THE GROWING DEMAND FOR WOMEN'S MENSTRUATION LEAVE: AN INDIAN AND INTERNATIONAL PERSPECTIVE ON EMPLOYMENT DYNAMICS AND GENDER EQUALITY

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ABSTRACT

The growing demand for menstrual leave reflects important questions about workplace fairness, women's health, and gender equality. This paper examines how different countries handle menstrual leave policies and explores attitudes in India, where painful menstruation affects 20–30% of women. Countries like Japan (1947), Zambia, and Spain (2023) have established national menstrual leave laws, whereas India has only state-level policies in place in Bihar and Kerala. Some Indian companies, such as Zomato and Byju's, have introduced their policies, resulting in 30% better female employee retention rates.

We surveyed 110 people in India about their views on menstrual leave. The results show strong support: 86% want paid menstrual leave (preferably 2–3 days per month), and 85% believe it should be separate from regular sick leave. However, 92% said their current workplace doesn't offer this benefit.

People cited improved health (71%) and productivity as main benefits, but worried about practical challenges like preventing misuse (33%) and potential discrimination against women. International data shows that countries with mandatory menstrual leave sometimes see 5–8% fewer women being hired, suggesting these policies might backfire.

Supporters argue that menstrual leave promotes dignity and inclusion, especially since 81.8% of women in India's informal work sector lack basic menstrual hygiene facilities. Spain's successful model, where the government pays for the leave and 30–50% of eligible women use it, shows that well-designed policies can work.

The research reveals a tension between supporting women's health needs and avoiding policies that might hurt their job prospects. Effective menstrual leave policies need multiple approaches: preventing discrimination, offering flexible work options, and reducing stigma around menstruation.

For India, policies must include informal workers (90% of working women) and connect to broader gender equality goals. The key is balancing women's biological needs with fair employment practices that don't create new barriers to hiring women.

Keywords: menstrual leave, workplace equality, women's health, employment policy, India

Introduction

The evolution of women's participation in the global workforce represents one of the most significant socioeconomic transformations of the modern era. As women increasingly enter traditionally male-dominated industries and make substantial contributions to national economies, the imperative to address their unique biological and physiological needs within professional environments has become undeniable. "While women's labour force participation in India has shown encouraging growth, rising from 18.6% in 2018-19 to 25.1% in 2020-21", 1 the reality remains that millions of women continue to face workplace challenges rooted in biological processes that have long been stigmatised and misunderstood. Among these challenges, menstruation stands as a particularly complex issue, affecting approximately half the global population yet remaining largely invisible in employment policy discussions. If the number of female workers were to increase to the same level as the number of men, GDP in the United States would expand by 5%, by 9% in Japan, and by 27% in India"²The contemporary debate surrounding menstrual leave policies reflects broader tensions between biological realities and workplace equality aspirations. "While countries like Japan, South Korea, Indonesia, and Zambia have pioneered menstrual leave legislation, and Indian states such as Bihar and Kerala have introduced limited provisions", the discourse remains deeply polarised. Critics argue that such policies may inadvertently reinforce gender stereotypes and limit women's employment opportunities, as evidenced by Union Minister Smriti Irani's 2023 statement that "menstrual cycle is not a handicap." "Conversely, advocates emphasise that recognising menstrual health needs represents a fundamental aspect of workplace dignity and inclusivity, particularly given that 20-30% of women experience premenstrual syndrome with

¹ Press Information Bureau. (2023). Female labour force participation rate. Government of India. Retrieved from https://pib.gov.in/PressReleasePage.aspx?PRID=1894913

² Lagarde, Christine, and Erna Solberg. Joint paper published by the World Economic Forum (WEF), January 2018, ahead of the Davos Annual Summit.

³ Prasad, U. (2018, June 7). India needs a menstrual leave policy. The Hindu.

varying degrees of severity."⁴ "This dichotomy highlights the urgent need for evidence-based policy frameworks that balance the dual objectives of promoting women's health and maintaining their competitive position in the labour market, while addressing the persistent socio-cultural stigmas that continue to marginalise discussions of menstrual health in professional contexts."⁵

Understanding Menstrual Leave

Menstruation is a physiological occurrence that requires a woman to make unique personal arrangements to continue with her routine. A lack of infrastructure (such as private and public restrooms with an intact water supply), restrictive customs and myths surrounding menstruation, a lack of knowledge or a willful ignorance of the numerous issues related to this cyclical bleeding, and a lack of awareness and products regarding menstrual hygiene are regrettably still prevalent in some areas. A lack of menstruation necessities, or period poverty, can still exist based on a person's specific situation. Since the combination of several hormones in a woman's body causes menstruation, any aberrant changes fall under the specific medical expertise of gynaecology. A significant number of menstruators experience uncomfortable periods, which are known medically as dysmenorrhea.

