Access to Free Sanitary Products for those at school, college or university – Child Rights and Wellbeing Impact Assessment (CRWIA)		
Policy/measure	The policy will make free sanitary products accessible to those attending schools, colleges and universities.	
Summary of policy aims and desired outcomes	This will ensure that lack of access to products does not impact on an individual's ability to fully participate in education at all levels.	
Directorate; Division; Team	DHSJ: Social Justice & Regeneration: Social Justice Delivery Unit	
Executive Summary	The Programme for Government 2017-18 announced the Scottish Government's commitment "to introduce a scheme to fund access to free sanitary products in schools, colleges and universities and consider action to support those on low incomes, but not in education, in light of the findings of the pilot scheme in Aberdeen."	
Background	We have sought to build evidence through our Aberdeen pilot and a survey carried out in partnership with Young Scot, both of which showed a clear need for access to free sanitary products (further detail below). This work has significantly added to the findings of surveys carried out by Plan International and Women for Independence, as well as to anecdotal evidence suggesting that some pupils may be missing school during their period if they have difficulty accessing products, which could have an impact on educational attainment. This growing body of evidence has identified that between 10-25 per cent of those surveyed have had difficulty accessing sanitary products.	
Scope of the CRWIA	Scottish Ministers have agreed that the eligible population for the policy should include pupils who menstruate in publicly-funded primary and secondary schools, in secondary years in independent schools, and all students who menstruate in colleges and universities. Based on the data available it is estimated that around 157,000 children and young people at school are eligible for access to free sanitary products. We have estimated that overall around 99,500 college students and 141,500 university students of all ages are eligible for provision. Of these, we estimate that around 19,000 college students and 19,000 university students will be young people aged 18 and under – a total of approximately 195,000 children and young people.	

Children and young people's views and experiences

Young Scot Engagement with Young People and Students

Aims

To inform the delivery of the PfG commitment and ensure the guiding principles are in line with the views of those the policy will impact on, we have worked with Young Scot to gather insight on young people and students' views about accessing sanitary products.

The engagement aimed to provide further information on the following main topics:

- what issues or circumstances can make accessing sanitary products difficult for young people and students and what impact lack of access to products has;
- how they feel about discussing menstruation; and
- how they feel about receiving free sanitary products and what way/s of accessing products young people think would work best for them.

Methods

Three different engagement activities were carried out:

- A short online survey hosted by Young Scot between 21st December 2017 and 31st January 2018. The survey asked questions about current experiences accessing sanitary products and future provision;
- An open letter this method involved asking young people to write an anonymous letter to share their experiences and perceptions of a topic. The letter encouraged open feedback around management of periods, accessibility of sanitary products, and individuals' relationships with their periods. Also hosted by Young Scot between 21st December 2017 and 31st January 2018; and
- Two focus group discussions with small groups of young people at school, and at college and university to allow us to explore findings emerging from the survey and letter in more detail.

Findings

Young Scot published a report and 1-page summary outlining the findings of the survey and letter on 8th March.

The survey received 2,050 complete responses, while a letter was submitted by 181 individuals. Ninety two per cent of survey respondents were currently in education, either at secondary school, college or university.

Around a quarter of respondents (26% of those in education and 24% of those not in education) said they had struggled to access sanitary products in previous year. Around 6 in 10

respondents who reported struggling to access products said that this was because they didn't have the product they needed. The most common way respondents in education who had struggled to access products coped was having to ask someone else for a tampon/towel (71%) or to use an alternative e.g. toilet paper (70%).

Around three quarters of respondents (74% of those in education and 76% of those not in education) said they feel very or quite comfortable discussing sanitary products. Fifty seven per cent of respondents in education said they feel very or quite comfortable buying sanitary products, compared to 67% of respondents who were not in education.

For those in education, the most popular option for accessing free products in the future was having free products available in the school, college or university toilets. Half of respondents rated this as number one out of five options. Similarly, for those not in education the most popular option for accessing free products in the future was free products available from toilets.

Almost a third of respondents (648) provided further comments. These responses were split into six themes: issues with affordability, difficulty with discussing periods/sanitary products, opinions on the commitment, problems with existing sanitary products or facilities, difficulty with accessing products, and other suggestions. Similar themes were found in the Dear Period letters. These also highlighted the physical and emotional impact of periods.

