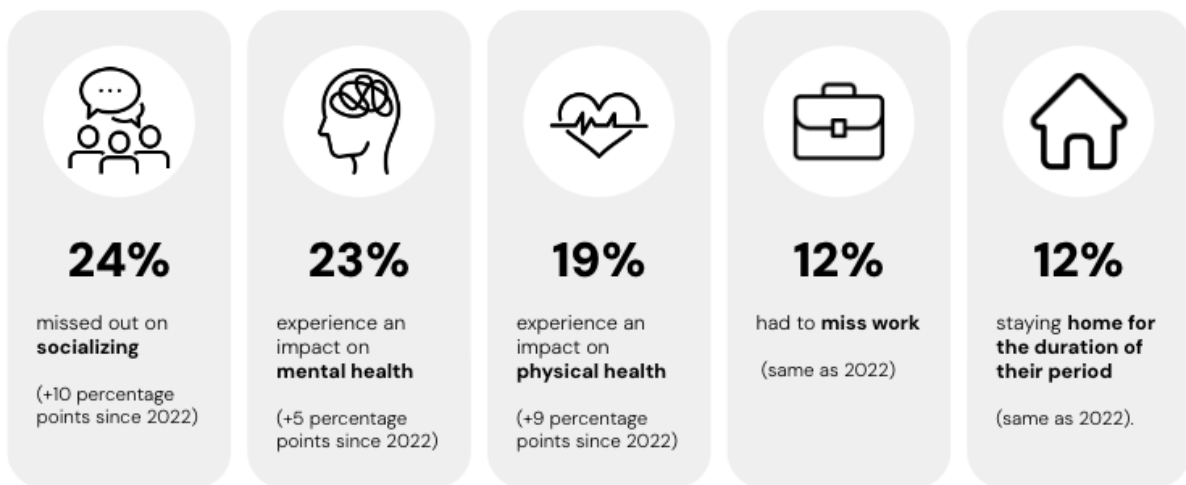
- Nearly one in four (23%) experiencing an impact on their mental health (+5 percentage points since 2022).
- One in five (19%) experienced a negative impact on their physical health (+9 percentage points).
- **One in eight (12%) had to miss work** (unchanged since 2022).
- **One in eight (12%) stay at home for the duration of their period** (unchanged).

City respondents reported that period poverty affected their opportunities and overall well-being this year (compared to 2022)

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Consequences people have experienced because they couldn't access period products



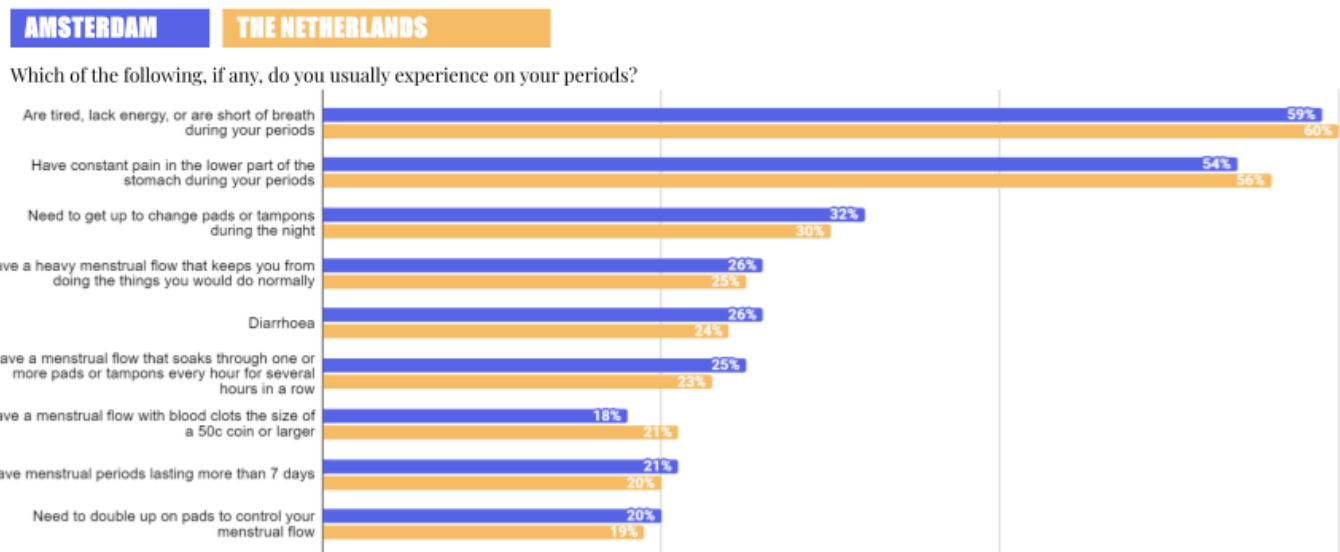
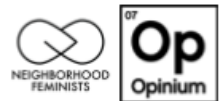
Q10. Have you experienced any of the following because you couldn't access period products you needed? Please select all that apply.
Base: Respondents who struggled to or couldn't afford period products, or struggled to find period products. Base size: Amsterdam: 398

Menstruation is far more than an inconvenience; for many, it imposes abnormal levels of pain and bleeding that greatly impact day-to-day life.

Across the Netherlands, over half (56%) report constant pain in the lower part of the stomach, while just under a quarter (24%) said they experience diarrhea. Between one quarter to one third of respondents also report high menstrual flows that require additional accommodations. This higher-than-average flow (e.g., soaking one or more pads or tampons every hour for several hours in a row, and/or menstrual flow with blood clots the size of a €0.50 coin or larger) is a potential indicator of disorders such as endometriosis and PCOS. Among those reporting heavy flow, over half (54%) had asked for advice from their friends and family.

One area of particular concern is that notably fewer people who menstruate had contacted a healthcare provider (38%) or sought treatment from a healthcare provider (34%) than in 2022. Worryingly, these figures drop even further to 11% and 9% (respectively) among those aged 18-24.

The impact of a menstrual cycle on an individual's day-to-day life is significant, with many experiencing heavy flow



Q14. Which of the following, if any, do you usually experience on your periods? Please select all that apply.
Base: Respondents who were willing to answer questions about menstrual flow. Base size: The Netherlands: 2519, Amsterdam: 1022

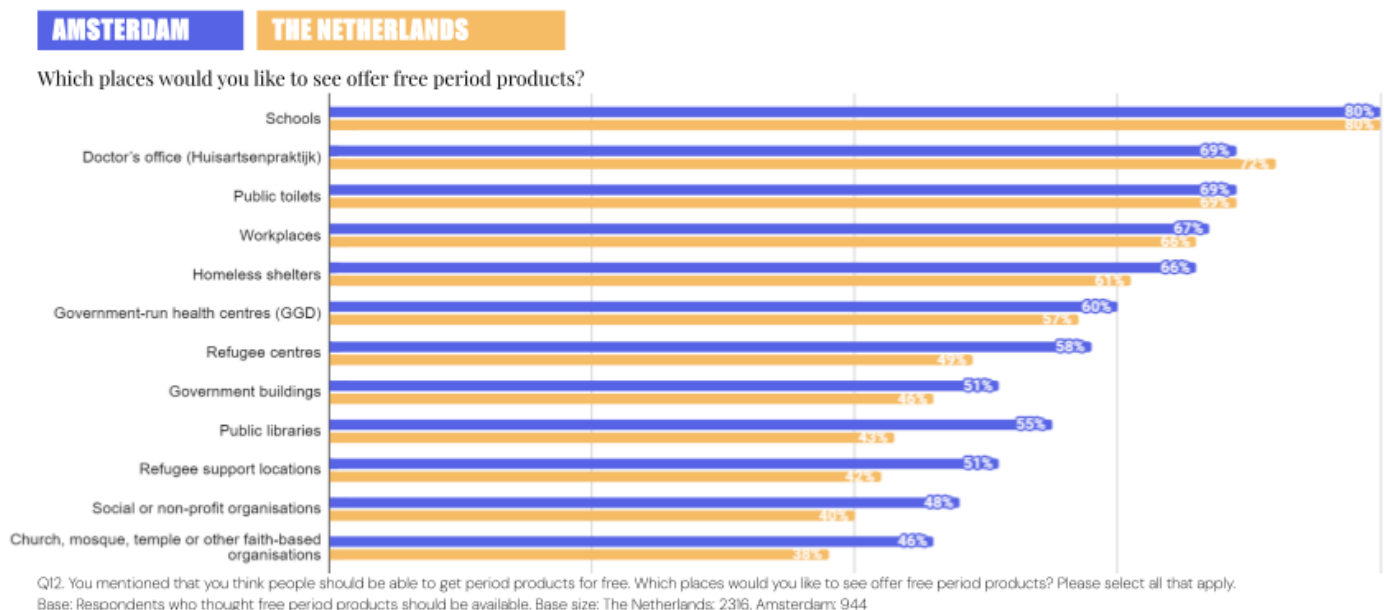
Most people believe that free period products should be available in a range of locations.

Nine in ten (91%) respondents believe people should be able to get period products for free, particularly in schools (79%, rising to 87% among 18-24-year-olds).

People in the Netherlands also want to see free period products in doctor's offices (*huisartsenpraktijken*) (70%), public toilets (68%), and workplaces (64%).

This sentiment is also shared in Amsterdam, where 91% think people should be able to get free period products. While support for free period product provisioning is unequivocal across all age groups and city parts, the places they would like to see free period products vary. Those in East and New West districts are particularly supportive of free period products in schools (89% and 86% respectively; the whole Amsterdam: 81%). Meanwhile, those in the West would like homeless shelters (76%), refugee centers (70%), and refugee support locations (63%) to provide free period products.

Places where free period products should be available





- ◆ A quarter of people in the Netherlands who have menstruated in the last 12 months couldn't or struggled to afford to pay for period products at some point.
- ◆ 13% of people in the Netherlands who have menstruated in the last 12 months have not been able to afford period products at some point. This equates to over 400,000 people.
- ◆ In Amsterdam, where results could be compared with NF's 2022 research prior to the 2023 start of municipal funding, there is a demonstrated decrease in period poverty. However, period poverty in Amsterdam still persists above the national average.
- ◆ People experiencing period poverty indicate a concerning use of alternative period products that carry serious health and participation implications.
- ◆ Between one quarter to one third of respondents report abnormally high menstrual flows, which require additional accommodations and expenses. Among these, notably few sought medical counsel or treatment.
- ◆ Period poverty systemically impacts younger respondents in greater numbers.

4. Conclusions and recommendations

4.1 Summary of Neighborhood Feminists 2024 research

Despite the wealth found in Amsterdam and the Netherlands, inequality of opportunity persists across the country. For those who menstruate in poverty, this translates to unequal access to vital information, period products, and health resources, which in the long term, can lead to a cascade of negative impacts on health, opportunity, and participation. This fundamental indignity became evident to NF in Amsterdam, even before the 2022 research.

When the NF findings were released in 2022, some media expressed surprise that the Amsterdam rate of period poverty, at 27%, was so much higher than the national rate, then understood to be 10%. Knowing that the national rate was based on a 2019 study, and given ongoing inflation, housing and energy pressures, it was NF's contention that the actual national rate was likely higher. NF believed that countrywide this was a more pressing issue than people recognized. This year's research sadly confirms that hypothesis.