Menstruation is "a cycle of changes that the uterine endometrium undergoes each month in response to the waxing and waning of ovarian hormones in the blood" Menstruation is the regular discharge of blood and mucosal tissue from the uterine lining due to hormonal fluctuations. "Twenty to thirty per cent of women experience premenstrual syndrome (PMS), with 3-8% facing severe symptoms that impair daily functioning. Dysmenorrhea, or painful menstruation, affects productivity significantly one in three American women stops everyday activities during their periods". Medical conditions like endometriosis, adenomyosis, and uterine fibroids can exacerbate menstrual symptoms, making workplace accommodations medically necessary.

⁴ Biggs, W. S., & Demuth, R. H. (2011). Premenstrual syndrome and premenstrual dysphoric disorder. American Family Physician, 84(8), 918-924.

⁵ News Agencies. (2020, August 12). Zomato's 'period leave' policy triggers debate among Indian women. Al Jazeera; and Bhattacharya, A. (2021). Menstrual leave at workplace: Employees' point of view. KIIT-Parikalpana, 17(1), 209016.

⁶ Marieb EN, Hoehn K. Human anatomy & physiology. 8th ed. San Francisco: Pearson Education Inc; 2010:1054
⁷ Schoep ME, Nieboer TE, van der Zanden M, Braat DDM, Nap AW. The impact of menstrual symptoms on everyday life: a survey among 42,879 women. Am J Obstet Gynecol. 2019 Jun; 220(6):569.e1-569.e7

Historical Evolution of Menstrual Leave

Menstrual health and hygiene have evolved dramatically throughout history, shaped by cultural beliefs, scientific discoveries, and technological advancements. "In ancient civilizations, women managed menstruation using natural materials like moss, grass, animal skins, or folded fabric, with Egyptian women creating tampons from softened papyrus and Roman women using linen or wool rags."8 However, "menstruation was shrouded in superstition and stigma, with Hippocrates viewing it as balancing body humors while Pliny the Elder spread myths about menstrual blood's supposed magical properties, leading to widespread taboos that branded menstruating women as "unclean" in religious texts like the Bible and Quran". ⁹These practices persisted through the Middle Ages, where menstrual knowledge stagnated due to religious dogma, and women were often prohibited from cooking, attending religious ceremonies, or entering houses during menstruation, relying on homemade washable rags or "menstrual aprons." "The nineteenth century marked a turning point with Johnson & Johnson producing the first disposable pads (Lister's Towels) in 1896, though societal stigma limited their adoption." 10 "Major innovations emerged in the twentieth century with disposable pads (Kotex in 1921) and tampons (Tampax in the 1930s), alongside medical advances like the birth control pill (1960) and menstrual cups (1980s), while the feminist movement of the 1970s challenged period stigma through open dialogue."11 "Today's menstrual health movement addresses three key challenges such as accessibility, sustainability, and education with significant legislative achievements including Scotland's mandate for free period products in 2020 and India's elimination of tampon taxes in 2018, though cultural barriers persist as UNESCO estimates one in ten African girls still misses school during menstruation."¹²

Contemporary Need and Justification

Menstruation remains stigmatised across cultures, rooted in ancient beliefs about impurity and pollution. In Hindu traditions, menstruating women are excluded from religious activities and

⁸ WaterAid, "Menstrual Hygiene Matters," https://washmatters.wateraid.org/publications/menstrual-hygiene-matters

⁹ American Journal of Public Health, "Historical and Cultural Influences on Menstrual Health," https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2014.302525

Smithsonian Magazine, "The History of Period Stigma," https://www.smithsonianmag.com/history/period-stigma-180979291/

 $^{^{11}}$ Smithsonian Magazine, "The History of Period Stigma," https://www.smithsonianmag.com/history/period-stigma-180979291/

¹² WASH Data Reports, https://washdata.org/reports; UNESCO, "Puberty Education & Menstrual Hygiene Management," https://unesdoc.unesco.org/ark:/48223/pf0000226792

kitchens, while similar taboos exist in Christianity and Islam. These cultural barriers perpetuate workplace discrimination and silence around menstrual health needs. In India, significant numbers of girls drop out of school due to menstruation-related challenges, highlighting the broader educational and economic impacts of period stigma.