We have shared the raw data from the survey with local authorities, colleges and universities to inform thinking about their delivery plans for the PfG commitment.

Aberdeen Pilot - Summary of Findings

The Scottish Government funded a six month pilot in Aberdeen between September 2017 and February 2018. The main aim was to test different approaches to providing access to free sanitary products for people from low income households and all students, and to better understand the circumstances people are in that mean they cannot access sanitary products.

The pilot was run by Community Food Initiatives North East (CFINE) using established relationships with local partners through the FareShare network. The pilot was initially rolled

out in a number of third sector organisations and regeneration areas. It was later extended to educational settings – Robert Gordon University (RGU), North East College Scotland (NESCol) and three secondary schools where universal provision was offered – and some additional community/third sector organisations. A primary school was also added. Just over 1,000 participants received products during the pilot: 209 via CFINE, 588 via the other community/third sector partners, 43 at RGU, 108 at NESCol and 133 at the four schools involved.

Pilot delivery and evaluation methods

For the purpose of the pilot, participants were asked to 'sign up' to take part. Methods for signing up participants and distributing products varied depending on how the organisation works with clients. Generally, sign up took place in a private room and products were picked up from the same location. However, other examples include a worker taking products out with them on a visit or inclusion in a food parcel. To test whether participants would prefer to buy their own products, rather than receive them directly, the option of offering cash to participants was introduced in October and a pre-paid card in December.

A range of monitoring data was collected by CFINE and partners about the distribution of products. In addition the evaluation surveyed participants at the start and end of the pilot, and qualitative interviews were conducted with a small number of participants and administrators at a sample of the partners.

Of those participants that provided information (630), 26% (185) were aged 18 or under: 40 were aged 10-12, 89 were aged 13-15 and 56 were aged 16-18. Of those participants that signed up via a community partner and provided information (498), 19% (97) were aged 18 and under. Half of these children and young people lived in single parent households. Partners reported that some parents or grandparents collected products for their children or grandchildren, but data was not formally collected on this.

Community partners

While the evaluation findings cannot tell us how widespread lack of access to sanitary products is in the general population, they confirm that this is an issue faced by some of those living on low incomes. Also, for some of those that do not have the products they need, this appears to have an

impact on their wellbeing and, for a minority, their ability to continue with day to day activities during their period.

Accessing sanitary products had presented difficulties in the past for two thirds of participants. Asked if they had ever been unable to purchase sanitary products 58% said they had. Of participants aged 18 and under, 55% said they had experienced difficulty accessing products and 44% had ever been unable to purchase products. The main reasons for difficulty accessing products related to affordability.

It is not possible to conclude with any certainty from the evaluation that one model of providing access to products is better than another; however, two important considerations emerged clearly: dignity and respecting participants' privacy, and ease of access. Embarrassment was highlighted as a barrier to accessing products via the pilot, especially for younger participants.

The pilot activity was generally driven by one committed individual on top of an already busy role. This highlights that this model of provision was very dependent on good will and somewhat precarious. Partner staff identified raising awareness of the pilot and getting people to take part as a challenge, while a sizeable proportion of participants did not take up the offer of regular provision. The sign up process and ease of access were identified as issues.

Concerns were raised by both partner staff and participants around whether a pre-paid card would be used to buy products; nevertheless, the limited data collected suggest that the pre-paid card was of interest to a sizeable minority of participants. Receiving a card to use in shops was also a popular option for future provision. Benefits noted included the convenience of using the card to purchase products at the same time as other shopping, choice, and dignity.

Picking up products from a range of convenient and accessible locations such as pharmacies, doctor's surgeries or health clinics, or community centres was suggested by partners and participants. Ordering online for delivery by post was also a fairly popular option. Participants noted it would be discreet or convenient, although it would not be accessible for those who did not have easy access to the internet.

The key considerations identified across the different data sources were around ease of access or convenience, provision that is discreet and does not identify recipients as needing help, and preventing misuse or abuse of any provision.

The majority of participants were already engaging with services. Further consideration is needed on how to reach other groups who may be in need. In addition, further exploration of methods for accessing products that do not require talking to someone and other settings such as community pharmacies would help build the evidence base.

