

Menstrual health should concern us all

For too long, menstruation was whispered about and framed narrowly as a “women’s/girls’ issue,” excluded from policy rooms, budgets, and national development agendas. That framing is harmful.

Gender is about how systems, policies, infrastructure, and culture shape lived realities differently for women and men. Menstruation is biological and natural, but its impact is defined by human decisions, economic choices, political priorities, and social attitudes. It is not only a women’s issue; it is a public policy, development, and governance issue.

In Uganda, menstrual health entered national debate decisively in 2015. While campaigning in Alebtong that year, President Yoweri Museveni acknowledged that many girls were missing school due to lack of sanitary pads and pledged government support, anticipated for the 2017/18 financial year. Since then, the issue has appeared repeatedly in Parliament and public debate. Girls petitioned MPs over lack of sanitary products; discussions have focused on taxation, VAT and import duties, affordability and school absenteeism; and women MPs have consistently pressed for tax relief and stronger state support. Ministers have cited funding constraints as a barrier to full implementation. Between 2023 and 2026, menstrual health has continued to be framed as a budget and development priority.

The impact is stark. The 2024 Auditor General’s report found that 64 percent of girls missed school due to menstruation, with dropout rates rising after menarche. Many

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schools lack adequate sanitation facilities, privacy, and emergency support. These conditions produce exclusion—missed learning, repeated absenteeism, and eventual dropout. Menstruation becomes a barrier not because of biology, but because systems fail to respond.

Government efforts matter but remain insufficient. Steps include tax exemptions on raw materials for sanitary pad production, support for local manufacturing, and promotion of reusable pads. Still, access is uneven. For many girls in rural areas and women in institutions such as prisons, products remain unaffordable or inconsistently available. The gap between policy intent and lived reality endures. Menstrual Period Month must go beyond awareness-raising. It should measure the distance between promises and delivery and move from recognition to sustained action.

Key recommendations:

- Ensure affordable or free menstrual prod-

ucts, including support for local production of quality reusable pads, to reduce cost barriers and improve access.

- Strengthen menstrual health education for learners, teachers, parents, and communities to reduce stigma and normalise menstruation for girls and boys.

- Invest in water, sanitation, and hygiene (WASH) infrastructure in schools and public institutions, ensuring safe water, privacy, disposal facilities, and dignified spaces.

- Advance policy and tax reforms that lower the cost of sanitary products across the supply chain, including VAT and import-duty measures.

- Provide sustained public financing beyond short-term projects, embedding menstrual health in sector budgets with clear multi-year lines.

- Establish accountability systems that track implementation, monitor absenteeism and dropout linked to menstruation, and publicly report progress and gaps.

- Integrate menstrual health fully into education, health, and gender equality frameworks linked to national and international commitments.

Menstrual health is a test of national accountability. When systems respond through financing, infrastructure, education, and policy, biology stops being a barrier. The measure of progress is not in statements, but in whether every girl can attend school and every woman can participate in public life with dignity.

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