Navigating menstrual leave policy—Global trends and the Indian paradigm

Ismat Kaur Sukhija 1,* and Harpreet Kour Isher 2

1 Strawberry Fields High School, Sector 26, Chandigarh, India.  
2 Motherhood Hospital, Sec 62, Mohali, Punjab, India.

World Journal of Advanced Research and Reviews, 2024, 21(01), 2847–2850

Publication history: Received on 16 December 2023; revised on 27 January 2024; accepted on 30 January 2024

Article DOI: https://doi.org/10.30574/wjarr.2024.21.1.0275

Abstract

The global landscape of menstrual leave policies differs widely and there is a need to delve into their origins, variations, and socio-economic implications. With a focus on the socio-economic challenges confronting menstruators, there is a need to study the absence of a comprehensive menstrual leave policy in certain regions and its impact on its residents. Utilizing the inclusive term ‘menstruators,’ this review uncovers persistent issues such as period poverty and cultural taboos surrounding menstruation. Surveying policies across diverse regions, it notes varying entitlements. The absence of a uniform policy underscores the global need for inclusive approaches to address the health and socio-economic aspects of menstruation. This study aims to contribute to the broader discourse on promoting well-being and inclusivity for menstruating individuals worldwide.

Keywords: Menstruation; Menstrual leave; Policy; Periods

1. Introduction

Menstrual leave is a special kind of leave whether paid or unpaid, meant to be taken for discomfort during menstruation. The debate around adopting and implementing a menstrual leave policy has been around for several decades but it has still not found acceptance worldwide(1). An attitude of casual triviality around menstrual complaints has long been prevalent. Furthermore, for authorities that do recognize the issue, there has always been an inherent fear of causing menstruators more harm than good (if at all) with the provision of menstrual leave. The term ‘menstruators’ implies people who menstruate, including girls, women, and other gender minorities (transgender men, non-binary people). This paper aims to take a global perspective on the menstrual leave policy and its relevance in the Indian scenario.

2. Menstruation – an unavoidable biological necessity

Menstruation is a physiological phenomenon that necessitates special personal arrangements for a female to carry on with her daily schedule. Unfortunately, there are still places where there is a dearth of menstrual hygiene awareness and products, a lack of infrastructure (such as private and public washrooms with intact water supply), restrictive traditions and myths associated with menstruation, and a silent acceptance or deliberate ignorance of the various problems associated with this cyclical bleed. Period poverty, implying a shortage of menstrual essentials, is still a reality depending upon the circumstances of the individual. Since menstruation is a result of the interaction of various hormones in a female’s body, any abnormal variations fall under the dedicated medical specialty of gynecology. A significant population of menstruators encounter painful periods, termed in the medical language as dysmenorrhea. Severe or persistent dysmenorrhea could be a sign of gynecological problems of the female reproductive system. Heavy bleeding requires frequent access to washrooms to change to avoid public embarrassment due to overflow and staining of clothes. Heavy bleeding can be a sign of certain diseases of the uterus or hormonal disturbances. Some people may
be debilitated by severe backache, diarrhea or constipation, menstrual migraines, and even nausea and fainting spells due to the pain. Besides, there is a whole range of milder symptoms such as fatigue and bloating which impact the well-being of a person. As per a nationwide survey done in the USA in 2017 among 42,879 women, 1 in 3 women quit their daily activities during menstruation (2). So, leave for personal well-being during menstruation can be a genuine reason to qualify as sick leave.

2.1. Global perspective

USSR was the first country to offer this leave in 1922 but it was withdrawn after 5 years. After World War II, in 1947, Japan (3) introduced a policy to protect women's reproductive potential or the capacity for motherhood; however, it was not universally welcomed. South Korea followed suit in 1953 (4). A few other countries such as Zambia (5), Taiwan (6), some provinces in China (7), Indonesia (8), and the latest entrants, Spain (9) and Ireland (bank of Ireland), offer menstrual leave. The Spanish government in addition has approved a decrease in the taxes applied to menstrual products (from 10% to 4%), categorizing menstrual products as essential goods. Different countries differ in their leave entitlement with some being more generous than others. For example, in Indonesia, women are entitled to leave on the first two days of menstruation. In South Korea, one day of paid leave per month (after specific request) is granted. In Taiwan, three days leave in a year (after specific request) is given. In Zambia, one day leave per month without a medical certification is allowed and in Spain, 3 to 5 days leave after medical certification (10) is granted.

2.2. Indian Perspective

India does not have a menstrual leave policy. A private Member's Bill for two paid menstrual leave days per month for all women employed in public and private sectors was introduced in the Lok Sabha in 2017 which, however, was opposed strongly (11). Within India, the Bihar State government has had a menstrual leave policy since 1992 offering 2 paid leaves per month to female employees working under the aegis of the state government. (12).

Public interest litigation (PIL) was filed before the Supreme Court of India (SC) in January 2023, seeking that a direction be issued to all the States to frame a policy for menstrual leave for female students and working women under the provisions of the Maternity Benefit Act, 1961. The Supreme Court disposed of the PIL, suggesting that it would be appropriate if the petitioner directed a representation to the Union Ministry of Women and Child Development for consideration (13).

