

OVERVIEW

PERIOD TALK SCRIPT	2
SECTION 1 - Introduction	2
SECTION 2 - Period Health Basics	2
Sec. 2.1 - The Period	2
Sec. 2.2 - The Products	4
Sec. 2.4 - Symptoms	6
Sec. 2.5 - Period Diseases	7
SECTION 3 - Period Self-Advocacy Basics	8
Sec. 3.1 - What does advocacy look like?	8
SECTION 4 - Period Activist Basics	10
Sec. 4.1 - Stigma & Taboo	10
Sec. 4.2 - Period Policy	11
Sec. 4.3 - Taking Action and FAQs	13
SECTION 5 - End of Presentation	14
Sec. 5.1 Engagement Exercise	14



PERIOD TALK SCRIPT

SECTION 1 - Introduction

Talking points:

- In this workshop we're going to tackle period health, activism and self-advocacy basics
- Feeling comfortable and capable speaking about periods and the menstrual equity movement
- First steps towards becoming the best menstrual equity activist you can be

In this part of the workshop, we are going to go over some basic information regarding periods. We are going to start off with some basic period health information, to make sure that we are all comfortable and capable of speaking about menstruation. We are also going to be diving into some period activism and self-advocacy basics. These are tools that are going to help us take the first steps in becoming the best menstrual equity activists we can be!

SECTION 2 - Period Health Basics

Sec. 2.1 - The Period

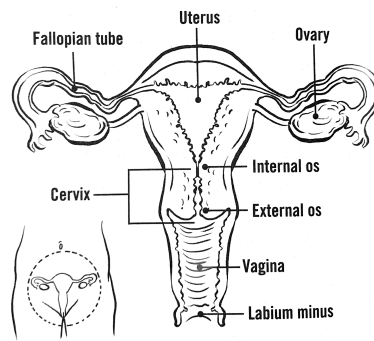
Talking points:

- Period: monthly bleeding; Menstrual Cycle: 28 days when your body prepares for pregnancy
- Gender-inclusivity: not all women menstruate, and not all who menstruate are women
- Menopause and menarche
- Endometrium grows in response to estrogen and progesterone and sheds if pregnancy does not happen = period
- Vulva vs vagina.
- Ovulation: egg is released from ovary and waits to be fertilized
- Menopause: no longer has a period

Many people do not even know what a period is. Should we blame them? Not necessarily. Due to the fact that menstruation is a taboo topic, not many people are taught what they are in their home, in their school, etc. Should everyone know what a period is? ABSOLUTELY. Let's make sure that all of us are well versed in all-things-periods.

So, **what is a period?** A period indicates the time of the month when blood and other fluids are excreted through the vagina. Typically, it is a sign that you are not pregnant. A menstrual cycle refers to the approximately 28 day process during which

the body prepares for pregnancy. The very first period is called the menarche (/mə'närkē/). Usually starts when a person is between 10 and 15 years old. Who menstruates? PERIOD believes that it is important to be intersectional and inclusive of all period experiences. Therefore, it is important to understand that it is not only women who menstruate. Some transgender men and people who identify as non-binary or genderqueer but who were assigned female at birth might still experience periods. Now, when does one stop getting their period? Around the age of 50, **menopause** occurs. A menstruator is considered to be in menopause when a full 12 months have passed without getting a period, marking the end of menstruation.



Show the diagram and point at the parts of the body you're talking about!

At the beginning of each cycle, **estrogen** and **progesterone** trigger the growth of the endometrium, which is the lining on the inside walls of the uterus. The endometrium is made out of tissue and blood, and is spongy enough to make the perfect landing place for a fertilized egg, which is released during ovulation.

Ovulation happens when a menstruator's ovaries release a mature egg about halfway through a menstrual cycle, which travels through the fallopian tube and waits to be fertilized by a sperm cell. It can sit in there between 12-24 hours! If pregnancy does not occur, the uterine lining sheds from the uterine wall and exits the body through the vaginal canal. This is what we call menstruation.

Now that we have looked at what the inside of the female body looks like, why don't we take a look at the outside! Research has shown that 50% of people worry about whether their vulva looks "normal", 20% of them don't know what it's supposed to look like, but 1 in every 7 has considered getting plastic surgery on it.² The vulva is the *external* part of the female genitals, and the vagina is the *internal* canal.