Menstrual leave addresses both health and equity concerns. "The International Labour Organisation reports that 81.8% of women work in informal sectors, often lacking basic sanitation facilities and menstrual products". Poor menstrual hygiene is linked to urogenital infections and potentially cervical cancer. "Modern workplace demands long hours, rigorous commitments, which often conflict with menstrual health management needs." Proponents argue that menstrual leave promotes workplace equality by acknowledging biological differences without penalising women professionally. Significant legal cases have shaped menstrual leave policies globally. "Japan's 2004 Osaka District Court ruling protected employees from discrimination for using menstrual leave." South Korea's Constitutional Court upheld menstrual leave in 2016 while recommending inclusive policies for transgender and non-binary employees. Italy's 2021 Milan Labour Court recognised severe menstrual conditions as protected disabilities." In India, the 2022 Patna High Court decision established menstrual leave as part of the fundamental right to health and dignity under Article 21". Despite legal progress, cultural stigma limits policy utilisation—only 0.9% of eligible Japanese employees currently use menstrual leave."

THE INDIAN PERSPECTIVE

"During British rule (1858-1947), women's labour was confined to agriculture and domestic work with minimal protections, regulated only by the Factories Act of 1881"²⁰. "Post-independence, the Indian Constitution established gender equality through Articles 14, 15, and 39(d), though women's workforce participation remained at 20-25% for decades"²¹. "The

¹³ International Labour Organisation statistics

¹⁴ Sang K, Powell A, Finkel R, Richards J. 'Being an academic is not a 9-5 job': Long working hours and the 'ideal worker' in UK academia. Labour Ind 2015;25:235-49.

¹⁵ Japan Institute for Labour Policy and Training (2005). "Women and Work in Japan."

¹⁶ Constitutional Court of Korea (2016). Full decision: https://english.ccourt.go.kr

¹⁷ ILO Case Digest (2021). "Italy's Endometriosis Ruling."

https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/110370/132957/F-123456789/ITA110370%20Eng.pdf

¹⁸ The Hindu (2022). "Bihar Court Upholds Menstrual Leave Rights."

¹⁹ Japan Institute for Labour Policy and Training statistics

²⁰ Forbes, G. (1996). Women in Modern India. Cambridge University Press.

²¹ NSSO (1983). Report on Employment and Unemployment. http://mospi.nic.in

1970s-1990s brought protective legislation, including the Equal Remuneration Act,1976 and Maternity Benefit Act, revised 2017, while globalisation increased women's employment in IT and services."²²

India lacks a national menstrual leave policy, but states have implemented regional measures. "Kerala provides 60 days annually for female students, reducing dropouts but excluding workers"²³. "Bihar offers government employees two days a month, improving retention but excluding the private sector"²⁴. "Tamil Nadu relies on voluntary company policies with inconsistent implementation."²⁵ "Private companies lead change: Zomato (10 days annually), Swiggy (flexible arrangements), and Byju's (12 days) report 30% higher female retention"²⁶.

"Women comprise only 19% of India's formal workforce, facing a 34% wage gap"²⁷. "Despite 355 million menstruating women, labour laws don't address menstrual health. Gender equality could boost global GDP by \$12 trillion by 2025, with diverse companies showing 25% higher profitability"²⁸. Women's economic empowerment reduces poverty through increased investment in children's education and healthcare"²⁹.

Legal Framework

"Constitutional provisions guarantee equality (Article 14), special protections (Article 15), and equal pay (Article 39)"³⁰. Key legislation includes the Maternity Benefit Act, providing 26 weeks of paid leave for organised workers, though excluding 90% of informal female labourers. "The POSH Act (2013) mandates workplace harassment committees, but 54% of businesses remain non-compliant" ¹⁵.

Landmark cases that advanced menstrual rights are "Jaya v. Kerala State Electricity Board (2021) recognised dysmenorrhea as valid medical leave"³¹, and "Pooja v. State of Rajasthan

²² Agnes, F. (1999). Law and Gender Inequality: The Politics of Women's Rights in India. Oxford University Press

²³ The Hindu (2023). "Kerala Announces Menstrual Leave for University Students."