The Netherlands

Over the past year, 25% of people who menstruate in the Netherlands either couldn't or struggled to afford (and managed) to pay for period products at some point. 13% – over 400,000 people – indicate they have not been able to afford period products at some point. 20% say they managed to pay but found it difficult to do so.

Period poverty continues to be significant and widespread across the Netherlands, affecting over 400,000 people.⁷⁹ The rate is 30% higher than previously understood⁸⁰ in spite of the one-time disbursement of €2 million by Parliament last year. The increased cost of living has exacerbated the problem.

For a sense of the scale, one in four of the people who menstruate in the Netherlands could either not afford or struggled to afford (but managed) access to period products. Struggles people experienced were tied to having to make compromises (e.g., cutting down on other basic necessities, such as groceries), and/or making accommodations (e.g., borrowing

⁷⁹ As this number of people affected was calculated using population data only for women and girls ages 15–49, the actual figure may well be higher.

⁸⁰ “*Bijna een op de tien meisjes heeft weleens geen geld voor maandverband of tampons.*” (Plan International, 2019.)

money or having to stay home during part of all of menstruation). One in five faced other challenges accessing the products they needed. 21% of the people who menstruate in the Netherlands had to resort to unsafe, alternative options at some point. This equates to over 610,000 people.

Over one in five people who menstruate in the Netherlands have had to resort to alternative options or actions within the 12 months preceding the study.⁸¹ Of these, two in five (44%) resorted to using toilet paper. Nearly one in ten (7%) used other paper products, such as tissues or newspapers, or a piece of fabric (9%) during their period.

Too often, period poverty means doing without other essentials. Beyond resorting to unsafe, inefficient alternative options, many resorted to alternative actions to afford menstrual essentials. Of these, 86% cut costs on other essentials. Nearly half (48%) had to reduce spending on food. A third limited spending on household needs, just over a fourth cut back on hygiene products, and just over a fifth cut back on health products.

Unsurprisingly, difficulty affording and accessing period products negatively impacts day-to-day life for many. One in four people experiencing period poverty had to alter their daily routines (24%), including having to stay home (7%), missing school (8%), or missing work (14%). Regardless of income, products associated with periods continue to carry a social stigma, with one third experiencing negative emotions when they try to obtain the products they need.

The outlook is sobering. Nearly a quarter (24%) of all surveyed said that they found it increasingly difficult to afford period products compared to the previous 6 months. The rate is even higher among younger age groups, with a third (32%) of 18–24-year-olds saying it has become more difficult.

Amsterdam

Taken together with the 2022 findings, this research enables comparison of the state of period poverty in Amsterdam before and after the enactment of the 2023 municipal policy and related actions in 2023. It is safe to assume that municipal funding for the distribution of free period products has had a positive effect, evidenced by the decline in the number of Amsterdam residents unable to afford period products compared to 2022.

⁸¹ As this number of people affected was calculated using population data only for women and girls ages 15–49, the actual figure may well be higher.

While a drop of 13% within two years is clearly positive, the Amsterdam rate still sits above the national average.

Despite the decrease since 2022, fourteen percent of Amsterdammers – or 28,000 people – have experienced period poverty within the last 12 months, with those living in the Southeast district hit the hardest, at a rate of 24%.⁸²

This level of period poverty comes with consequences. Cutting back on groceries to afford period products remains common throughout Amsterdam, with those in the Southeast (64%) the most likely to do so. Amsterdam residents experiencing period poverty also sought free period products in their workplaces (35%), which NF believes is, in part, due to advocacy efforts, increasing visibility of the issue in communities, and the number of well-resourced corporate headquarters and companies; the reasons would require further study. Among those experiencing period poverty, over half had to resort to using toilet paper (54%) as an alternative or, if no products could be found, staying home for the duration of their period (13%). Within the context of the proven, wide-ranging array of high, long-term social costs and impacts of period poverty, a 14% rate in Amsterdam remains of real concern.

While these findings have relevance for all municipalities, the Amsterdam conclusions have particular relevance for other major cities, which, like Amsterdam, have higher poverty (and thus period poverty) indicators than the rest of the country.

Period poverty policies and actions have made a difference, but we can do even more.

4.2 What does change look like?

Menstrual health – and period poverty – are public health and human rights issues.⁸³ In exploring policies, advocacy, and actions aimed at eradicating period poverty, clearly defining menstrual health is beneficial because variations in definition can fragment policy approaches, hamper advocacy, and weaken research. To counter this, NGO The Global Menstrual Collective has unified existing definitions to form a comprehensive definition:

⁸² As this number of people affected was calculated using population data only for women and girls ages 15–49, the actual figure may well be higher.

⁸³ Babbar et al., 2021.

*Menstrual health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity in relation to the menstrual cycle.*⁸⁴



Unfortunately, in the Netherlands, this level of menstrual health is currently unattainable for far too many. However, with targeted changes and strategic collaboration, every person can menstruate with dignity. The changes needed are feasible, involving both modest and more intricate steps.

What is clear: actions need to go beyond one-time measures.

These shifts can deliver both immediate and longer-term results in three essential areas: access and equity, education, and research. Actions in these areas are prerequisites for effective policy.

⁸⁴ The full definition can be found in [Appendix section I](#) (Hennegan et al., 2021).

► **Priority 1: MENSTRUAL ACCESS & EQUITY**

Since its inception in 2019, NF has witnessed an upward shift in the scale of support initiatives, with a corresponding uptick in media attention from 2022 onward. With the increase in visibility comes a welcome increase in political will to address the issue. However, the political will must be sufficiently matched by specifically allocated public funding.



It is important to keep the following in mind:

- ◆ **Fighting period poverty must not come at the expense of other inequality and poverty-fighting measures.⁸⁵**
- ◆ **Tackling period poverty involves strategic investment in a blend of targeted product provisioning alongside preventive health and education measures.**
- ◆ **Measures enacted in public and private sector spaces should be coordinated to ensure adequate and consistent access to essential products and information.⁸⁶**
- ◆ **Adequate product provisioning includes sufficient monitoring and assessment of needs in order to help ensure programs actually reach hoped-for outcomes.**

⁸⁵ Also, see [Appendix Section V](#).

⁸⁶ For example, while NF promotes reusable products over single-use when possible, the reality is that not everyone has regular access to kitchen or laundry facilities.

Systematically meeting a basic standard of health by providing free products in public buildings, schools, universities and businesses is an investment with an array of immediate and long term returns.

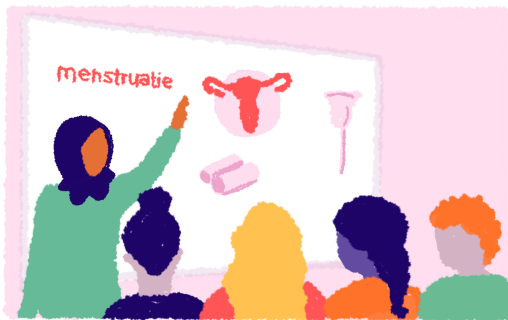
There is an important socio-cultural component impacting the success of any period poverty action, namely: How gender-friendly is the access and how many period management hurdles do people still experience? Complementary research and monitoring enable appropriate and timely improvements. The sustainability of any longer-range solutions depends on the degree to which they actually respond to the wide range of needs of people who menstruate. Product provision alone is simply not enough, and as signaled by persistent and pernicious taboos as well as NF's findings, there's a long way to go in terms of menstrual literacy.

► *Priority 2: MENSTRUAL EDUCATION*

Education is the most effective action in combating menstrual illiteracy and stigma. Sharing science-based information enables people to make informed, optimal choices about products and approaches. This holds true across the board, whether as children or adults, partners or employers, sports team members, or community leaders. Effectively pushing back against stigma must incorporate more inclusive approaches.⁸⁷

Effective menstrual education is inclusive. It involves boys and young men at school and men in the workplace because they too have a substantial role to play in helping dismantle social shame and stigma.

The structural provisioning of comprehensive menstrual education equips people to proactively recognize abnormal signs and issues, such as excessive bleeding, and be better placed to receive an earlier diagnosis for illnesses and disorders. This also comes with cost-savings and a reduction in uncertainty and suffering. Therefore, it must receive serious consideration and support.



Effective and targeted education preemptively dismantles some of the menstrual shame perpetuated by cultural myths and some commercial menstrual marketing. De-stigmatizing menstrual blood increases well-being and a sense of autonomy, but it also has practical benefits. As

people become more comfortable with menstruation and bleeding, those who menstruate are more likely to use more sustainable options such as period underwear or medical-grade silicone cups and disks.⁸⁸ Over time, reusable options equate to individual benefits through cost savings and community benefits through things like less landfill waste.

While education is crucial, education alone is not enough to change deep-rooted social norms. As learning does not only occur in schools, campaigns within communities,

⁸⁷ Eyring et al., 2023.

⁸⁸ The prevailing stigma towards menstruation can hinder people who menstruate to seek medical treatment when needed (Holland et al., 2020).

municipalities, and at a national level would complement and reinforce school initiatives. Systematically broadening the conversation would greatly help in reducing social stigma while actively supporting gender equity and public health. Government policy and communications should, therefore, not only normalize talking about menstruation, they should also reinforce the importance of making products more widely accessible.

Menstrual education positively impacts businesses and the economy. For example, among women aged 45–55, the primary condition impacting women’s work engagement worldwide is premenstrual stress (PMS). Rather than assuming it is normal and inevitable, education that includes coping strategies to ease PMS symptoms is a practical approach to increasing quality of life, participation, and opportunity.⁸⁹ According to the World Economic Forum and McKinsey Health Institute, globally prioritizing PMS can potentially add \$115 billion to the global economy by 2040, while addressing endometriosis and menopause could contribute another \$130 billion.⁹⁰

This means that menstrual health education is highly relevant for the private sector. Increased menstrual literacy can translate to more effective employment practices, such as greater flexibility and/or remote work opportunities, increasing retention and productivity.⁹¹ University of Amsterdam researcher Sasha Cook confirmed that people disclosing endometriosis or other menstrual problems to their supervisor were less likely to show presenteeism, meaning "forcing" oneself to work despite severe symptoms. Since presenteeism can lead to lower well-being and work output in the long run, taking practical steps like menstrual literacy interventions can positively impact overall employee satisfaction and company profit.⁹²

⁸⁹ For example, this could include taking calcium supplements, which numerous medical studies have confirmed reduce PMS symptoms (Taghiabadi et al., 2020).

⁹⁰ Pérez, Lucy, Shyam Bishen, McKinsey Health Institute, and World Economic Forum, 2024.

⁹¹ The results of a 2017 Radboud/UMC national survey of 32,748 women evaluating productivity loss at school and work due to menstruation related symptoms showed that 13.8% of Dutch women had to take time off during their period due to symptoms, missing on average 1.3 days per year. A far higher number (80.7%) remained at work despite significant symptoms, reporting an average of 23.2 days of decreased productivity annually (Schoep et al., 2019).

⁹² See [Section 4.3](#) for steps businesses and organizations can take.