¹ Source: *Period Power* (2018) Nadya Okamoto

² Lunnette: <https://store.lunette.com/pages/anatomy-101>

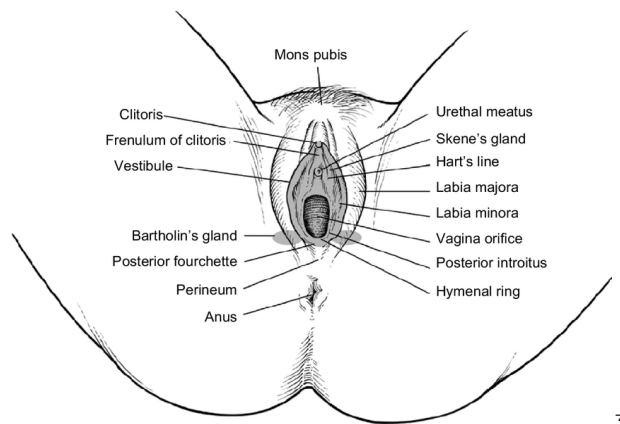
The vagina is an elastic, muscular canal with a soft, flexible lining. The vulva and labia form the entrance, and the cervix of the uterus protrudes into the vagina, forming the interior end.

The external female genitalia that surround the opening to the vagina collectively consist of the labia majora, the labia minora, clitoris, vestibule of the vagina, bulb of the vestibule, and the glands of Bartholin. All of these organs are located in front of the anus and below the mons pubis (the pad of fatty tissue in the top of the junction of the pelvic bones).

So, a common question is, how many *openings* do people with vaginas have?

Optional engagement exercise: Have people answer this question by raising their hand.

There are 3 openings! The urethra, the vaginal opening and the anus. Below your urethral opening, through which you urinate, is your vaginal opening, through which menstrual flow is excreted and through which babies can come out of, and the anus.



Show diagram and point at the parts of the body you're talking about!

Now, back to the inside of the body! How do you know if you're ovulating? It may be hard to tell, but sometimes your discharge may become slippery, like an egg white, right before ovulation.

One of the functions of the cervix is to allow flow of menstrual blood from the uterus into the vagina, and to direct sperms into the uterus during intercourse.

- During ovulation the cervix becomes soft, high, open and wet.
- After ovulation these signs reverse, and the cervix becomes firm, low, closed and dry.

³Source: Chronic Pain of the Vulva without Dermatologic Manifestations: Distinguishing Among a Spectrum of Clinical Disorders (2010), Miranda A Farage

Well, how do you even know what the cervix feels like? Well, it feels like a nose with one small nostril!

Sec. 2.2 - The Products

Talking points:

- Tampons
- Pads
- Menstrual Cups
- Cloth Pads
- Menstrual Underwear

What products can one use to absorb menstrual flow?⁴

- There is the **tampon**, which is designed to absorb the period blood by insertion in the vagina. You can insert it either with or without an applicator, and it is usually made out of rayon, cotton, or a mix of the two.
 - Leading tampons companies advise that tampons not be worn for more than 8 hours.
- The **pad** (menstrual pad, sanitary pad, sanitary napkin), which absorbs blood when being worn in the underwear. They sometimes have wings, which helps keeping it in place.
- The menstrual cup: It is a small bell-shaped reusable cup made out of flexible medical grade silicone. It is inserted into the vagina and collects menstrual flow. It seals against the vaginal wall just below the cervix. Every 4–12 hours (depending on the amount of flow), the cup is removed, emptied, rinsed, and reinserted.
- The cloth pad: Just like pads, they are worn in the underwear to absorb menstrual flow. The only difference is that these are reusable, reducing waste and are better for the environment.
- Menstrual underwear: This is another reusable product. This type of underwear is antimicrobial, moisture-wicking, absorbent and leak resistant and can be worn in conjunction with tampons or menstrual cups.

⁴ It would be great if you were able to get some samples of these products to literally show your attendees. Some people might have never even *seen* a tampon before!

Sec. 2.3 - What is Normal?