Schools, colleges and universities

Access to sanitary products was also found to be an issue for some students. Students raised similar issues related to being able to afford products on a low income; however, not having a product when you needed one in school or away from the home was also a consideration.

Accessing sanitary products had presented difficulties in the past for around a third of student participants, while slightly under a quarter had been unable to purchase sanitary products at some point in the past. Twenty per cent of pupils who answered the question had experienced difficulty accessing sanitary products and had been unable to purchase products. Affordability and being 'caught out' were the main issues raised.

A small number of students reported that lack of access to products had an impact on their attendance at school, college or university during menstruation. The pilot was not, however, able to shed light on whether lack of access to sanitary products has an impact on attendance at school, college or university.

In providing access to products in educational settings, embarrassment about periods generally and having to ask someone else for products was considered to be a particular issue, especially for younger students. However, schools were reluctant to trial making products available in school toilets because of concerns about misuse and, where this was tested, problems were encountered. School staff noted a need for education around menstruation and sanitary products to reduce stigma and normalise discussion of menstruation.

Having free products available in toilets was a popular option for college and university students. This may be because it was seen as a good option if you are 'caught short'. Receiving a card and ordering online were also popular options. The least popular option, by far, for college

and university students was to get free products from a member of college or university staff – having to ask someone for products was generally seen as a barrier. **Key Findings** The policy is expected to have a positive impact on children's rights. All children and young people up to the age of 18 who menstruate will be able to access free sanitary To include impact on UNCRC rights products in schools, colleges and universities in Scotland. and contribution to The policy is being implemented to ensure that lack of wellbeing indicators access to products does not impact on an individual's ability to fully participate in education at all levels. From the findings of the Aberdeen pilot, we know that lack of access to products may have an impact on wellbeing by reducing anxiety about managing menstruation. The policy will be underpinned by a set of Guiding Principles which seek to, inter alia: protect the dignity of children and young people, avoiding anxiety, embarrassment and stigma; provide delivery models that are reflective of the views and experiences of children and young people; and promote gender equality, ensuring anyone who menstruates can access products, including transgender men/non-binary individuals, and that language is gender neutral. The policy may be of particular benefit to children and young people from low income households who may not otherwise have the means to afford sanitary products. We consider that the impact on children and young people will be positive and that by involving children and young people in how provision that best suits their needs can be delivered they are more likely to engage with the provision and therefore fully participate in education at all levels. This would promote the following Articles of the UNCRC: Article 1 (definition of the child) Article 2 (non-discrimination) Article 3 (best interests of the child) Article 6 (life, survival and development) Article 12 (respect for the views of the child) Article 26 (social security) Article 27 (adequate standard of living)

Having assessed the impact on children and young people,

we find it appropriate to implement the policy as we consider it will have a positive impact on children and young people.

Conclusions and

Recommendations

Monitoring and review

The policy will be monitored throughout the first year to ensure that it is appropriately funded and having the expected positive impact on children and young people. In January/February 2019, the Scottish Government will collect information from local authorities, colleges and universities on: spend to date; number of products purchased; the split of products (i.e. sanitary towels, tampons, other); unit cost of products; and, where possible, an estimate of the number of products taken up to date. This will help determine the actual costs of delivering this policy and any funding adjustments required for future years. In order for educational establishments to refine and improve their delivery models, we will also share examples of good practice and learning about what works well between institutions. A full review of the policy will take place in Autumn 2019 to allow a full year of data to be collected.

Further information will be sought directly from young people on their use of and thoughts around having access to sanitary products in their place of learning, including whether they had the opportunity to contribute their views on the products available and models used for delivery, whether they have used the products and how regularly (i.e. once or twice, fairly frequently, school time only, school time and supply for weekends, school time and supply for weekends and holidays etc.) and how this impacted on their ability to attend their place of learning or participate in learning and activities while there. The Scottish Government will work with Young Scot on collecting this information at a national level and COSLA, Colleges Scotland and Universities Scotland will support the design of any surveys/engagement tools.

CRWIA required CRWIA not required Authorisation Policy lead Elaine Moir, Policy Lead, Access to Sanitary Products, Social Justice & Regeneration Division, DHSJ CRWIA not required 13 August 2018

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