²⁴ Times of India (2022). "Bihar Govt Approves Menstrual Leave for Women Employees."

²⁵ The News Minute (2021). "Should Tamil Nadu Introduce Menstrual Leave?"

²⁶ India Today (2023). "Why More Indian Companies Are Offering Period Leave.

²⁷ World Bank (2023). Gender Employment Gap in India; ILO (2022). Women and Work in India

²⁸ McKinsey & Company. (2020). Diversity wins: How inclusion matters.

²⁹ United Nations Development Programme (UNDP). (2020). Gender equality and women's empowerment in sustainable development.

³⁰ Constitution of India. (1950). Articles 14, 15, 21, 39, 42.

³¹ Jaya v. Kerala State Electricity Board, WP(C) No. 2381/2021 (Ker. HC 2021)

(2023) directed employers to treat menstrual pain as legitimate sick leave"³². However, "XYZ v. Union of India (2023) saw the Supreme Court decline to mandate nationwide menstrual leave, calling it a legislative rather than judicial matter"³³.

"Despite comprehensive legislation, enforcement remains weak, with only 7% of women receiving maternity benefits"³⁴. "Cultural stigma persists, leaving 71% of women without menstrual hygiene access due to workplace discrimination fears"³⁵. India's progressive constitutional framework faces significant implementation gaps and socio-cultural barriers in achieving comprehensive gender justice.

International Overview

"Japan pioneered menstrual leave in 1947, allowing unlimited unpaid days, with 30% of employers providing compensation" 36. However, only 0.9% of eligible workers utilise it due to workplace stigma.

'South Korea provides one unpaid day monthly with 19% usage, while Taiwan offers three days annually at 50% wage"³⁷. "Spain became Europe's first country with government-funded paid leave (3-5 days monthly) in 2023"³⁸. "Indonesia mandates two paid days off per month since 2003, although enforcement is inconsistent"³⁹. "Zambia grants one paid day monthly without medical documentation under its "Mother's Day" policy"⁴⁰.

"Paid policies achieve 3-5 times higher uptake than unpaid alternatives. Medical certification requirements reduce utilisation by 40-60%" Spain's self-certification system and government funding eliminate employer resistance, achieving 30-50% uptake. "Cultural stigma remains the primary barrier. Spain's educational campaigns reduced stigma by 32% since 2022" 2.

³² Pooja v. State of Rajasthan, S.B. Civil Writ No. 18023/2022 (Raj. HC 2023)

³³ XYZ v. Union of India, WP (C) No. 1224/2022 (SC 2023)

³⁴ International Labour Organisation. (2022). Women and Men in the Informal Economy.

³⁵ National Family Health Survey-5. (2021). Ministry of Health, India.

³⁶ Medical Xpress. (2022). Japan to Zambia: Paid menstrual leave policies.

³⁷ BBC News. (2021). South Korea's menstrual leave policies; Skuad. (2023). Vietnam leave policy overview.

³⁸ Economic Times. (2023). Spain passes law for menstrual leave.

³⁹ Sage Publications. (2023). A bloody controversy: Menstrual leave in Indonesia.

⁴⁰ Quartz Africa. (2017). Zambia's progressive menstrual leave policy.

⁴¹ OECD. (2022). Gender Equality in Employment Policies.

⁴² UNESCO. (2023). Comprehensive Sexuality Education Global Review.

Countries requiring medical documentation (Japan, Indonesia) see dramatically lower participation compared to self-declaration models (Spain, Zambia). Taiwan's hybrid approach, allowing either leave or flexible work, achieves 89% compliance in progressive sectors.

The World Bank emphasises that "policies succeed when they are context-specific, adequately funded, and stigma-free" By integrating global best practices with India's unique labour market challenges, menstrual leave can advance both gender justice and economic productivity.

The Role of Employers and Policymakers

Employers play a crucial role in creating effective menstrual leave policies through comprehensive education and awareness programs that reduce stigma and ensure fair implementation. "Key strategies include promoting menstrual health education, offering flexible work arrangements (remote work, wellness hours), integrating menstrual leave with existing sick leave policies, and fostering inclusive workplace cultures that position these policies as part of broader wellness initiatives rather than gender-specific benefits." "Companies like Zomato, Accenture, and Unilever have demonstrated that such supportive policies significantly improve employee retention, engagement, and overall productivity while reducing attrition rates."