Talking points:

- “Normal” varies from person to person. Get to know your body.
- Amount: Between 30-72mL. Soaking 12+ tampons a period? Go see a healthcare provider
 - Menorrhagia, hypomenorrhea and amenorrhea
- Color: It is also normal for your period blood to vary anywhere from dark brown or black to vibrant red. The longer it has been sitting in your uterus the darker it is
- Consistency: Blood, lining and vaginal mucus make period blood feel like jelly, also normal for it to be clumpy due to clots.
- Smell: Normal for your period and discharge to have a distinct smell. Can be a little bit metallic. If the smell is “off” please go see a healthcare provider.

First things first, what is “normal” varies from person to person and can change over the course of your lifetime! Everyone's body is different, so therefore periods are different too. Once you've had your period for some time, you will start getting to know what is normal for you: the smell, the consistency, the length of your period, how much you bleed, etc. But how do you know if you are outside of what is considered healthy?

Now we are going to go through some guidelines of what menstruators experience on average during their cycles. This might be of help if you're feeling like, for example, the amount you bleed each month is outside of what is considered normal.

A period usually lasts between 4-7 days, and on average a menstruator will lose anywhere from 5-12 teaspoons (that is 30-72mL) of blood in one menstrual cycle. 80mL or more is considered a heavy flow. Now, how would someone know how much they are bleeding? Well, a regular size tampon or pad holds 5mL of blood, a super size tampon or maxi pad holds 10mL of blood, and a menstrual cup holds between 15-30mL of blood depending on the brand and size.

Why don't we go over some terms:

- **Menorrhagia:** When period flow gets heavy (+80mL). Losing this much blood can cause one to feel tired and short of breath - both of which are symptoms of anemia.
- **Amenorrhea:** It is the word to describe when menstruation is absent for someone who is of menstruating age - when they have missed 3 or more of their periods, or haven't gotten their first period before the age of 15. This is usually caused by pregnancy, breastfeeding, or menopause. Amenorrhea can also be caused by a problem with the reproductive organs or unregulated hormone levels, or disruption of normal hormone levels as a result of birth control.

Optional Engagement exercise: What is normal for you? What things do you experience that don't feel normal or that have caused you concern?

Consistency: It is not only blood that comes out during your period, there is also vaginal mucus and uterine lining that comes out with it. The discharge might be slippery and might feel a bit like jelly. It's also pretty normal for period blood to look a little clumpy, from small blood clots. It is normal to notice clots or clumps, especially on the heaviest days. If you are experiencing heavier periods than usual, or if your clots are bigger than usual, consider seeing a healthcare provider.

Color: It is also normal for your period blood to vary anywhere from dark brown or black to vibrant red. The brighter the period blood, the less time it has been in your uterus. When it is pink it just means one is spotting or has a very light period, when it is brown or black it means that it has been sitting in your uterus the longest, so you might see it at the beginning of your cycle (leftover from last month), or at the very end.

Smell: Again, it is totally normal for your vagina and period blood to have distinct odors. Some might describe the smell of period blood as a bit metallic, and it isn't just blood you are smelling; it's also mucus and tissue from the lining, as well as bacteria and other fluids. Just like the color gets darker, the smell is stronger when these fluids sit in your uterus for longer. You'll get familiar with your period, and the smell of your own period blood and vaginal discharge will become completely recognizable. If you suddenly start to notice that your period blood or vaginal discharge smells different, then you know to consider seeing a healthcare provider and ask questions.

Sec. 2.4 – Symptoms

Talking points:

- Again, what is “normal” varies from person to person.
- Cramps (dysmenorrhea): Caused by prostaglandins, which make the uterus muscles contract, triggering sharp pains. Mid-cycle ovulation pains.
- PMS: Two weeks prior to menstruation estrogen and progesterone orchestrate PMS: mood swings, pain, food cravings, etc. Affects 75% of menstruators.
- Other symptoms: acne, bloating, mood swings, fatigue, changes in appetite, changes in sex drive
 - Poops: normal to poop more during your period, this is caused by drop in progesterone levels.

There are many symptoms that come with having a period! As mentioned before, what is “normal” varies from person to person.

Painful menstruation (dysmenorrhea) AKA cramps:

Again, what is “normal” varies from person to person!