► *Priority 3: MENSTRUAL RESEARCH*

The ongoing gendered gap in health research is well-documented in countries around the world.⁹³ One result of women systematically being excluded from clinical studies is that eight out of ten drugs released in the US market between 1997 and 2000 were removed due to serious side effects that mainly or exclusively occurred in women.⁹⁴

We literally know less about every aspect of female biology compared to male biology.

Dr. Janine Austin Clayton
Director, NIH Office of Research on Women's Health⁸¹



One of the long-standing medical myths impacting the inclusion of women is the assumption that the menstrual cycle skews research findings. In fact, a small but growing area of research indicates this is not the case and that, across some variables, men's hormones have greater impact.^{95,96} NF adds its voice to that of thousands of Dutch medical professionals and citizens who are calling for more

public funding for health research that includes women, especially for life-altering illnesses and disorders, such as endometriosis.^{97,98}

⁹³ Abbasi, Kamran, 2023.

⁹⁴ Food and Drug Administration & USGAO, 2001.

⁹⁵ Becker, Jill B., Brian J. Prendergast, and Jing W. Liang, 2016.

⁹⁶ Weigard, Alexander, Amy M. Loviska, and Adriene M. Beltz, 2021.

⁹⁷ Over 41,000 people signed a 2022 petition delivered to Parliament calling for gender-sensitive health care and more attention to sex and gender in health research. The gender gap in research "often leads to late or incorrect diagnoses and incorrect treatments. [For example,] of all patients with unexplained health complaints, 80% are women; of all patients with an autoimmune disease, 75% are women" (ZonMw, 2022).

⁹⁸ "Stichting – Voices for Women", 2022.

Research is a critical element of both informed policy development and effective practice and teaching of menstruation management by medical professionals, educators and, of course, those who menstruate.

Funding bodies, whether public, academic or private, need to move past shame-based reluctance built on outdated notions of the impact of menstruation-related hormones on medical research.⁹⁹ Given the wide array of menstruation experiences and practices, robust trial-based evidence allows us to challenge the assumptions maintained by policymakers, educators, medical professionals, advocates, parents, and allies.



- ◆ Period poverty continues to be significant and widespread across the Netherlands, at a rate 30% higher than previously understood despite the one-time disbursement of €2 million by the Cabinet last year and increased cost of living exacerbating the problem.
- ◆ One quarter (25%) of the people who menstruate in the Netherlands could either not afford, struggled to afford (but managed), resorting to alternative product options or actions, impacting over 765,000 people.¹⁰⁰
- ◆ In line with leading academic and governmental specialists, menstrual health must be understood as a state of complete physical, mental, and social well-being, in addition to the absence of disease or infirmity in relation to the menstrual cycle.
- ◆ The political will to acknowledge and combat period poverty must be sufficiently matched with specifically allocated and sustained public funding.
- ◆ Fighting period poverty must not come at the expense of other inequality and poverty-fighting measures, as these efforts concern and strengthen one another.

⁹⁹ Metz, Christine N, 2024.

¹⁰⁰ As this number of people affected was calculated using population data only for women and girls ages 15-49, the actual figure may be higher.



- ◆ Measures to address period poverty must expand beyond the provisioning of menstrual products and simultaneously include a blend of approaches, including efforts within preventive health, menstrual education, and menstrual research.

4.3 A call to action for menstrual access and equity, education, and research

What does a sustained focus on the themes of menstrual access and equity, education, and research look like, practically speaking? Approaches will differ according to the variation in needs at the local level, but action is needed everywhere and anyone can be a part of the solution.

► *What we can do* **NATIONALLY**

The unequal burdens of menstrual management and reproductive health issues have a significant impact on those who menstruate, but they also impact society as a whole.

Menstrual equity and education are an inextricable part of women's health. Recently, the World Economic Forum and McKinsey Health Institute projected the ratio of return on investment in women's health at 3.5 to 1. This reinforces the clear, practical value of investing in the health infrastructure needed to support education and low-cost delivery of high-quality health services.¹⁰¹ The benefits, however, are not limited to half the population. Closing the gender health gap not only means addressing unmet needs and unlocking potential but also benefits families, communities, and society in the long run.

More inclusive health policies directed at ending period poverty and improving menstrual literacy include:

- ◆ Setting guidelines and standards for comprehensive menstrual health education as part of the core objectives (*kerndoelen*) in secondary education.
- ◆ Supporting a national period education campaign to diminish stigma and encourage conversation around menstruation and period poverty, similar to the Ministry of Health's recent mental health campaign 'Hey, het is oké'.¹⁰²

¹⁰¹ A 2024 World Economic Forum and McKinsey Health Institute report extensively analyzed women's health matters, concluding that potential value from women's higher economic participation and productivity exceeds the costs of implementation by a ratio of 3.5 to 1 in higher-income countries (Pérez, et al., 2024).

¹⁰² *Ministerie van Algemene Zaken and Ministerie van Volksgezondheid, Welzijn en Sport (VWS), 2024.*

- ◆ Decreasing national and local period poverty figures through the renewal of the National Memo Healthcare Policy 2020–2024.¹⁰³ Include clear guidelines for municipalities on how they can monitor period poverty and implement measures in their local health policies.
- ◆ Ensuring that the minimum wage is 60% of the Dutch median wage, in line with the European directive on adequate minimum wages. The Dutch minimum wage continues to be one of the lowest in the EU. Enacting this in law would mean a minimum wage increase to €16/hour, crucial in helping to close the increasing disparity between income and rising daily expenses. As has been shown in the Netherlands and elsewhere, increasing the minimum wage does not create significant negative effects on employment. In fact, it may even lead to positive effects by stimulating higher work motivation and reducing staff turnover.¹⁰⁴

Government leadership on, and promotion of, research funding is crucial in order to reduce the significant and chronic gap in the areas of menstrual and reproductive health. More information is critical for improving preventive health measures, thereby reducing healthcare costs and improving participation in the workplace and schools.

Examples of actions to be taken:

- ◆ Developing monitoring standards for quantifying and tracking menstrual initiatives and building upon best practices.
- ◆ Incentivizing funding bodies to help ensure studies on hormones and menstrual health are conducted. Examples of needed research include improving the early detection of menstrual disorders like endometriosis and fibroids through the study of menstrual blood, including nonbinary and trans people. These groups are even more under-represented than women in medical research but still struggle with menstrual disorders.
- ◆ Developing and disseminating standards to better define and address menstrual pain.
- ◆ Clarifying the health impact of metals, dioxin toxins, and pesticide residues in period products (including vaginal care products) to reinforce calls for manufacturers to make full disclosures.¹⁰⁵ Adequate regulation and independent testing is also needed.

¹⁰³ *Ministerie van Volksgezondheid, Welzijn en Sport*, 2021.

¹⁰⁴ “*Voor16*,” n.d. Federation of Dutch Trade Unions (FNV) website.

¹⁰⁵ Fifteen studies have already confirmed the presence of a range of chemicals (such as dioxin) in tampons. In June 2024, another study confirmed the presence of 16 heavy metals, including arsenic and lead. There is no safe exposure level for lead (Shearston et al., 2024).

► *What MUNICIPALITIES can do*

While each program should match to the realities of a city or given locality, there are some necessary, unified steps to be taken:

- ◆ Recognizing period poverty as a societal problem that requires being dealt with through dedicated policy goals that tackle the issue within the social domain framework of the municipality.
- ◆ Determining estimated needs in collaboration with local social workers, relevant anti-poverty NGOS, grassroots community groups, and those directly impacted by period poverty.
- ◆ Supporting the development of comprehensive menstrual health education in schools (for detailed information on this, please refer to the [section addressing schools](#)).
- ◆ Establishing a monitoring process to review and adjust programs and initiatives, including annual evaluations of the effectiveness of the local execution of set policy goals.
- ◆ Organizing local campaigns, in collaboration with local partners, such as schools, businesses, and advocacy groups, to increase awareness.

► *What BUSINESSES can do*

While each organization may differ in terms of human resources and/or corporate social responsibility initiatives, these need not be resource-intensive in order to be impactful.

For example, companies can consider:

- ◆ Making period products available in all bathrooms (with waste bins) for staff and, if applicable, the general public. Providing free tampons and pads is a way to consider employee health and well-being in the workplace while improving productivity and likely positively impacting attendance.¹⁰⁶

¹⁰⁶ Hourly wage (before taxes) is 13% lower for women, while the gender gap in the Netherlands means that women earn 36% less than men (also accounting for age and education). Women are disproportionately represented in lower paying jobs, and receive significantly lower wages with a migration background. (Ministerie van Justitie en Veiligheid. 2024.)



- ◆ Working with relevant organizations, such as Neighborhood Feminists to bring attention to period poverty and support needs-based solutions for the community, which can be as simple as hanging up a sign in restrooms (see [Appendix Section III](#)).
- ◆ Committing to one or more components of the Period Positive pledge. This pledge asks questions like: Has the leadership team committed themselves to improving their menstrual literacy? Are staff comfortable talking generally about menstruation in the workplace? Is there general awareness and accommodation for staff who experience significant issues around menstruation or menopause that mitigate impacts on their work?¹⁰⁷
- ◆ Working towards a structural, scalable, and organization-wide focus on menstrual access and equity through a supported certification process like the Period Positive Award.¹⁰⁸ Increasing menstrual literacy internally ensures a more effective HR policy for employees who have menstrual disorders such as endometriosis.¹⁰⁹
- ◆ Sharing impactful policy and practice shifts on social media to inspire other companies and normalize frank talk about menstrual health.
- ◆ Ensuring that any marketing language used avoids reinforcing any period taboos, language that is not inclusive, or language that provokes a sense of shame around menstruation.
- ◆ Supporting municipal and/or national menstrual health and period poverty educational campaigns.

► *What SCHOOLS can do*

Working together with local government and advocacy groups, schools can play a far-reaching role in changing how society perceives and behaves on matters of menstruation and period poverty.

Some considerations to keep in mind for an effective and comprehensive approach:

- ◆ From elementary education onwards, period products should be considered as part of necessary school supplies. Given the level of need, they should be made as available as toilet paper and soap.

¹⁰⁷ Quint, Chella, 2020.

¹⁰⁸ “Period Positive Places Award”, 2024.

¹⁰⁹ Cook, Alexandra, 2024. “Diagnosing Endometriosis - What’s the Delay?”

- ◆ Integrating menstrual education in schools in such a way that it re-frames menstrual health from being ‘just for women and girls’ to include all students, including trans youth. Excluding boys and young men because they don’t menstruate equates to missing a valuable opportunity for preemptively building awareness, reducing stigma, and normalizing menstruation and necessary accommodations.
- ◆ Knowing that periods can begin as early as 8 to 9 years old, and occur unpredictably in the first years, teachers and staff, including men, should be adequately briefed on the basics so as to be able to appropriately respond to the needs and questions of students.
- ◆ Age-appropriate and comprehensive education on this basic aspect of health should begin from age 10–11 and include all students. This introduction should cover practical aspects, including:
 - Care options that include considerations of sustainability (both personal costs and effects on the environment) as well as how to access free period products.
 - An understanding of “what’s normal,” which includes identifying different pain levels, variations in menstrual flow, and effective solutions, as well as an overview of common menstrual symptoms and solutions.
 - Introducing the changes that occur with childbirth, perimenopause, and menopause.
 - How to deal with hormonal challenges, such as mood swings and depression.
- ◆ For older children, ‘comprehensive’ education should empower individuals through practical information that enables them to:
 - Recognize the signs of all the menstrual phases, including perimenopause and menopause.
 - Avoid risks, such as Toxic Shock Syndrome, and effectively reduce common pain symptoms.
 - Better identify signs of painful disorders (e.g., fibroids, PMS, and heavy bleeding) as well as potentially debilitating illnesses (i.e., endometriosis, premenstrual dysphoric disorder (PMDD), polycystic ovary syndrome (PCOS), and primary ovarian insufficiency (POI)).¹¹⁰
 - Access necessary health services and resources.