"Governments must establish comprehensive legislative frameworks that include national menstrual leave policies (two paid days per month), financial incentives for employers (such as 30% tax discounts for SMEs), and mandatory workplace infrastructure improvements like sanitary product dispensers and rest areas." "Critical policy recommendations include integrating menstrual health into existing labour codes, launching de-stigmatisation campaigns through educational programs, establishing data monitoring systems through ESIC and EPFO, and extending protections to informal workers through platforms like the e-Shram portal." "The World Bank estimates that investing in menstrual health yields a 4:1 economic return through reduced absenteeism and increased productivity, making this an economically sound

⁴³ World Bank. (2023). Women's economic participation in South Asia: Breaking barriers.

⁴⁴ UNICEF. (2021). Break the Bloody Taboo initiative guidelines.

⁴⁵ Corporate case studies from Zomato, Accenture, and Unilever implementation reports.

⁴⁶ Reference to Bihar state regulations and the Occupational Safety, Health, and Working Conditions Code of 2020.

⁴⁷ Ministry of Women and Child Development. (2023). Scheme for menstrual health support at Anganwadis (Report No. WCD-18011/1/2023).

policy investment".48

"Despite progress toward gender equality, over 23% of working women in India report inadequate workplace support for menstrual health, contributing to productivity losses and occupational stress." Workplace education and awareness programs, combined with flexible work arrangements, have proven effective in reducing female dropout rates by 37%, particularly in high-pressure industries." However, experts caution that menstrual leave policies must be implemented alongside broader structural reforms to prevent unintended consequences, such as employer reluctance to hire women, emphasising the need for comprehensive approaches that treat women's health as a workplace priority rather than a barrier."

Challenges and Criticisms of Menstrual Leave Policies

Menstrual leave policies, despite their progressive intentions, face significant criticism for potentially reinforcing gender discrimination in hiring and promotion decisions. "Evidence from Japan, where menstrual leave has existed since 1947, shows that less than 10% of women utilise it due to fears of appearing "weak" or "uncommitted," while ILO research indicates a 5-8% drop in female hiring rates in countries with mandatory menstrual leave policies." "Women who take health-related leave, including menstrual leave, are 30% less likely to receive promotions and 20% less likely to be assigned high-stakes projects, creating barriers to career advancement and leadership opportunities." Additionally, "employers may offer lower wages to women perceived as "higher maintenance," with wage gaps increasing by 5-7% in sectors where menstrual leave is common compared to industries without such policies."

⁴⁸ World Bank. (2023). Economic returns on menstrual health investments.

⁴⁹ Dasgupta, S., & Sarkar, A. (2021). Menstrual Health and Workplace Productivity in India. Journal of Gender and Development.

⁵⁰ World Health Organization study on flexible workplace policies.

⁵¹ Haque, M., & Rahman, S. (2022). The Double-Edged Sword of Menstrual Leave Policies. International Journal of HRM.

⁵² Kawaguchi, A., & Miyazaki, H. (2020). Why Japan's Menstrual Leave Policy Fails Women. Journal of Asian Labor Studies; ILO. (2023). Women's Health Policies and Labour Market Outcomes.

⁵³ Harvard Business Review. (2022). Women's health leave and promotional barriers; McKinsey. (2021). Women in the Workplace: Breaking the Bias Barrier.

⁵⁴ Goldin, C. (2023). Career and Family: Women's Century-Long Journey Toward Equity; World Bank. (2023). Occupational segregation study.

The implementation of menstrual leave faces substantial cultural and social resistance, particularly in traditional or patriarchal societies where menstruation remains stigmatised as "impure" or inappropriate for public discussion. "Countries like South Korea require medical documentation for menstrual leave, creating bureaucratic barriers that discourage usage, while 15% of HR managers in Spain suspect policy misuse, leading to workplace tensions." "This resistance is compounded by coworker resentment, with 41% of male employees in U.S. technology firms opposing menstrual leave as an "unfair advantage," creating social stigma that forces many women to avoid taking leave altogether." "56"

The fundamental challenge lies in balancing health accommodation with gender neutrality to prevent unintended consequences that harm women's professional prospects. "Experts recommend adopting universal paid sick leave, flexible work arrangements, and wellness programs that address diverse health needs without specifically targeting gender, similar to Sweden's successful gender-neutral sick leave system." "Effective implementation requires comprehensive workplace education to normalise health discussions, transparent anti-discrimination policies, and cultural change initiatives that recognise biological differences without institutionalising them, ensuring that accommodations support rather than hinder women's career advancement". 58

The Statistical Data of the Survey

The questionnaire collected 110 responses from a varied sample of working women, students and the unemployed from various industries, mostly from Prayagraj, gathering information on their menstrual health experiences, workplace accommodations and attitudes toward official menstrual leave policy It also looked into concerns regarding potential employment discrimination, employer attitudes, and socio-cultural stigmas around menstruation.