Dysmenorrhea or menstrual cramps can be caused by prostaglandins, which cause surrounding muscles to contract, triggering sharp pains in the lower abdomen and lower back areas. It is also normal to experience mid-cycle ovulation pain. This can be a sign that an egg has been released from the ovary. Other symptoms of a period can be: nausea, vomiting, sweating, dizziness, headaches and sometimes diarrhea. Up to 80% of menstruators struggle with varying levels of menstrual pain in their lifetime. At least 10% are temporarily physically disabled by extreme symptoms.

PMS: Premenstrual syndrome can include physical or emotional discomfort about a week before or during the first couple days of their periods. PMS symptoms, which affects 90%⁵ of menstruators on different levels, include mood swings, severe irritability, depression, and anxiety.

Due to the varying hormone levels throughout the menstrual cycle, there are many other symptoms that come with having a period! Some symptoms are: acne, bloating, mood swings, fatigue, changes in appetite, changes in sex drive, cramps, PMS, changes in bowel movement, etc. For example: Why do you poop more when you're on your period?

Bowel Movements: It is also totally normal to poop more during your period. Progesterone levels suddenly drop immediately after your period starts (after reaching maximum production right before). This sort of release can cause your bowels to open up a bit more.

⁵ <https://www.womenshealth.gov/menstrual-cycle/premenstrual-syndrome#13>

Sec. 2.5 – Period Diseases

Talking points:

- Endometriosis: endometrium grows outside of the uterus. Really painful and hard to diagnose
- Uterine Fibroids: very common non-cancerous tumors. By age 35, 30% of menstruators have them
- PCOS
- PMDD

Endometriosis:

Endometriosis is a condition in which the uterine lining grows outside the uterus. The endometrial tissue will act normally and will thicken, break down, and bleed as it usually does during menstruation. However, in this case there is nowhere for the blood to exit the body, so it gets trapped.

- Symptoms: Significant pain around the pelvis, and really painful periods where the pain is a deep, constant severe aching.
- Diagnosis: The only current way to diagnose endometriosis is with a laparoscopic inspection of the pelvis, which is an invasive surgery in which they look at the inside of your body with a camera by cutting through the belly.
- Current Treatment Options: Hormone therapy (such as birth control), surgery

Uterine Fibroids (AKA: leiomyomas or myomas): They are very common non-cancerous tumors that grow from the muscle layers of the uterus. Fibroids are not associated with any form of cancer. By the age of 35, about 30% of all menstruators have fibroids.

- **Symptoms:** Most people do not suffer any symptoms beside heavier flows and increased pelvic pressure and pain. However - depending on the size, location and number - fibroids can cause difficulty with urinating and bowel movements, and increased back and leg pains.

PCOS: People with PCOS may have infrequent or prolonged menstrual periods or excess male hormone (androgen) levels. The ovaries may develop numerous small collections of fluid (follicles) and fail to regularly release eggs.

- Symptoms: irregular periods, excess androgen, which may result in excess facial or body hair or severe acne, and polycystic ovaries
- Complications may include infertility and miscarriage as well as diabetes and sleep apnea

PMDD: Premenstrual dysphoric disorder is a severe form of PMS that includes a lot of pain (intense menstrual cramps and headaches). It can be difficult to handle every month, and can lead to poor mental health.

SECTION 3 - Period Self-Advocacy Basics

Sec. 3.1 - What does advocacy look like?

Talking points:

- Introduction. How do we turn everything we just learned into tools for self-advocacy?
- Self-advocacy
 - Break Down the Problem
 - Educating Yourself
 - Develop a System
- Peer Advocacy - Allies!

Let's dive into how learning about period health can help when you need to advocate for yourself and others. In the next section we will focus mostly on what it means to be a menstrual equity activist: taking action to influence social, political, and economic systems to bring about change for groups of people: this is called systems advocacy.

Before that, we are going to look more at the individual level. How does someone advocate for themselves and others in a healthcare provider's office? In school? etc. Reproductive and menstrual health are immensely under-researched—often, menstrual pain and reproductive illnesses (such as endometriosis) are not well understood. It's important to be an advocate for yourself and communicate pain levels to your healthcare provider⁶

Let's first go through WHAT self-advocacy and peer-advocacy means:

- **Self-Advocacy:** taking action to represent and advance your own interests
- **Peer-Advocacy:** taking action to represent the rights and interests of someone other than yourself

As an ally, ask yourself the following questions:

1. What are your interests and motivations in this peer advocacy relationship?
2. Do you feel comfortable undertaking this role with this person?
3. Are your interests and motivations the same as the person I am advocating for or with? When and how are they different?
4. Am I enabling and empowering the individual to be their own advocate?