¹¹⁰ Up to 80% of people who menstruate experience PMS in their lifetime, while some 33% experience heavy bleeding, which can be an indicator of serious disorders such as endometriosis, adenomyosis or polycystic ovary syndrome (PCOS). (Gupta, Pratima, 2022; Hantsoo et al., 2022).



- ◆ Schools can sign on to accessible menstrual education commitments in the spirit of the #PeriodPositive Pledge to underscore the importance of menstrual literacy.¹¹¹

► *What UNIVERSITIES and other institutions of higher learning can do*

Over the past several years, university students – stuck between a housing crisis and the inflation of daily expenses – have led calls for improved menstrual access and equity.

There are clear steps institutions of higher education can take, including:

- ◆ Recognizing the issue of period poverty within the institution. This can be as simple as hanging up signs in restrooms (see [Appendix Section III](#)).
- ◆ Improving gender equity for students and staff by providing adequate points of access to free period products.
- ◆ Providing comprehensive information on menstruation management, including sustainable options, such as cups, disks, and period underwear. This can take place in student service or health centers and/or in online student well-being portals.
- ◆ Addressing stigma around menstruation by facilitating safe conversations within the university and increasing the visibility and accessibility of resources.
- ◆ Collaborating with relevant local organizations, which are sources of specific, practical expertise, in order to determine budget calculations and effective distributions systems for period products.
- ◆ Supporting emergent groups within the university that aim to tackle period poverty.

¹¹¹ The Period Positive Pledge is part of a comprehensive education and certification program developed by UK researcher, advocate and educator Chella Quint. (Quint, Chella, 2020).

► *What YOU as an individual can do*

Answers vary according to your personal position in society, but by acting as an early adopter and simply bringing up aspects of menstruation no matter your gender, you can help shift social norms in their everyday life.

Some ideas to get started include:

- ◆ Ensuring period products (and waste bins) are available at your home and place of work, even if you don't menstruate.
- ◆ Talking with others, such as family, friends, and colleagues, about the steps you take. If you are active on social media, consider sharing your actions online to inspire others and normalize frank talk about menstrual health.
- ◆ Learning more about menstruation management, including effective coping strategies and sustainable reusable options. Many resources are online and free.¹¹²
- ◆ Donating to or volunteering with organizations fighting period poverty in your neighborhood and community thereby contributing resources to grassroots initiatives. Support can be as simple as hanging up signs in restrooms (see [Appendix Section III](#)) or spreading awareness about our narrative, story-gathering research (see [Appendix Section II](#)).
- ◆ Encouraging public and private decision makers in your community to incorporate inclusive health policies like comprehensive menstrual health education in elementary schools or period products in local restaurants and bars.

¹¹² For example, [Rutgers](#) and [Neighborhood Feminists](#).

4.4 Looking forward

Moving from CODE RED to CODE GREEN – and true menstrual health



Every citizen has a right to *bestaanszekerheid* – alongside the right to housing, work, health care, and a healthy and safe environment – as clearly stipulated in the Dutch Constitution. *Bestaanszekerheid* refers to a guarantee of having stable access to the basic necessities for life and implies protection against insecurities such as poverty. National and local policies should shift course, extending beyond short-term solutions to better reflect this fundamental commitment.

Addressing *all* structural poverty is key to successfully addressing period poverty and the required funding must be recognized as an investment that will yield compelling long-term benefits, including cost savings.

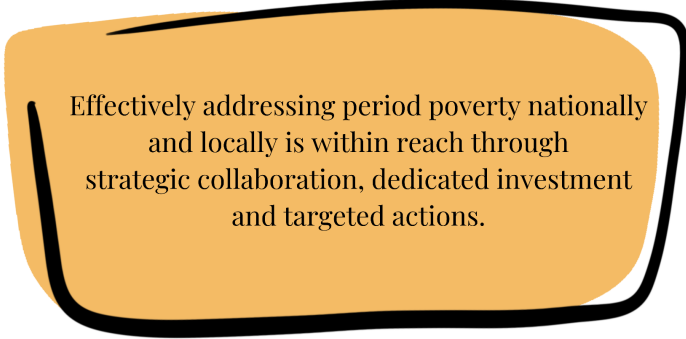
Raising the minimum wage (and benefits) and directly addressing the housing crisis are unmissable steps the government, national and municipal, can and must take to address all forms of poverty, including period poverty.

Change toward preventive approaches is possible. Case in point: Amsterdam, where they have successfully changed municipal policy on evictions, swapping out existing, costly short-term fixes for longer-term approaches which ultimately save the city money. Ten years ago there were 800 evictions each year, whereas in 2022 there were only 32. Of those 32 evictions, none involved children. This was made possible by collaborating with other organizations to engage earlier with people's problematic debts, dramatically reducing the poverty spiral and positively impacting the city as well as the individuals involved.¹¹³

¹¹³ 'S Jongers, Tim, 2024.

Using similar techniques, we can find lasting solutions for period poverty.

We can move out of **CODE RED** by systematically prioritizing menstrual equity and access for everyone, menstrual education, and menstrual research in policy and practice in both the public and private sectors. The result is that cities like Amsterdam and the country as a whole can move towards code yellow and ultimately to green, with overall economic benefits outweighing the required investments.¹¹⁴

A large, hand-drawn style orange speech bubble with a thick black outline, containing the following text:

Effectively addressing period poverty nationally and locally is within reach through strategic collaboration, dedicated investment and targeted actions.

*In doing so,
we improve*

- ▶ Public health
- ▶ School & work participation
- ▶ Gender equity

When we take action together on this issue, we *all* benefit.



¹¹⁴ Pérez, Lucy, Shyam Bishen, McKinsey Health Institute, and World Economic Forum, 2024.

Appendix

I. Clearly defining menstrual health

In exploring policies, advocacy, and actions aimed at eradicating period poverty, clearly defining menstrual health is invaluable. Variations in definition can fragment policy approaches and hamper advocacy and research. To counter this, NGO The Global Menstrual Collective – which is comprised of a range of specialists from UN organizations, academia, government, the private sector, advocacy groups, and NGOs – unified existing definitions to form a single comprehensive definition in 2021:¹¹⁵

Menstrual health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity in relation to the menstrual cycle.

It includes

- ▶ Access to accurate, age-appropriate information about the menstrual cycle, menstruation, and changes experienced throughout life, as well as related self-care and menstruation management practices.
- ▶ Access to care for their bodies during menstruation including effective and affordable menstrual materials, and needed facilities and services.
- ▶ Access to timely diagnosis, treatment and care for menstrual cycle-related discomforts and disorders, including access to appropriate health services and resources, pain relief, and strategies for self-care.
- ▶ Access to a positive and respectful environment in relation to the menstrual cycle, free from stigma and psychological distress, including the needed resources and support to make informed decisions about self-care throughout their menstrual cycle.
- ▶ Ability to decide whether and how to participate in all spheres of life, including civil, cultural, economic, social, and political, during all phases of the menstrual cycle, free from menstrual-related exclusion, restriction, discrimination, coercion, and/or violence.

¹¹⁵ Hennegan et al., 2021.



II. Taking part in our ongoing story-gathering research

In collaboration with Neighborhood Feminists, research partner Perspectivity commenced their narrative work in July 2024. They are busy collecting personal stories from people who have experienced period poverty.

Stories are powerful and offer meaningful insights into the impact of period poverty on people's lives in the Netherlands. Having a clearer picture of actual, lived experiences is an important part of building our collective understanding of period poverty in the Netherlands.

Participants are asked to share a personal story about a time they experienced period poverty, or to share a story about someone they know who experienced period poverty. Perspectivity then asked participants to give meaning to their own story by answering a couple of questions related to the story. General questions, to better understand certain attitudes and perspectives, have also been included.

Perspectivity aims to collect stories in various ways, ranging from a face-to-face mini writing workshop, to one-to-one interviews, to online story collection. Thus far, reaching audiences has proven challenging given the prevailing degree of stigma around the topic. It is requiring more time and effort than usual to invite and encourage potential respondents to participate, which is why Perspectivity will continue to collect stories until December 31, 2024. They welcome online participation and in-person engagement where possible. Upon research completion, the final report containing insights and stories will be made available on the Neighborhood Feminists website.

How to participate

All participation is confidential. Participation (in English and Dutch) is possible by filling out an online, interactive survey. The survey can be accessed [here](#).¹¹⁶ Contact Perspectivity's Marjolein Kok at marjolein.kok@perspectivity.org for any other type of story collection, such as personal interviews or confidential, small group workshops (with translation if needed).¹¹⁷

¹¹⁶ Find the open Sprockler inquiry on period poverty at <https://collector.sprockler.com/inquiry/5afd2>.

¹¹⁷ Feel free to contact Marjolein Kok for more info or if you or your organization would like to support the research and/or participate as a group: marjolein.kok@perspectivity.org.



About Sprockler

Sprockler¹¹⁸ is a philosophy and methodology for narrative and participatory research, fueled by an innovative software tool. Inspired dialogue and self-reflective learning are needed for people to be able to unlock their collective wisdom, passion, and creativity. Sprockler was developed by Perspectivity in response to an increasingly complex world wherein we endeavor to make sense of what happens.¹¹⁹ It is a qualitative and quantitative approach that collects and makes sense of narratives and then quantifies overarching patterns of the shared narratives.

Sprockler embraces the following key principles:

- ◆ **Storytelling** – people share their own stories, leaving space for unexpected and emerging experiences and information.
- ◆ **Self-signification** – by giving meaning to your own stories, authenticity and ownership is fostered.
- ◆ **Sense-making** – together, from diverse perspectives, we make sense of the stories that enrich insights and foster dialogue.
- ◆ **Sharing insights** – data is visualized in an interactive, online report and shared with all stakeholders involved, including respondents, with the goal of being inclusive and fostering mutual learning.

¹¹⁸ For more information on the methodology, visit www.sprockler.com.

¹¹⁹ Perspectivity is a social enterprise facilitating social systems change. They are convinced that today's complexity offers opportunities for creativity, innovation, and collaboration. To learn more about what they do, please visit: www.perspectivity.org.