The findings contribute to the broader discourse on gender-inclusive labour policies, advocating for workplace reforms that align with both employee health needs and

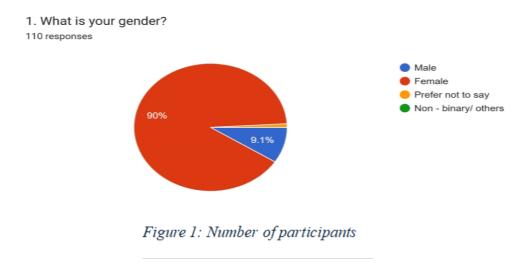
⁵⁵ Kim, Y., & Park, S. (2022). Barriers to Menstrual Leave in South Korea. Feminist Economics; Spain HR survey (2022).

⁵⁶ U.S. technology sector survey (2023) on menstrual leave policies.

⁵⁷ Organisation for Economic Co-operation and Development (OECD). (2022). Beyond Pink Collars: Designing Inclusive Workplaces.

⁵⁸ World Health Organization (WHO). (2023). Flexible Work and Gender Equity: A Global Review; International Labour Organization (ILO). (2023). Women's Health and Dignity at Work: Global Trends.

organisational efficiency. The summary of the survey is as follows:



The response from Figure 1 represents that out of 110 participants, 99 were women, whereas 10 were men, and 1 participant did not prefer to tell their gender.

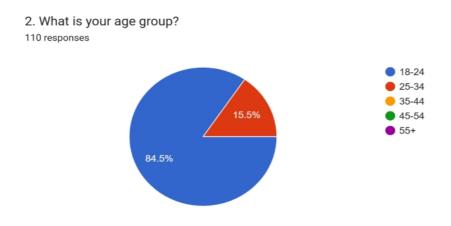


Figure 2: The age group of the participants

The response from Figure 2 shows that out of 110 participants, 93 are between 18 and 24, whereas 17 are between 25 and 34, which indicates the awareness among these age groups regarding menstrual leave.

3. What is your employment status? 110 responses Employed full-time Employed part-time Self-employed Unemployed Student Other (please specify):

Figure 3: Employment status of participants

The response from Figure 3 shows that out of 110 participants, 86 are students, 18 are full-time employed, 3 are self-employed, and the rest are either unemployed or part-time employed, showcasing the diversity in the employment status of respondents.



Figure 4: Current status of menstrual leave in the workplace

The response of Figure 4 shows that out of 110 participants, 101 people currently do not have menstrual leave in the workplace. Only 3 of them have menstrual leave, and 6 respondents were not sure about it.

5. Are you aware of the concept of menstruation leave? 110 responses

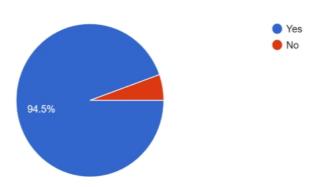


Figure 5: Awareness about menstruation leaves

The response of Figure 5 shows that out of 110 participants, 104 respondents are aware of the concept of menstruation leave, whereas only 6 respondents were unaware of it, which suggests that most of the respondents are well aware of the issue.

6. Do you believe menstruation leave is necessary for women in the workplace? 110 responses

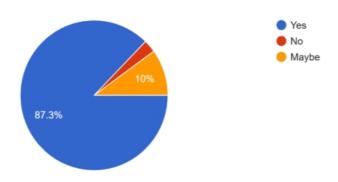


Figure 6: Necessity of menstruation leave in the workplace

The response of Figure 6 shows that out of 110 responses, 96 people believe that menstruation leave is necessary for women in the workplace, whereas 11 people think that maybe there can be menstruation leave.