Let's go through some tools that are useful when taking steps to advocate for yourself and others.

1. First things first, you need to be able to break down the problem (are your periods *really* painful, keeping you up at night?, does your teacher/boss

⁶ Hoffmann DE, Tarzian AJ. *The girl who cried pain: a bias against women in the treatment of pain.* J Law Med Ethics. 2001 Spring;29(1):13-27.

minimize your experience? , do you think you might have endometriosis?). Effective advocacy of any kind involves creating a **solid strategy or plan** and practicing **skills** that will help you feel confident in and comfortable in reaching your advocacy goals. When thinking about it, your issue might be very clear in your head, but verbalizing or synthesizing what is wrong is sometimes a lot more complicated than you think. Writing your feelings down really helps! These are some good questions to keep in mind:

- a. What is your goal? What is the desired outcome?
 - b. What does self-advocacy mean to you? How do you think it relates to your menstrual health?
 - c. What do you gain from advocating for yourself?
 - d. What do you think keeps you from advocating for yourself? Is it fear? Indifference? Lack of time or empowerment?
2. **Educating Yourself!** The best way to advocate for yourself and your peers is to be educated. This way you are regaining control. Loss of control is something that usually makes people feel less confident and out of touch with their own feelings and body. Well, how do you even begin this process? You first must listen to yourself. What is your body telling you? Once you are able to verbalize this begin doing research. Talking to others is much easier if you are able to describe your symptoms. Hopefully the rest of this workshop was also of great help! Stay organized and be coherent with yourself and others. Document everything: Journaling is super helpful too!
3. **Developing a system:** The process of developing a system can be very personal, and it can look different for everyone. Here are some tips: Trust your instincts and what your gut is telling you. Be assertive! This can be one of the hardest things to do, especially if you have been raised as a girl, since society expects women to be quiet and not raise their voices. Well, how do you describe your pain? Have you felt this pain before? Track the symptoms, feelings, all the research you do, etc. Asking your health care provider to tell you more about a certain disorder or just your symptoms. And finally, remember you are bringing this to light for a reason!

If you have been sitting here and have been thinking, well none of this really applies to me at all, I am not a menstruator! Well, this is where peer-advocacy comes into play. An ally will mostly engage in activism by standing with an individual or group in a marginalized community. In order to be a good ally, you need knowledgeable support. Non-menstruators can also advocate for menstrual equity! *[if applicable]* Just by having you here in this room and sitting through this workshop is a very important step for the menstrual movement. It does not matter if you menstruate or not. The fight for menstrual equity, just like any social justice movement needs involvement from **everyone**. Because social justice, human rights and gender equality affect everyone.

Optional Engagement exercise: What do YOU think it means to be an ally? What do you think their role should be?

SECTION 4 - Period Activist Basics

Sec. 4.1 - Stigma & Taboo

Talking points:

- Stigma/Taboo: Misogyny
- We have created a society in which menstruators are taught to feel less confident and dignified, and are too often considered less capable, simply because their bodies menstruate
- Relevant statistics about how stigma around periods impacts policies and funding in period/women's health

In many societies, the stigma around menstruation involves it being perceived as unclean or embarrassing. Even the mention of menstruation whether in public (in the media and advertising) or in private (among friends, in the household, or with non-menstruators) is considered unacceptable and worthy of shame.

Thinking that something like menstruation, a natural process that is inherently associated with the female body, should be considered dirty and worthy of shame shows how deep the stigma is in societies across the world. The taboo encourages isolation and silence around menstruation, which has formulated and strengthened a persistent stigma. **We have created a society in which menstruators are taught to feel less confident and dignified, and are too often considered less capable, simply because their bodies menstruate.** Let's change that!