III. A note on language – and a step to take right now – to actively tackle stigma

It's impossible to improve menstrual literacy without actively pushing back against stigma. This means speaking up in different contexts about what has been historically hidden in order to build awareness and bust myths. What we say and how we say it matters, so here are some basic points to keep in mind:

- ◆ **Call things what they are.** Euphemisms were developed to covertly refer to matters then considered shameful. Avoid using these. A period is simply a period.
- ◆ **Update terminology.** Much historically accepted language is stigmatizing (e.g., “hygiene” or “sanitary”). These descriptors are not used for other products that also address bodily excretions, such as tissues or diapers.¹²⁰
- ◆ **Actively expand awareness of what's normal and abnormal in menstrual management in all spaces.** A key benefit to menstrual education is understanding how to identify what's abnormal, such as heavy/excessive bleeding, thereby reducing pain and financial costs.

Take a first step today

Breaking the silence on a very stigmatized subject can feel uncomfortable at first. It might seem impossible to know where to begin. For some, the language we recommend above may feel too difficult to use at first. That's where art can play a role. Without having to say a word, art can help drive messaging for desired social change. While campaigns can be grand in scale and visible on every major platform, they can also be modest and driven by a well-designed image built on a compelling idea. An attention-grabbing image can trigger important conversations, and normalize notions that at one point seemed, well, impossible.

Marleen Geerts had exactly this in mind when she created Neighborhood Feminists' new awareness-building poster, which we proudly debut in this report. An award-winning Art Director and all-round creative dynamo, Marleen reached out to Neighborhood Feminists because she gets especially excited about social and green projects.

Turn the page for a preview of what Marleen created. Next, visit our website and download your own poster in [Dutch](#) or [English](#) and hang it in a bathroom near you (an A3 version is also available to order).

¹²⁰ In 2024 NGO Women Inc. launched their *Ongesteld* campaign, intended to confront these kinds of stigma in conventionally accepted language.



Art Credit: Marleen Geerts (available as download in [Dutch](#) or [English](#))

IV. Populations at greater risk of poverty in the Netherlands

As outlined in the report, poverty data underrepresents reality in the Netherlands. Each of these populations face concerning limitations, which are challenging to comprehensively address within the scope of a single report. The following provides some additional context.

► *People lacking secure housing*

NGOs such as the Salvation Army report a **significant increase in homelessness since 2022, particularly among youth who too often fall between the cracks of support organizations.**¹²¹ In 2022, the Ministries of Health, Welfare and Sport, Housing and Poverty Policy jointly introduced a National Action Plan against homelessness. Notably, this included adopting an ETHOS Light definition of homelessness in order to more accurately determine the number of homeless people.¹²² In 2023, conclusions from the first data collection using the revised definition demonstrated:

“There is great diversity within the group of homeless people, breaking the stereotypical image of homelessness. The count shows more women, children, and young people. For example, 29% of the counted people are women... In addition, homelessness occurs everywhere, not only in the big cities. The report shows that there are many different types of homeless living situations. Thus the results break the dominant image that homeless people only stay on the street or in a shelter. The largest group of people stay in less visible places such as with friends, family, in a car, garage, or mobile home.”¹²³

► *Undocumented people*

Undocumented people across the country continue to face significant uncertainty and higher rates of poverty. This is due, in part, to regulatory restrictions on working and the phasing out of government support (i.e., the temporary shelter of the Bed-Bath-Bread program renamed *Landelijke Vreemdelingenvoorzieningen*, or LVV). Numerous concerned mayors have pointed out that this will increase municipal burdens by leading to higher

¹²¹ Salvation Army/*Leger des Heils*, 2022.

¹²² ETHOS stands for European Typology of Homelessness and Housing Exclusion; the ministries chose to go with a more limited version, called ETHOS Light, further outlined in the National Action Plan. (*Ministerie van Algemene Zaken*, 2023).

¹²³ *Kansfonds* and *Hogeschool Utrecht*, 2023.

levels of homelessness.¹²⁴

► *Single mothers and children*

Poverty affects women and girls to a greater extent. **When women were the primary income earners, 291,900 women fell below the poverty line in 2022. This is double as many as men.**¹²⁵ Climbing out of poverty becomes an even steeper, uncertain long-term challenge given that over half of ‘precarious’ jobs are held by women.¹²⁶

The poverty spiral faced by many women, especially single mothers, also has a tangible, long-term impact on their children. Over 16% of all children are raised in single-parent households, of which 20% grow up in poverty. The poverty rate among women-led single-parent families is again twice as high as among men.¹²⁷ The children most in need come from a migrant background, single-parent families, an ethnic minority, or those with disabilities.¹²⁸ A 2023 SEO Economic Survey has shown that one in three children in the Netherlands experiences financial stress, which impacts their school results and may relate to the stark increase in low literacy as well as further complicating attempts to climb out of poverty in adulthood.¹²⁹ **In total, some 460,000 children in the Netherlands live in poverty.**¹³⁰

► *The working poor*

One third of those living in poverty have paid work, but earn too little to cover their basic needs. In 2020, 147,000 people (1.9% of the working population) were part of a household with an income below the poverty line. Hundreds of thousands of working poor are caught in a *loonfuiik*, or wage trap, in which their stagnating salaries barely fall above minimum

¹²⁴ BNNVARA, 2024.

¹²⁵ 5.8% of primary income earning women lived below the poverty line, compared to 2.9% of primary income earning men. (Centraal Bureau voor de Statistiek, 2023. “CBS Statline: Laag en Langdurig Laag Inkomen van Personen CV; Huishoudenskenmerken.”)

¹²⁶ Sociaal en Cultureel Planbureau, 2023.

¹²⁷ In contrast, in two-parent households, the poverty rate drops to 5% (Stichting Single Super Moms, 2023).

¹²⁸ Dutch NGO Coalition on Children’s Rights and Utrecht University, Strategic Theme ‘Dynamics of Youth’, 2023.

¹²⁹ SEO Economisch Onderzoek, 2023.

¹³⁰ NPO Radio 1, 2024.

wage. Whether at minimum wage or slightly above, their salaries have sharply fallen behind inflation, which has skyrocketed to 13.8% within the past two years.¹³¹

► *Students*

Faced with reductions in student loans, soaring housing costs, and inflation, students at Dutch universities experience increasing poverty.¹³² The National Institute for Budget Information (Nibud) has reported students increasingly rely on their parents due to cuts to financial support and spikes in costs for housing, healthcare, and basic necessities.¹³³ Unfortunately, not all individuals have access to familial or parental financial support, forcing these students to self-fund the costs of living alongside the cost of higher education. This impacts their studies.

¹³¹ The minimum wage is €13.68 per hour as of July 2024. A recent EU directive sets requirements for both the level of the minimum wage and the independence of trade unions. For example, the minimum wage must amount to 60% of the median wage in a country. In the Netherlands this comes to €16, also called for by the Federation of Trade Unions (FNV). (Boogaardt, Boje, 2024.)

¹³² ‘Silent poverty’ is growing among university students. (“Poverty, Suffering in Silence”, 2021. Maastricht University.) Nibud reports that compared to 2018, more than twice as many young adults indicate that they have difficulty making ends meet, from 11 to 26 percent. (Vermeer, 2022.)

¹³³ Groen, 2022.

V. Key findings and recommendations from the 2022 NF research

The benchmark for Amsterdam is the NF and Opinium quantitative research into period poverty in Amsterdam (15/09/2022-19/10/2022).

1,332 people who menstruate and live in the city took part, with conclusions analyzed from 870 respondents.¹³⁴

In addition to points previously mentioned, findings also included:



Difficulty affording and accessing period products negatively impacted day-to-day life.

7 in 10 of those struggling with accessing period products had had to alter their routines by having to stay home, missing school or work.

Products related to periods carried social stigma.

Over two in five experienced negative emotions when they try to get the products they need.

Period poverty was on the rise.

Among all respondents who struggled, 41% found it increasingly difficult to afford period products compared to the previous 6 months.

46% of 18–24-year-olds found it had become more difficult for them to afford period products.

Neighborhood Feminists 2022 policy recommendations included:

Nationally

- ▶ Raise benefits and the minimum wage to more accurately reflect the actual, rising cost of living.
- ▶ Build public awareness through an education campaign developed in coordination with municipalities.

Locally

- ▶ Make period products freely available in all suitable locations. Using existing facilities, whether schools, libraries, GGD locations, or other government-owned facilities, makes this type of policy change lower threshold, and lower in cost, while improving accessibility and visibility as people in need already frequent these locations.
- ▶ Provide comprehensive menstrual health education that includes awareness about practical menstrual health options and earlier detection of potentially serious health problems. Include all genders to help reduce stigma.

¹³⁴ The complete research findings are available on the [NF website](https://www.neighborhoodfeminists.com).



A closing note of gratitude

Change is neither rapid nor linear. It cannot happen without sustained commitment, especially when redressing long-standing structural inequalities. But just because something isn't easy, doesn't mean it shouldn't be addressed, and many have risen to this challenge before us. We thank all those who currently tackle this issue, whether as volunteers, community leaders, union members, social workers, aid workers, researchers, or decision makers. We created this as a practical resource that comprehensively explains and addresses period poverty, and encourage readers to locate and use the sections and information that can best support their work.

Periods don't stop for poverty, and the need for longer-term measures will remain. As underscored in the report, effective solutions will require coordinated, needs-based responses from all levels of society. There are so many ways to engage. Whether directly with us or with another group, we encourage others to join us in helping marginalized people and those experiencing poverty.

As a grassroots organization primarily made up of volunteers, we're grateful to be able to work with more than 50 great allies and partners, including Amsterdam NGO Here To Support and the Student Union ASVA, who kindly provided fact checking for this report. We remain thankful for each and every one of our donors, who ensure we can directly help others through our self-serve Menstruation Stations.

Warmest of thank yous to Emily Dickinson and the hard-working team at Opinium, who once again partnered pro bono with NF to build upon our 2022 research collaboration. Many thanks to the visionary team at Perspective for collecting the qualitative data and stories, and whose report we can't wait to share later this year. Another shout out to Maria Azedo, who created our powerful illustrations, and is a thoughtful, experienced, conceptual thinker we are very lucky to work alongside. Huge thanks to Marleen Geerts for helping us all see what can be done with a little concept and a lot of creativity.

Heartfelt appreciation to our loved ones. Applying ideals to actions takes energy and time. Sometimes that equates to a subtraction of moments with you. Thank you for your support, both moral and practical; you too are part of the village.

And finally, a great big thanks to all of the Neighborhood Feminists. Together we're able to help people in need today, even as we push for more dignity and better basic living conditions tomorrow.

'CODE RED:

A PRACTICAL RESOURCE FOR TACKLING PERIOD POVERTY

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is a September 2024 Neighborhood Feminists advocacy and research report.