There are various provisions under the gamut of the Indian constitution for women to avail leave, especially after amendments in 2017 to the Maternity Benefit Act like a paid leave of twenty-six weeks (15). Similarly, (paid) child care leave can be availed by a female taking care of her maximum of two minor children below the age of eighteen years, for a maximum of 730 days, anytime during her uninterrupted service (14). Such policies highlight the importance of a woman's role in the rearing of her family.

Even if nations do not address the controversial issue of menstrual leave, various industries and companies have offered it to their female employees. Zomato, Byjus, and Gozoop are a few examples of companies offering menstrual leave in India (12).

2.2.1. Pros

Having a menstrual leave policy negates the deeply ingrained neglect, deliberate invisibility, and stigma associated with the menstrual cycle in social, political, and economic aspects of life. Such a gender-inclusive policy ensures social justice. It empowers women from all levels of socio-economic backgrounds to step out to enrich the workforce and contribute to their financial independence and the economic growth of society. For individuals who suffer badly, for example, with severe pain or heavy bleeding, this avoids unscheduled absenteeism, which on a recurrent basis can have negative financial implications as well as affect their productivity.

However, having a policy for menstrual leave cannot make up for the lack of adequate public infrastructure for women because that is a primary essential. This is more so in the rural sector, unorganized sector, and those engaged in blue-collar jobs. Making the working environment more conducive for women thus requires a twin-pronged approach dealing with both infrastructure and policy.

2.2.2. Cons

Menstrual leave policy may not be welcomed by all, employers and employees included. It may be looked upon as a special privilege for women, thus, impacting the hiring of women. They may be bypassed just because of their gender as recruiting women may be perceived as expensive, especially if they are offered paid menstrual leaves. This policy
may also hinder their promotions, any bonuses, or appraisals. Disclosure of menstrual status to avail leave may draw attention to a private issue, and invite objectification. Other co-workers may not always sympathize with the menstrual leave-takers, creating an unhealthy and non-progressive work environment. This, itself, may beat the purpose of introducing the menstrual leave policy. Questions may also be raised on how genuinely the leave is required, which actually may apply to other sick leave takers as well.

3. Discussion - Is Menstrual Leave a debatable issue?

Women and men are biologically different. A woman’s body prepares for motherhood each cycle; she may bear a child and then avail the benefits of maternity leave for the betterment of her young family. In India, there is even a policy for childcare leave of up to 2 years available to women till the child turns eighteen years of age. These benefits or special leaves recognize the role of a woman for a positive impact on her family. This kind of positive discrimination benefits the family unit and consequently the community and the nation itself. Of course, the provision for these kinds of concessions to women came after the number and power of the female workforce increased. This is almost analogous to women acquiring the right to vote, which history is witness to. Though women have great adaptability and have willingly and successfully contributed to all spheres of development, their biological system demands that they bleed continuously for a couple of days each month. The maladies of menstruation may afflict menstruators for varying durations at different times in their reproductive life and equate to feeling unwell (with a broad variety of symptoms). It has been argued that menstruators take painkillers for the most common symptom of pain, however, prolonged intake of regular painkillers is medically not advisable, and menstruators in such a need may benefit, for example, from alternative solutions such as hot fomentation and rest in the comfort of their homes. Another hurdle is the issue of recognizing the needs of other gender minorities who menstruate as well and may not always have access to the appropriate infrastructure as gender-neutral washrooms. Therefore, it will undeniably do well for all menstruators to have access to menstrual leave when needed.

3.1. Policy Making

Menstrual leave policy is neither a novel idea nor universally accepted as an individual’s right, unlike maternity benefits. The policy should ideally include all menstruators. Designing and implementing a menstrual leave policy would require addressing various issues. Having a ceiling on the number of leaves, a remuneration policy and the requirement of a medical certification in case of the need for more leaves would help increase the transparency in the implementation of the rules and acceptance by everyone. Introducing concepts such as ‘work-from-home’, flexible working hours, and customized working schedules could also ease out many issues. Improving the workplace conditions by improving infrastructure, providing menstrual essentials, and providing a place to rest may decrease the leave requirement. Understanding the needs of menstruators, which include the non-binary members of the community, along with revamping a gender-neutral sick leave policy would require strong legislative support so that policies are made and implemented at a national level. There is a need to conduct a survey on quality of life issues in all menstruating individuals and openly discuss the issue giving it due importance. The female labor force participation (FLFPR) rate in India, which refers to women who are either working or looking for a job, has been below the global average of 47 percent for several years. The latest Periodic Labour Force Survey for 2021-22 highlights that the FLFPR for the prime working age group (15 years & above) stands at 32.8% in India (16). Evidence suggests that gender equality, especially in education and employment, contributes more consistently to economic growth rather than economic growth contributing to gender equality in terms of health and basic rights (17). Hence, to ensure an inclusive and progressive process, people must have access to decent work opportunities and an environment to surmount the various biological, social, and economic, factors that may prove obstructive to their empowerment.

4. Conclusions

Accepting that menstruation may be limiting transitionally, and making provisions for those who need care during that time, is one of the signs of an egalitarian society that recognizes the requirements of different sections of the society and makes provisions for them to take care of themselves so that they can contribute positively to the economic growth of their nation as well as themselves, along different trajectories. Ultimately, to bring about this change, the first change to be made is in the mindset of both the lawmakers and the stakeholders.

Disclosure of conflict of interest

No conflict of interest to be disclosed.
References