After having looked through what the stigma around menstruation is, and how to better advocate for yourself and others, it is a good idea to take a look at the bigger picture, and see **how** exactly the stigma impacts policies and funding in period/women's health:

1. >50% of quantitative traits, such as bone density, are impacted by sex – yet scientific studies focused exclusively on males for decades⁷
2. There is significant underrepresentation of females in research that tries to create new therapies and medical procedures for example. 79% of studies published in the magazine *Pain* from 1996-2005 only investigated men, despite women being more likely to have many chronic diseases with pain.⁸

⁷ Karp et al. "Prevalence of sexual dimorphism in mammalian phenotypic traits." *Nature Communications*. 2017.

⁸ Mogil et al. "The case for the inclusion of female subjects in basic science studies of pain." *Pain*. 2005. 117: 1-5.

3. 2018 is the 25th anniversary of the National Institution of Health Revitalization Act of 1993, which directed the NIH to establish guidelines for the inclusion of women and minorities in clinical research⁹
4. Women represent 43% of clinical trial participants globally¹⁰

Sec. 4.2 - Period Policy

Talking points:

- Period Poverty: state of being unable to afford period products
- How it affects education: leading cause of absenteeism, increasing access to menstrual products, increases access to education
- Tampon Tax: 35 states still have a luxury tax on menstrual products. We need a *cultural shift* toward acknowledging that menstrual hygiene is a *right* and *not a privilege*.
- Climate Change and Sustainability: 12 billion pads and seven billion tampons end up in landfills yearly in the United States. Most sewage systems and general water treatment plants aren't made to filter out used tampons, so don't flush tampons!

Now, how do we change this? How do we advocate for changes in period policy? What IS period policy? Why do we need it? First, let's focus on period poverty: Period poverty is the state of being unable to afford period products (or necessary items to feel clean) while menstruating. The total cost of your period over your lifetime comes to \$18,171, taking into consideration that the average menstruator endures 456 total periods over 38 years, or roughly 6.25 years of their life¹¹. The \$18,171 include the costs of what is needed to cope with pain and hassle of menstruation - like heating pads, acne medication, period products, pain relievers, etc. Homeless, as well as low-income menstruators who are living in extreme poverty are forced to turn to unclean methods of maintaining menstrual hygiene, this puts their health at extreme risk.

How does lack of access to period products affect education? Lack of access to period products is the number one leading cause of absenteeism in the US. This is way more than the common cold! Therefore, increasing access to menstrual products, increases access to education. It is hard to stay engaged in school when all you can think about is the risk of bleeding through your pants and everyone seeing it when you stand up. Menstrual products should be free and accessible for everyone in all school bathrooms!

Fillingim et al. "Sex, gender, and pain: A review of clinical and experimental findings." *Journal of Pain*. 2009. 10(5): 447-485.

⁹ Mazure et al. "Twenty years and still counting: including women as participants and studying sex and gender in biomedical research." *BMC Women's Health*. 2015. 15_94.

¹⁰ FDA. "Global Participation in Clinical Trials Report." 2017.

¹¹ https://www.huffpost.com/entry/period-cost-lifetime_n_7258780

Tampon Tax: In the United States, 35 states still have a sales tax on menstrual products because they are considered *luxury* items. Meanwhile, products like Rogaine and Viagra are not. The shame and disgust around menstruation remain in place, and period products continue to be “inaccessible and unaffordable” for many people who menstruate.

California was one of the first states where a bill was introduced to slash taxes for menstrual products. Assemblywoman Garcia, who led the fight. Still so many states to go!

Periods are tricky when it comes to policy. In order to talk on a political level about periods and the need for menstrual equity, and to convince rooms full of legislators (usually mostly men), we need a *cultural shift* toward acknowledging that menstrual hygiene is a *right* and *not a privilege*. As we’ve seen, we need influencers, celebrities, and leading politicians to speak out in support of the Menstrual Movement.

Sustainability: Again, in efforts of being intersectional, let’s talk about how periods intersect with sustainability and climate change. It is estimated that the average menstruator uses about 17,000 pads or tampons during their entire menstruating lifetime! 12 billion pads and 7 billion tampons end up in landfills yearly in the United States. At a global level more than 100 million menstruators use tampons, and even more use disposable pads...

Most sewage systems and general water treatment plants aren’t made to filter out used tampons. So they end up in our rivers, drifting out into our oceans. Rather than disintegrating like toilet paper, tampons degrade slowly, over many years, to form tiny micro-plastics that float, almost undetected. The Ocean Conservancy collected 27,938 used tampons and applicators on beaches around the world in a single day in 2015. SO, DO NOT FLUSH YOUR TAMPONS! Switching to reusable menstrual products can be a great way to help the environment if you choose to do so. One menstrual cup can last up to 10 years!

