

MENSTRUAL HEALTH IN SCHOOLS: EVIDENCE FROM VOICES WITH EXPERIENCE

Endometriosis South Coast - Briefing
Document

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What we did

We collected responses from 538 adults living in the PO postcode area using the Period Pain Experience & Support Needs Questionnaire.

They reflected on:

How menstrual pain affected their school life

What support they had (or didn't have)

What they wish had happened differently

How adults responded to them

What they now know would have made a difference

This offers one of the most comprehensive local insights into menstrual wellbeing needs.

Why it matters

Menstrual wellbeing is now a statutory part of RSHE (2025) and central to:

How their periods affected their lives

Their experiences of accessing support from supporting adults, including parents/carers, schools and clinicians

What would have made a positive difference

Reported Key Findings

1. Pain was widespread and severe

- 86% experienced severe or debilitating pain at school
- Many reported severe symptoms such as vomiting, inability to function, yet were told to “get on with it”.

2. Respondents/ participants reported that pain was normalised, and was not investigated enough

- 86% were never told their symptoms could indicate a health condition, many respondents reported being told to just 'get on with it', when they disclosed pain/ physical symptoms.
- Diagnosis of menstrual disorders were often delayed, with the majority of people receiving their diagnosis in adulthood.

3. Many respondents felt that education did not meet their needs

- Respondents felt that lessons arrived too late, were product-focused, or excluded boys.
- Only 4 people learned about menstrual conditions

4. Young People often felt dismissed or not listened to by adults.

- Respondents reported not feeling their concerns were taken seriously/ listened to in a range of settings, including at school and in clinical appointments.
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Key Local Findings

5. Symptoms disrupted school attendance and participation

- Over half reported missing school due to pain
- Many reported being punished for school absence or missing PE.

6. Significant impact on long-term well-being

Respondents described effects on:

- Mental health
- Employment
- Access to specialist care
- Autonomy and confidence

7. Additional barriers for gender-diverse and minoritised pupils

- 4.5% identified outside the gender binary
- Students who identified outside the gender binary reported feelings of invisibility, discomfort, and stigma when seeking help in school settings.
- Over 30% were from minoritised ethnic backgrounds
- Many reported cultural stigma and language barriers



What Children & Young People Say They Need

Across 538 voices, what young people wished they had was remarkably consistent:

- Early menstrual health education, preferably in year 4
- Adults who believed them with less shame and stigma, and more openness and honesty
- Clear information about what is and isn't normal and when to seek guidance
- Practical support in school (rest spaces, product access, flexible PE)
- Culturally sensitive and gender-inclusive education

One respondent captured this simply:

“More awareness that severe pain is not normal — and to be taken seriously when saying something is wrong.”

Priority Recommendations

For Local Authorities and Commissioners

- Make menstrual wellbeing a strategic priority.
- Advocate for children and young people and support their voices being heard
- Create a citywide menstrual health toolkit (translated, inclusive, trauma-informed).
- Establish clear early-identification pathways linking schools, GPs, and youth services.
- Support community-led menstrual wellbeing and equity initiatives.

For Schools & Multi-Academy Trusts

- Deliver RSHE menstrual wellbeing in Years 4 for all pupils.
- Train all staff (not just RSHE teachers) in menstrual literacy.
- Create period positive environments, including rest spaces and access to a choice of free period products.
- Include menstrual health in attendance, safeguarding, and behaviour policies.
- Use gender-inclusive and culturally sensitive resources.

Priority Recommendations

For Healthcare Services

- Take pain seriously and investigate early.
- Explain treatment options clearly so young people can make informed choices. (add as link - <https://www.england.nhs.uk/wp-content/uploads/2023/11/PRN00250-dst-making-a-decision-about-heavy-preiods.pdf>)
- Tailor care to individual needs, not one standard approach.
- Listen to young people's preferences.
- Improve access to specialist services.

For Families & Caregivers

- Open, shame-free conversations.
- Belief and validation.
- Awareness of red-flag symptoms.
- Advocate for young people and support their voices being heard.



What This Means

The experiences captured in this study offer a clear message:

Early, compassionate, inclusive menstrual wellbeing support can transform outcomes for young people.

Portsmouth now has a powerful opportunity to:

- Utilise the voices of people with lived experience to improve support for young people living with painful periods
- Support with school inclusion and attendance
- Reduce health inequalities
- Strengthen safeguarding
- Support diverse communities
- Prevent years of avoidable suffering

Respondents overwhelmingly agree that small, evidence-based changes in schools and services would have made a profound difference to their lives.

This briefing provides the roadmap to make that difference now.



We're here to support you



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