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References

- Abbasi, Kamran. 2023. "Under-representation of Women in Research: A Status Quo That Is a Scandal." *BMJ*, September, p2091.
<https://doi.org/10.1136/bmj.p2091>.
- Amsterdam & Regionaal Voedselbanken Distributiecentrum. 2023. *Jaarverslag 2023*. Report.
<https://amsterdam.voedselbank.org/wp-content/uploads/2024/04/jaarverslag-VBA-2023-v1.4.pdf>.
- "Armoede Uitgelegd: Armoedestress Leidt Tot Onnodig Ziek Zijn En Jong Sterven." 2024.
MedischOndernemen. August 19, 2024.
<https://www.medischondernemen.nl/blog/armoede-uitgelegd-armoedestress-leidt-tot-onnodig-ziek-zijn-en-jong-sterven>.
- Association Règles Élémentaires. 2024. "Tout Ce Qu'il Faut Savoir Sur Les Règles en 2024 | Règles Élémentaires." *www.regleselementaires.com*. January 8, 2024.
<https://www.regleselementaires.com/actualites/2024-01-08-tout-ce-quil-faut-savoir-sur-les-r%C3%A8gles-en-2024/>.
- Association Régles Élémentaires and opinionway. 2023. "Les Protections Périodiques, un Luxe pour 4 Millions de Femmes en France. Enquête Exclusive sur la Précarité Menstruelle." <https://doccollectes.blob.core.windows.net/statics/enqu%C3%AAt%20pr%C3%A9carit%C3%A9%20menstruelle%202023.pdf>.
- Babbar, Karen, Jennifer Martin, Josephine Ruiz, Ateeb Ahmad Parray, and Marni Sommer. 2021. "Menstrual health is a public health and human rights issue." *The Lancet* 7 (1).
[https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(21\)00212-7/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(21)00212-7/fulltext).
- Becker, Jill B., Brian J. Prendergast, and Jing W. Liang. 2016. "Female Rats Are Not More Variable Than Male Rats: A Meta-analysis of Neuroscience Studies." *Biology of Sex Differences* 7 (1). BMC. July 26, 2016.
<https://doi.org/10.1186/s13293-016-0087-5>.
- Billon, Amaury, Marie-Paule Gustin, Anne Tristan, Thomas Bénet, Julien Berthiller, Claude Alexandre Gustave, Philippe Vanhems, and Gerard Lina. 2020. "Association of Characteristics of Tampon Use With Menstrual Toxic Shock Syndrome in France." *EClinicalMedicine* 21 (April): 100308.
<https://doi.org/10.1016/j.eclinm.2020.100308>.
- BNNVARA. 2024. "Kabinet Schrappt Bed-Bad-Broodregeling: Wat Zijn De Gevolgen?," July 15, 2024.
<https://www.bnnvara.nl/artikelen/kabinet-schrappt-bed-bad-broodregeling-wat-zijn-de-gevolgen>.
- Boogaerdt, Boje. 2024. "De Aandeelhouders Gaan Voor." *De Groene Amsterdammer*. August 7, 2024.
https://www.groene.nl/artikel/de-aandeelhouders-gaan-voor?utm_source=De+Groene+Amsterdammer&utm_campaign=536fe11364-Dagelijks-2024-08-08&utm_medium=email&utm_term=0_853cea572a-536fe11364-%5BLIST_EMAIL_ID%5D.

- Brandt, Lasse, Shuyan Liu, Christine Heim, and Andreas Heinz. 2022. "The Effects of Social Isolation Stress and Discrimination on Mental Health." *Translational Psychiatry* 12 (1). <https://doi.org/10.1038/s41398-022-02178-4>.
- Brisson, Daniel, Sarah McCune, Jennifer H. Wilson, Stephanie Rachel Speer, Julie S. McCrae, and Katherine Hoops Calhoun. 2020. "A Systematic Review of the Association Between Poverty and Biomarkers of Toxic Stress." *Journal of Evidence-Based Social Work* 17 (6): 696–713. <https://doi.org/10.1080/26408066.2020.1769786>.
- Centraal Bureau voor de Statistiek. 2023. "Armoede en Sociale Uitsluiting 2023." Report. CBS. <https://www.cbs.nl/-/media/pdf/2023/51/armoede-en-sociale-uitsluiting-2023.pdf>.
- Centraal Bureau voor de Statistiek. 2024. "CBS Statline: Huishoudens; Kindertal, Leeftijdsklasse Kind, Regio." Report. CBS. January 1, 2024. <https://opendata.cbs.nl/statline/#/CBS/nl/dataset/71487NED/table>.
- Centraal Bureau voor de Statistiek. 2023. "CBS Statline: Laag en Langdurig Laag Inkomen van Personen CV; Huishoudenskenmerken." Report. CBS. November 8, 2023. <https://opendata.cbs.nl/statline/#/CBS/nl/dataset/83842NED/table?ts=1609227376878>.
- Centraal Bureau voor de Statistiek. 2024. "Dakloze Mensen 18 tot 65 Jaar, Persoonskenmerken." Report. CBS. March 26, 2024. <https://www.cbs.nl/nl-nl/cijfers/detail/85616ned?q=daklozen>.
- Centraal Bureau voor de Statistiek. 2023. "Laagste Armoederisico in 45 Jaar door Energiatoeslag." Press release. CBS. November 8, 2023. <https://www.cbs.nl/nl-nl/nieuws/2023/45/laagste-armoederisico-in-45-jaar-door-energiatoeslag>.
- Centraal Bureau voor de Statistiek. 2023. "Ontwikkelingen ZZZP." Report. CBS. <https://www.cbs.nl/nl-nl/dossier/dossier-zzp/ontwikkelingen-zzp>.
- Centraal Bureau voor de Statistiek. 2019. "Van Werkenden Loopt Zzp'Er Meeste Risico op Armoede." Update. March 4, 2019. <https://www.cbs.nl/nl-nl/nieuws/2019/10/van-werkenden-loopt-zzp-er-meeste-risico-op-armoede>.
- Centraal Planbureau. 2022. "Toelichting Armoederaming." Update. CPB. <https://www.cpb.nl/sites/default/files/omnidownload/CPB-Notitie-toelichting-armoedegrens-23aug2022.pdf>.
- Centraal Planbureau. 2023. "Energieprijzen." Infographic. CPB. <https://www.cpb.nl/sites/default/files/omnidownload/CPB-Infographic-Centraal-Economisch-Plan-2023.pdf>.
- Centraal Orgaan opvang Asielzoekers. 2024. "Personen in de Opvang van het COA." COA. July 4, 2024. <https://www.coa.nl/lijs/personen-de-opvang-van-het-coa>.
- Cook, Alexandra. 2024. "Diagnosing Endometriosis - What's the Delay?" March 2, 2024. <https://www.linkedin.com/pulse/diagnosing-endometriosis-whats-delay-alexandra-sasha-cook-liv5e/?trackingId=NlhfOKoIEVljSgux5AXVHg%3D%3D>.

- Cook, Alexandra, and Robin Van Den Hoek. 2023. "Period Pain Presenteeism: Investigating Associations of Working While Experiencing Dysmenorrhea." *Journal of Psychosomatic Obstetrics & Gynecology* 44 (1).
<https://doi.org/10.1080/0167482X.2023.2236294>.
- "De Overgang - Vrouwen in de Overgang." 2023. *Vrouwen in de Overgang*. June 28, 2023.
<https://www.vrouwenindeovergang.nl/de-overgang/>.
- Dutch NGO Coalition on Children's Rights and Utrecht University, Strategic Theme 'Dynamics of Youth.' 2023. "Children's Rights: Political Will or Won't? | Country Profile | Netherlands." Country Profile.
<https://eurochild.org/uploads/2024/04/Netherlands-Childrens-Rights-Political-will-or-wont.pdf>.
- EenVandaag. 2024. "Amsterdam gaat door met 'Bed, Bad, Brood, Begeleiding' voor Uitgeprocedeerde Asielzoekers, ook al Wil Kabinet Ermee Stoppen." *EenVandaag*. July 16, 2024.
<https://eenvandaag.avrotros.nl/item/amsterdam-gaat-door-met-bed-bad-brood-begeleiding-voor-uitgeprocedeerde-asielzoekers-ook-al-wil-kabinet-ermee-stoppen-1/>.
- Eyring, J. B., AliceAnn Crandall, and Brianna M. Magnusson. 2023. "A Modified Menstrual Attitudes Scale: Heteronormative Attitudes, Sexism, and Attitudes Toward Menstruation in Male and Female Adults." *Archives of Sexual Behavior* 52 (4): 1535–47.
<https://doi.org/10.1007/s10508-023-02565-y>.
- Fiske, Susan T. 2015. "Intergroup Biases: A Focus on Stereotype Content." *Current Opinion in Behavioral Sciences* 3 (June): 45–50.
<https://doi.org/10.1016/j.cobeha.2015.01.010>.
- Food and Drug Administration & USGAO. 2001. "Drug Safety: Most Drugs Withdrawn in Recent Years Had Greater Health Risks for Women." U.S. Government & Accountability Office.
<https://www.gao.gov/products/gao-01-286r>.
- French government and French Ministry of Public Health. 2023. "*Remboursement des Protections Périodiques Réutilisables pour les Moins de 25 Ans*" Press release. Info.Gouv.FR. March 7, 2023.
<https://www.info.gouv.fr/actualite/remboursement-des-protections-periodiques-reutilisables-pour-les-moins-de-25-ans#:~:text=En%20compl%C3%A9ment%2C%20le%20Gouvernement%20aidera,pour%20les%20femmes%20en%20pr%C3%A9carit%C3%A9>.
- Gemeente Amsterdam. 2023. "Armoedemonitor 2022 | Website Onderzoek en Statistiek."
<https://onderzoek.amsterdam.nl/publicatie/armoedemonitor-2022>.
- Gemeente Amsterdam. 2023b. "Schuldenmonitor 2023 | Website Onderzoek En Statistiek."
<https://onderzoek.amsterdam.nl/publicatie/schuldenmonitor-2023>.
- "Global Gender Gap Report 2024." 2024. *WEForum.Org*. World Economic Forum.
https://www3.weforum.org/docs/WEF_GGGR_2024.pdf.

- Gool, Joanne. 2019. “Geertes Strijd voor Openbare Toiletten is Nog Niet Gestreden.” *Het Parool*. February 8, 2019.
<https://www.parool.nl/amsterdam/geertes-strijd-voor-openbare-toiletten-is-nog-niet-gestreden~bdc81b51/>.
- Gouvernet, Brice, F. Sebbe, P. Chapillon, A. Rezrazi, and J. Brisson. 2022. “Period Poverty and Mental Health in Times of Covid-19 in France.” *Health Care for Women International* 44 (5): 657–69.
<https://doi.org/10.1080/07399332.2022.2070625>.
- Government of Catalonia. 2023. “The Government Approves a Pioneering Menstrual and Climacteric Equity Plan That Calls for Free Access to Reusable Menstrual Products for All Women.” Press release. Catalangovernment.EU. March 9, 2023.
<https://catalangovernment.eu/catalangovernment/news/488927/the-government-approves-a-pioneering-mens>.
- Griffin, Niamh. 2022. “Menstrual Cups to Be Cheaper in January Under New VAT Rules.” *Irish Examiner*. September 28, 2022.
<https://www.irishexaminer.com/news/arid-40971044.html>.
- Groen, Annette, and Nannette Houtsma. 2022. “Rapport Nibud Studentenonderzoek (2021).” *Nationaal Instituut voor Budgetvoorlichting*.
<https://www.nibud.nl/onderzoeksrapporten/nibud-studentenonderzoek-2021/>.
- Gupta, Pratima. 2022. “Heavy Periods.” British Menopause Society.
<https://www.womens-health-concern.org/wp-content/uploads/2022/12/08-WHC-FACTSHEET-HeavyPeriods-NOV2022-B.pdf>.
- Hantsoo, Liisa, Shivani Rangaswamy, Kristin Voegtline, Rodion Salimgaraev, Liudmila Zhaunova, and Jennifer L. Payne. 2022. “Premenstrual Symptoms Across the Lifespan in an International Sample: Data From a Mobile Application.” *Archives of Women's Mental Health* 25 (5): 903–10.
<https://doi.org/10.1007/s00737-022-01261-5>.
- Haushofer, Johannes, and Ernst Fehr. 2014. “On The Psychology of Poverty.” *Science* 344 (6186): 862–67.
<https://doi.org/10.1126/science.1232491>.
- Hennegan, Julie, Inga T. Winkler, Chris Bobel et al. 2021. “Menstrual Health: A Definition for Policy, Practice, and Research by the Global Menstrual Collective Terminology Action Group.” *Sexual and Reproductive Health Matters* 29 (1): 31–38.
<https://doi.org/10.1080/26410397.2021.1911618>.
- Hilbert, Leon P., Marret K. Noordewier, and Wilco W. Van Dijk. 2022a. “The Prospective Associations Between Financial Scarcity and Financial Avoidance.” *Journal of Economic Psychology* 88 (January): 102459.
<https://doi.org/10.1016/j.joep.2021.102459>.

