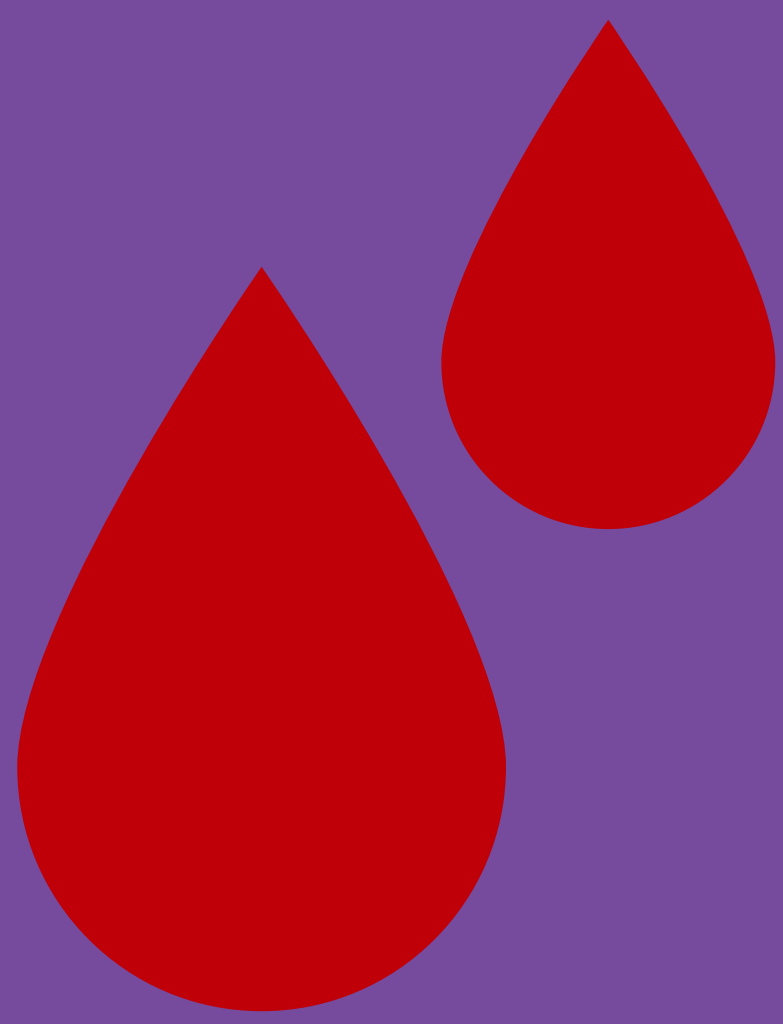




# Policy Brief — Normalising Menstruation as a Part of Life



Naija Feminists Media

June 2025

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# Executive Summary

Despite menstruation being a natural biological process, it remains covered in stigma and silence in Nigeria. It is a taboo that continues to harm millions of women and girls by affecting their education, self-esteem, health, and economic opportunities. In many schools in Nigeria, menstruating girls are often forced to stay home due to a lack of sanitary facilities and affordable menstrual products. In workplaces, there is no legal protection to support women suffering from menstrual-related health conditions.

Then, cultural and religious taboos further perpetuate misinformation and discrimination. As Nigeria works toward achieving the Sustainable Development Goals (SDGs) by 2030, normalising menstruation must become a national priority.

This policy brief presents actionable steps the government and key stakeholders can take to end menstrual stigma and create an inclusive, equitable society where menstruation is recognised, supported, and normalised.



# Introduction

Menstruation is a universal aspect of human biology experienced by more than half the population at some point in their lives. However, in Nigeria, menstruation is a topic shrouded in shame, resulting in far-reaching social, economic, and health-related consequences for women and girls. Despite global conversations around menstrual equity, Nigeria has yet to develop comprehensive national policies to address menstrual health and stigma.

This inaction directly affects girls' education, women's workforce participation, and broader gender equality. As stakeholders push for reforms aligned with the SDGs, especially Goal 3 (Good Health and Well-being), Goal 4 (Quality Education), and Goal 5 (Gender Equality), it is imperative that menstrual health becomes central to policy discussions.