Sec. 4.3 - Taking Action and FAQs

Talking points:

- Learning how to deal with pushback and how to answer questions about the menstrual movement and knowing how to answer questions
 - “Why should we care about menstrual equity and the menstrual movement? Why should we be using tax dollars for menstrual products if only half of the population menstruates?”
 - “Hey, only women menstruate!”
- How can we take action? Meeting with city and state representatives, meeting with school administration. The power and impact of social media

When advocating for something, there are always going to be people who either do not understand why you stand for what you stand for, or just did not even know

what you are fighting for is important. Learning how to respond to pushback or having your values questioned can be nerve-racking and difficult, but it is possible! And once you have done it a couple of times, you start becoming more and more comfortable.

Here are a couple of examples of how to go about it:

Q: *“Why should we be thinking about periods when we have more important things to talk about, like hunger, economic development, or even gender equality in the first place?” “Why should tax dollars cover period products if most people don’t need them?”*

Frame your response to this argument within the context of how period equity is integral to achieving gender equality. Gender equality is about providing equal opportunities to everyone, so that each person can discover and reach their full potential, regardless of their gender identity. Feeling confident, clean, capable, and dignified is a human right, but at the moment that right is unjustly treated as a privilege for people who naturally have periods. Also, the argument comparing period products to toilet paper works well here: going to the bathroom, and menstruating, are NATURAL!

Q: *“Hey, but only women menstruate!”*

Many people do not identify with the sex they were assigned at birth! Gender and sex are **not** the same thing. It is important for all social justice movements to be inclusive of all and intersectional. In this case specifically, of any and all gender identities. If not, we are not truly serving the whole scope of the affected people! On the other hand we need to de-stigmatize menstruation and move away from patriarchal understandings of it. It is not an issue that only affects people who menstruate. We need to be able to guarantee both menstrual products and protocols that are accessible and safe for all menstruators in order to have a fully equitable and participatory society.

And now, onto HOW we can take action! There are many ways that one can get involved. This can take many different ways: you can meet up with school administration, start drives for period products, packing parties, you can meet up with your city and state legislators to start making change in your community. It is never too early, it is never too late! ALSO, an easy and immediate way of triggering change is through SOCIAL MEDIA: Menstruation is currently such a taboo topic, the first step forward is to get people talking, and this can take place on social media platforms in addition to conversations in real life, especially by mentioning words in public that pertain to the Menstrual Movement. Here are some hashtags you can use when posting on social: #MenstrualMovement #TamponTax #FreethTampons #PeriodPoverty #PeriodProud #PeriodPower

Engagement: Does your chapter have a plan for the year? If so, then you can share it.

SECTION 5 - End of Presentation

Talking points:

- Reminder: thank you so much to everyone for being here and for sitting through this presentation
 - If not doing the interactive component: Thank everyone for coming, open up the floor for questions and say goodbye!
- (OPTIONAL) Now we are going to move on to the interactive component: PERIOD STORIES

Well, the presentation part of this workshop is now coming to an end. I hope that you've learned a bunch from this, and that now you feel more prepared to take the next steps towards becoming the best PERIOD WARRIOR you can be.

Sec. 5.1 Engagement Exercise

[IF NOT DOING THE ENGAGEMENT EXERCISE] Thank you so much for coming to this workshop. Now I am going to take some final questions before we head out.

[IF DOING THE ENGAGEMENT EXERCISE]

Now we are going to move along and do the interactive component of this workshop: Period Stories. In this section, I would want everyone to get into small groups and discuss questions that have come up during the presentation, talk about why you are here in the first place, share period experiences.

Proposed Questions:

- What shocked you?
- What did you learn?
- Why, how and when did you decide to become a menstrual activist?
- Is there something that you felt was missing in this presentation?
- How did you initially learn about menstruation? Your parents? Your friend? Older sibling? The internet? In school? Was it a surprise?
- Share a period experience!! This can be either your first period experience or any memorable experience you have had in your menstruating lifetime.

Engagement: if this is a chapter meeting, you can make a plan for the year, or review the plans you have.