- Holland, Kathryn J., Kristin E. Silver, Allison E. Cipriano, and Rebecca L. Brock. 2020. "Internalized Body Stigma as a Barrier to Accessing Preventative Healthcare for Young Women." *Body Image* 35 (December): 217–24.
<https://doi.org/10.1016/j.bodyim.2020.09.005>.
- Inrichtingen, Dienst Justitiële. 2024. "Vademecum 2024 Verstrekkingspakket Medische Zorg." Publication | dji.nl. January 2, 2024.
<https://www.dji.nl/documenten/publicaties/2024/01/02/vademecum-2024-dji>.
- Jaafar, Hafiz, Suraya Yasmin Ismail, and Amirah Azzeri. 2023. "Period Poverty: A Neglected Public Health Issue." *Korean Journal of Family Medicine* 44 (4): 183–88.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10372806/>.
- Kansfonds. 2023. "Armoede En Schulden – Kansfonds." October 23, 2023.
<https://www.kansfonds.nl/themas/armoede-en-schulden/>.
- Kamphuis, Lotte and 3Vraag. 2021. "Menstruatie Vragenlijst – EenVandaag" https://eenvandaag.assets.avrotros.nl/user_upload/PDF/2021_3Vraag_Menstruatie.pdf.
- Kansfonds and Hogeschool Utrecht. 2023. "Een Onzichtbare Groep Dak- En Thuisloze Mensen Zichtbaar Maken." *Movisie*. December 4, 2023.
<https://www.movisie.nl/artikel/onzichtbare-groep-dak-thuisloze-mensen-zichtbaar-maken>.
- Kassam, Ashifa. 2024. "A Year on, Spain's 'Historic' Menstrual Leave Law Has Hardly Been Used. Why?" *The Guardian*, June 4, 2024.
<https://www.theguardian.com/world/article/2024/jun/04/spain-historic-menstrual-leave-law-hardly-used-period-pain-endometriosis>.
- Kierks, Martijn. 2023. "Armoederisico op Laagste Niveau in 45 Jaar Tijd." *Het Parool*, November 8, 2023.
<https://www.parool.nl/amsterdam/armoederisico-op-laagste-niveau-in-45-jaar-tijd~b5ad53b7/>.
- "Kindertoeslagaffaire.nl." 2024. *Stichting Herstel Ongekend Onrecht*. April 28, 2024.
<https://kindertoeslagaffaire.nl/>.
- Koeleman, Esmée. 2023. "Vrouw en Dakloos? Dan Tel Je Niet Mee." *OneWorld*. April 3, 2023.
<https://www.oneworld.nl/mensenrechten/niemand-dakloos-in-2030-we-weten-niet-eens-hoeveel-mensen-nu-dakloos-zijn/>.
- Klingert, Liv. 2022. "Free Period Products for Female Prisoners in Belgium." *Brussels Times*, May 17, 2022.
<https://www.brusselstimes.com/225397/free-period-products-for-female-prisoners-in-belgium>.
- Knifton, Lee, and Greig Inglis. 2020. "Poverty and Mental Health: Policy, Practice and Research Implications." *BJPsych Bulletin* 44 (5): 193–96.
<https://doi.org/10.1192/bjpb.2020.78>.
- McCole, Devon, and Samar Jamal. 2023. "Just How Effective Is Scotland's Free Period Product Policy?" *Greater Govanhill*, August 11, 2023.
<https://www.greatergovanhill.com/latest/just-how-effective-is-scotlands-free-period-product-policy>.

- Metz, Christine N. 2024. "To Better Understand Women's Health, We Need to Destigmatize Menstrual Blood." *Scientific American*, February 20, 2024.
<https://www.scientificamerican.com/article/to-better-understand-women-s-health-we-need-to-destigmatize-menstrual-blood/>.
- Ministerie van Algemene Zaken. 2023. "Nationaal Actieplan Dakloosheid Eerst Een Thuis." Report | Rijksoverheid.nl. October 26, 2023.
<https://www.rijksoverheid.nl/documenten/rapporten/2022/11/30/nationaal-actieplan-dakloosheid-eerst-een-thuis>.
- Ministerie van Algemene Zaken and Ministerie van Volksgezondheid, Welzijn en Sport (VWS). 2024. "Campagne Hey, Het Is Oké." Rijksoverheid.nl. June 1, 2024.
<https://www.campagnetoolkits.nl/hey>.
- Ministerie van Justitie en Veiligheid. 2024. "Hoe Gender(on)Gelijk Is Nederland? De Hardnekkige Loonkloof." Press release. College Voor De Rechten Van De Mens. March 6, 2024.
<https://www.mensenrechten.nl/actueel/nieuws/2023/09/08/hoe-genderongelijk-is-nederland-de-hardnekkige-loonkloof>.
- Ministerie van Justitie en Veiligheid. 2023. "Nederland Doet Te Weinig Voor Mensen in Armoede, Mensen Met Een Slechte Gezondheid En Mensen Die Geen Baan Kunnen Krijgen." News update. College Voor De Rechten Van De Mens. August 7, 2023.
<https://www.mensenrechten.nl/actueel/nieuws/2023/08/07/nederland-doet-te-weinig-voor-mensen-in-armoede-mensen-met-een-slechte-gezondheid-en-mensen-die-geen-baan-kunnen-krijgen>.
- Ministerie van Sociale Zaken en Werkgelegenheid. 2023. "Kabinet Trekt Extra Geld Uit voor Voedselhulp en Bestrijding Menstruatiermoede." Press release. Rijksoverheid.nl. July 31, 2023.
<https://www.rijksoverheid.nl/actueel/nieuws/2023/03/30/kabinet-trekt-extra-geld-uit-voor-voedselhulp-en-bestrijding-menstruatiermoede>.
- Ministerie van Volksgezondheid, Welzijn en Sport. 2024. "Aankondiging Nieuwe Methode om Armoede Te Meten door CBS, SCP en Nibud." Press release. Sociaal en Cultureel Planbureau. July 17, 2024.
<https://www.scp.nl/actueel/nieuws/2024/07/18/aankondiging-nieuwe-methode-om-armoede-te-meten-door-cbs-scp-en-nibud>.
- Ministerie van Volksgezondheid, Welzijn en Sport. 2021. "Gezondheid Breed Op De Agenda." Report. Rijksoverheid.nl. December 28, 2021.
<https://www.rijksoverheid.nl/ministeries/ministerie-van-volksgezondheid-welzijn-en-sport/documenten/rapporten/2020/02/29/gezondheid-breed-op-de-agenda>.
- Ministerie van Volksgezondheid, Welzijn en Sport. 2022. "Kennissenotitie Armoede Ramingen September 2022." Report. Sociaal en Cultureel Planbureau. November 17, 2022.
<https://www.scp.nl/publicaties/publicaties/2022/09/20/kennisnotitie-armoede-ramingen-september-2022>.
- Nationale Ombudsman. 2023. "Verhoor Ombudsman Parlementaire Enquêtecommissie 'Een Klein Foutje Maakt Nog Geen Fraudeur.'" nationaleombudsman.nl, October 11, 2023.
<https://www.nationaleombudsman.nl/professionals/nieuws/interview/2023/een-klein-foutje-maakt-nog-geen-fraudeur>.



- Naz, Marzieh Saei Ghare, Maryam Farahmand, Sareh Dashti, and Fahimeh Ramezani Tehrani. 2022. "Factors Affecting Menstrual Cycle Developmental Trajectory in Adolescents: A Narrative Review." *International Journal of Endocrinology and Metabolism* 20 (1). March 2, 2022.
<https://doi.org/10.5812/ijem.120438>.
- Neighborhood Feminists. 2022. "Amsterdam Menstruates: The First Quantitative Research on Period Poverty in Amsterdam." October 24, 2022.
<https://www.neighborhoodfeminists.com/amsterdam-menstruates-quantitative-research-on-period-poverty-in-amsterdam/>.
- Neighborhood Feminists and Opinium. 2022. "Amsterdam Menstruates." Report. *Amsterdam Menstruates*.
<https://www.neighborhoodfeminists.com/wp-content/uploads/2022/10/20221021-Amsterdam-Menstruates-2022-Research-Report-FINAL.pdf>.
- Neighborhood Feminists. 2022. "Amsterdam Comes One Step Closer to Equality and Improved Public Health." November 11, 2022.
<https://www.neighborhoodfeminists.com/amsterdam-comes-one-step-closer-to-equality-and-improved-public-health/>.
- Neighborhood Feminists, 2024. "Change is in the air: some progress in policy and practice beyond Europe" September 2, 2024.
<https://www.neighborhoodfeminists.com/change-is-in-the-air-2/>.
- Neighborhood Feminists. 2022. "Period Poverty in Amsterdam - The 2022 Amsterdam Menstruates Study: Overview & Recommendations." October 24, 2022.
<https://www.neighborhoodfeminists.com/wp-content/uploads/2022/10/EN-2-pager-AMS-menstruates.pdf>.
- Noordhoff, Floris J. and Amsterdam School for Social Science Research (ASSR). 2008. "Persistent Poverty in the Netherlands." Vossiuspers - University of Amsterdam Press.
https://pure.uva.nl/ws/files/1110399/143785_thesis.pdf.
- NPO Radio 1. 2024. "Doel Halveren Kinderarmoede in 2025 Niet Meer Haalbaar: 'Het Is Roeien Tegen De Stroom In,'" April 11, 2024.
<https://www.nporadio1.nl/nieuws/economie/16ff38e5-214e-403c-9bf4-64d6d2379efb/kinderarmoede-niet-gehalveerd-in-2025-roeien-tegen-stroom-in>.
- O'Connor, Roisin. 2016. "Menstruation Study Finds Over 5,000 Slang Terms for 'Period' | The Independent." *The Independent*, March 1, 2016.
<https://www.independent.co.uk/life-style/health-and-families/menstruation-study-finds-over-5-000-slang-terms-for-period-a6905021.html>.
- "Ongedocumenteerden: Informatie en Achtergronden." Gemeente Amsterdam. Accessed August 22, 2024.
<https://www.amsterdam.nl/zorg-ondersteuning/ondersteuning/vluchtelingen/ongedocumenteerden/#h76330841-28b2-436e-bb06-e8a28e403eba>.