# Analysis of Root Causes and Consequences

## 1. Stigma and Cultural Beliefs

Menstrual stigma in Nigeria is rooted in patriarchal norms and reinforced through religion and cultural traditions. Women are often regarded as impure during their menstrual cycle and are subjected to harmful practices such as exclusion from religious activities, cooking, and even entering public spaces. In some communities, menstruating girls are isolated, reinforcing the idea that menstruation is something shameful or dirty.

## 2. Education Disruption

Despite near gender parity in basic school enrollment, menstruation is a key factor contributing to higher dropout rates among girls in secondary school.



When girls begin menstruating, they are often forced to miss classes due to a lack of sanitary facilities and products. In some schools across the FCT, toilets are non-existent, forcing girls to manage their periods in unhygienic conditions or skip school entirely.

This leads to chronic absenteeism, lower academic performance, and, ultimately, higher dropout rates. The inability to manage menstruation in a dignified way during school years results in fewer girls transitioning to higher education.

### 3. Period Poverty

Over 90 million Nigerians live below the international poverty line. For many girls and women, purchasing sanitary pads is a luxury they cannot afford.

The lack of access to safe and hygienic menstrual products forces many to use improvised materials such as rags, tissue paper, or old clothes, which increase their risk of infection. Moreover, the taxation of menstrual products as luxury items worsens the problem, making these essentials unaffordable for many.

#### 4. Legal Gaps and Policy Absence

There is currently no Nigerian law that directly protects or supports menstruating individuals in schools or the workplace. Although the Labour Act provides 12 days of sick leave per year, this is insufficient for women who experience severe menstrual pain monthly. Similarly, no enforceable legal provisions ensure that schools provide menstrual products or adequate sanitation. The Violence Against Persons Prohibition (VAPP) Act criminalises harmful practices like isolation but fails to directly address menstruation-related discrimination.



## 5. Health and Mental Well-being

The emotional and psychological effects of menstrual stigma are substantial. Young girls often experience anxiety, shame, and confusion during menstruation, especially when they lack proper education and support. In some cases, girls have reported trauma due to the secrecy surrounding their first periods, with many unaware of what was happening to their bodies.

# Policy Options

## Introduce Menstrual Leave in the Labour Act

Amend Nigeria's Labour Act to provide two days of menstrual leave per month for women suffering from painful periods or menstruation-related health issues. This would support workforce participation and reduce gender-based discrimination in the workplace.

## Remove Tax on Menstrual Products and Introduce Subsidies

Eliminate VAT and import duties on menstrual hygiene products to reduce costs. Introduce government subsidies for the local production of sanitary pads and ensure free distribution in public schools and health centres.

## Integrate Menstrual Health into Education Policy

Mandate menstrual and reproductive health education in primary and secondary school curricula. Ensure training for male and female teachers creates supportive, stigma-free learning environments. Provide sanitary products and facilities in all public schools.

## National Media and Community Campaigns

Launch sustained public education campaigns using television, radio, and social media to normalise menstruation, challenge harmful myths, and promote body positivity. Engage religious and community leaders to reinterpret teachings that reinforce stigma.



# Recommendation

The Nigerian government should implement a National Menstrual Health and Hygiene Policy by 2026 with the following mandates:

- Free provision of sanitary products in all public schools, health centres, and workplaces.
- Legal provision for two paid menstrual leave days per month.
- VAT and import duty removal on all menstrual products.
- Nationwide curriculum reform to include comprehensive menstrual and reproductive health education.
- Establishment of public-private partnerships to support local manufacturing and distribution of low-cost sanitary products.
- Launch of a national awareness campaign targeting families, religious institutions, schools, and health workers.

## Conclusion

Normalising menstruation by 2030 is not just a health issue—it is a matter of human dignity, gender equality, and social justice. Nigeria cannot afford to let period stigma continue undermining girls' education, women's workforce participation, and national development. The time for a bold, coordinated response is now. With strong policies, political will, and community engagement, we can create a society where menstruation is no longer a barrier but simply a normal part of life.

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