- Pérez, Lucy, Shyam Bishen, McKinsey Health Institute, and World Economic Forum. 2024. "Closing the Women's Health Gap: A \$1 Trillion Opportunity to Improve Lives and Economies." World Economic Forum.
https://www3.weforum.org/docs/WEF_Closing_the_Women%E2%80%99s_Health_Gap_2024.pdf.
- "Period Positive Places Award." 2024. Period Positive. June 14, 2024.
<https://periodpositive.com/period-positive-places-an-award-for-organisations-and-institutions/>.
- Plan International *Deutschland: Gesundheit des Plan-Jugendbeirats*. 2021. "Period Poverty – Ein Globales Problem." Plan International Deutschland e.V. May 28, 2021.
<https://www.plan.de/news/detail/period-poverty-ein-globales-problem.html?sc=IDQ25100>.
- Plan International. 2019. "Bloedserieus: Schaamte Bij Menstruatie." Plan International NL.
<https://www.planinternational.nl/uploaded/2019/11/Plan-International-Bloedserieus-onderzoek-over-menstruatie-armoede-en-schaamte.pdf?x21811>.
- "Poverty Stigma: A Glue That Holds Poverty in Place." 2024. Joseph Rowntree Foundation. May 8, 2024.
<https://www.jrf.org.uk/stigma-power-and-poverty/poverty-stigma-a-glue-that-holds-poverty-in-place>.
- "Poverty, Suffering in Silence." 2021. News release. Maastricht University. July 19, 2021.
<https://www.maastrichtuniversity.nl/news/poverty-suffering-silence>.
- Quint, Chella. 2020. "The Period Positive Pledge." Period Positive. June 14, 2020.
<https://periodpositive.com/the-period-positive-pledge-2/>.
- Rabin, Roni Caryn. 2014. "Health Researchers Will Get \$10.1 Million to Counter Gender Bias in Studies." *New York Times*, September 23, 2014.
<https://www.nytimes.com/2014/09/23/health/23gender.html>.
- "Refugee Help – Weekly Allowance for Asylum Seekers." 2024. Refugee Help / *Vluchtelingenwerk*. July 18, 2024.
<https://www.refugeehelp.nl/en/asylum-seeker/article/100288-living-allowance-and-food-money-for-w-hen-you-have-sought-asylum-in-the-netherlands>.
- "Rode Kruis Helpt Armoedefonds Tegen Menstruatiesarmoede – Rode Kruis Gooi En Utrecht." 2022. *Rode Kruis Gooi En Utrecht*. November 9, 2021.
<https://www.rodekruis.nl/gooi-en-utrecht/nieuwsbericht/rode-kruis-helpt-armoedefonds-tegen-menstruatiesarmoede/>.
- Sansone, Kurt. 2023. "Budget Allocates €500,000 for Distribution of Free Menstrual Products in Schools." *Malta Today*, October 31, 2023.
https://www.maltatoday.com.mt/news/budget-2024/125793/budget_allocates_500000_for_distribution_of_free_menstrual_products_in_schools.
- Salvation Army/*Leger des Heils*. 2022. "*Leger des Heils Ziet Grote Stijging Dakloze Jongeren*." *Leger des Heils/Salvation Army*. November 28, 2022.
<https://www.legerdesheils.nl/artikel/leger-des-heils-ziet-grote-stijging-dakloze-jongeren>.

- Schoep, Mark E, Eddy M M Adang, Jacques W M Maas, Bianca De Bie, Johanna W M Aarts, and Theodoor E Nieboer. 2019. "Productivity Loss Due to Menstruation-related Symptoms: A Nationwide Cross-sectional Survey Among 32 748 Women." *BMJ Open* 9 (6): e026186.
<https://doi.org/10.1136/bmjopen-2018-026186>.
- Shearston, Jenni A., Kristen Upson, Milo Gordon, Vivian Do, Olgica Balac, Khue Nguyen, Beizhan Yan, Marianthi-Anna Kioumourtzoglou, and Kathrin Schilling. 2024. "Tampons as a Source of Exposure to Metal(Loid)S." *Environment International* 190 (August): 108849.
<https://doi.org/10.1016/j.envint.2024.108849>.
- SEO Economisch Onderzoek. 2023. "Kansenongelijkheid in Nederland" SEO Economisch Onderzoek.
<https://www.seo.nl/publicaties/eindrapportage-kansenongelijkheid-in-nederland/>.
- Sharfin, Sami. 2024. "New Mexico Public Schools to Provide Free Period Products." Aunt Flow. August 6, 2024.
<https://goauntflow.com/blog/new-mexico-public-schools-to-provide-free-period-products/>.
- 'S Jongers, Tim. 2024. *Armoede Uitgelegd Aan Mensen Met Geld. De Correspondent*.
<https://kiosk.decorrespondent.nl/products/armoede-uitgelegd-aan-mensen-met-geld-tim-s-jongers>.
- Sociaal en Cultureel Planbureau. 2024. "Aankondiging Nieuwe Methode Om Armoede Te Meten door CBS, SCP en Nibud." News release. SCP. July 17, 2024.
<https://www.scp.nl/actueel/nieuws/2024/07/18/aankondiging-nieuwe-methode-om-armoede-te-meten-door-cbs-scp-en-nibud>.
- Sociaal en Cultureel Planbureau, 2019. B. van der Hulst & S. Hoff, *Armoede in kaart*. SCP. 3 September, 2019
<https://digitaal.scp.nl/armoedeinkaart2019/waar-wonen-de-armen-in-nederland/>.
- Sociaal en Cultureel Planbureau. 2023. "Eigentijdse Ongelijkheid." Report. SCP.
<https://www.scp.nl/publicaties/publicaties/2023/03/07/eigentijdse-ongelijkheid>.
- Sociaal en Cultureel Planbureau. 2023. "Op Weg Naar Een Nieuwe Armoedegrens." Report. SCP. July 3, 2023.
<https://www.scp.nl/publicaties/publicaties/2023/06/30/op-weg-naar-een-nieuwe-armoedegrens>.
- Stichting Armoedefonds. 2023. "De Impact van Voortdurende Armoede op Hulporganisaties in Nederland." Report.
<https://www.armoedefonds.nl/wp-content/uploads/2024/01/Rapport-Armoedefonds-december-2023-1.pdf>.
- Stichting Single Super Moms. 2023. "Feiten en Cijfers: Alleenstaand Moederschap." Single Super Moms. 2023.
<https://singlesupermom.nl/feiten-en-cijfers-alleenstaand-moederschap-in-nederland/>.
- "Stichting – Voices for Women." 2022.
<https://voicesforwomen.nl/stichting/>.

- “Stress Effects on the Body.” 2023. American Psychological Association. March 8, 2023.
<https://www.apa.org/topics/stress/body>.
- Taghiabadi, Mina, Arman Arab, Nahid Rafie, and Gholamreza Askari. 2020. “Beneficial Role of Calcium in Premenstrual Syndrome: A Systematic Review of Current Literature.” *International Journal of Preventive Medicine* 11 (1): 156.
https://doi.org/10.4103/ijpvm.ijpvm_243_19.
- The Guardian. 2024. “Catalan Pharmacies Hand Out Free Reusable Period Products.” *The Guardian*, March 4, 2024.
<https://www.theguardian.com/world/2024/mar/04/catalan-pharmacies-hand-out-free-reusable-period-products-poverty-spain>.
- The Portugal News. 2024. “Free Menstrual Hygiene Products,” May 24, 2024.
<https://www.theportugalnews.com/news/2024-05-24/free-menstrual-hygiene-products/89167>.
- Van Den Muijsenbergh, Maria, Marieke Torensma, Nathalia Skowronek, Tesseltje De Lange, and Karien Stronks. 2022. “Livelihood Insecurity Among Undocumented Migrants – Pandemic Often Led to Loss of Work and Shelter.” Radboudumc.NL. April 21, 2022.
<https://www.radboudumc.nl/en/news-items/2022/corona-caused-livelihood-insecurity-among-undocumented-migrants>.
- Van der Heijden, Peter, Maarten Cruyff, Godfried Engbersen, and Ger van Gils. “*Schattingen Onrechtmatig in Nederland Verblijvende Vreemdelingen 2017–2018*.” *Wetenschappelijk Onderzoek- en Documentatiecentrum*. 2020.
<https://repository.wodc.nl/handle/20.500.12832/3010>.
- Van Zoonen R, Vlasblom E, Van Dommelen P, Lanting C, Beltman M. *JGZ-Richtlijn Lengtegroei*. Utrecht: *Nederlands Centrum Jeugdgezondheid*, 2019.
<https://www.jgzrichtlijnen.nl/alle-richtlijnen/richtlijn/?richtlijn=48&rlpag=2784/>.
- Vermeer, Max. 2022. “*Nibud: Betalingsproblemen Stapelen Zich Op – Nibud*.” Nibud. November 12, 2022.
<https://www.nibud.nl/nieuws/nibud-betalingsproblemen-stapelen-zich-op/>.
- Vermeij, Lotte, Lex Thijssen, Daan Beekers, and Ralf Maslowski. 2024. “*De Leefwerelden Van Arm En Rijk – Sociaal en Cultureel Planbureau*.” SCP. 2024.
<https://www.scp.nl/binaries/scp/documenten/publicaties/2024/04/05/de-leefwerelden-van-arm-en-rijk/SCP+rapport+De+leefwerelden+van+arm+en+rijk+april+2024.pdf>.
- “*Voor16*.” n.d. FNV (website). Accessed August 21, 2024.
<https://www.fnv.nl/acties/voor-16>.
- Vrouwen in de Overgang*. 2023. “*Hoelang Duurt de Overgang?*” June 28, 2023.
<https://www.vrouwenindeovergang.nl/de-overgang/>.
- Walker, Lauren. 2022. “Free Menstrual Products Offered in 6 Brussels Schools.” *The Brussels Times*, October 12, 2022.
<https://www.brusselstimes.com/304493/free-menstrual-products-offered-in-six-brussels-schools-from-this-week>.

- Weel, Frederieke. 2024. "Na Jaren Protest Komen Er 'Eindelijk' Nieuwe Openbare Toiletten in de Stad." *AT5*, April 15, 2024.
<https://www.at5.nl/artikelen/226093/na-jaren-protest-komen-er-eindelijk-nieuwe-openbare-toiletten-in-de-stad>.
- Weigard, Alexander, Amy M. Loviska, and Adriene M. Beltz. 2021. "Little Evidence for Sex or Ovarian Hormone Influences on Affective Variability." *Scientific Reports* 11 (1).
<https://doi.org/10.1038/s41598-021-00143-7>.
- ZonMw. 2022. "Aandacht Voor Gender en Sekse in Onderzoek Blijft Nodig." September 15, 2022.
<https://www.zonmw.nl/nl/nieuws/aandacht-voor-gender-en-sekse-onderzoek-blijft-nodig>.