110 responses

7. What do you think are the potential benefits of menstruation leave? (Select all that apply) 110 responses

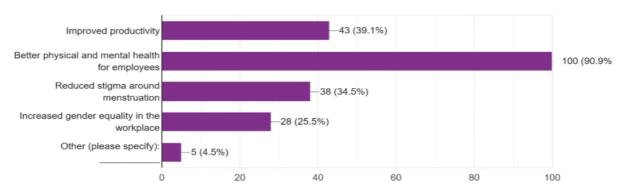


Figure 7: Benefits of menstruation leave

The response of Figure 7 showcased different benefits of menstruation leave, mostly better physical and mental health of female employees and improved productivity of female employees.

8. What concerns, if any, do you have about implementing menstruation leave? (Select all that apply)

Potential misuse of leave
Increased costs for employers
Stigmatization of women in the workplace
Difficulty in implementation and monitoring
Other (please specify):

-14 (12.7%)

0 20 40 60

Figure 8: Concerns in the implementation of menstruation leave

The response of Figure 8 shows that there are several issues in the implementation of menstruation leave, one of the biggest concerns is the difficulty in the implementation and monitoring of such a policy. Another concern is regarding the potential misuse of leave.

9. Do you think menstruation leave should be paid or unpaid? 110 responses

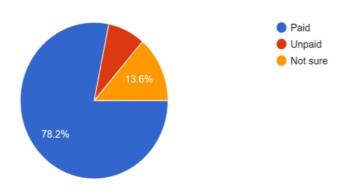


Figure 9: Paid or unpaid leave

The response of Figure 9 shows that out of 110 participants, 86 respondents supported paid menstruation leave, 15 people are not sure, whereas only 9 people have respondents have supported unpaid leave.

10. How many days of menstruation leave per month do you think would be reasonable? 110 responses

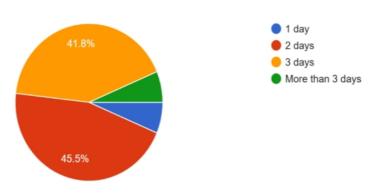


Figure 10: Duration for menstruation leave

The response of Figure 10 shows the reactions regarding the duration of leave, which would be reasonable for menstruation leave. Around 50 participants are in favour of 3 days, whereas 46 were in favour of 2 days.

11. Should menstruation leave be included in existing sick leave policies or treated as a separate category? 111 responses

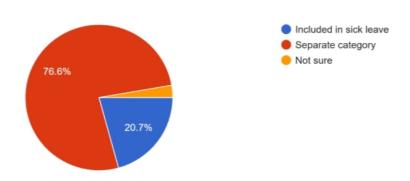


Figure 11: Category of Menstruation leave

The response of Figure 11 shows the reaction regarding the category in which menstruation leave should fall. Out of 111 reactions, 85 respondents support a separate category for menstruation leave, whereas 23 suggest it can be included in sick leave.

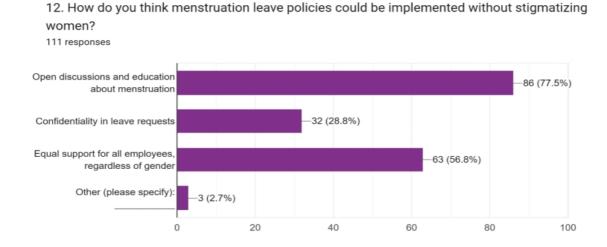


Figure 12: Suggestions on the implementation

The response of Figure 12 suggests that more people believe that discussion and education about menstruation will help in the implementation of the policy. Whereas equal support for all employees, regardless of their gender, is another better option.

13. Do you think menstruation leave could contribute to gender equality in the workplace? 111 responses

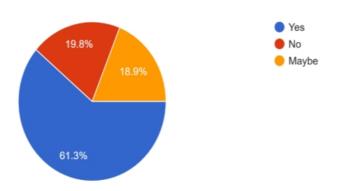


Figure 13: Contribution to gender equality

The response of Figure 13 shows that out of 111 respondents, 68 reactions suggest that it will contribute to gender equality, whereas 22 reactions believe that it will have no contribution toward gender equality. 19 respondents think that maybe it would contribute to it.

14. Should menstruation leave policies be mandated by law, or should they be left to individual employers to decide?

111 responses

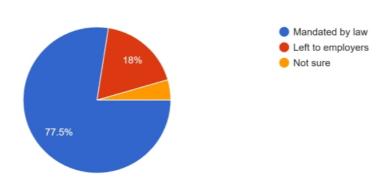


Figure 14: Mandate of menstruation leave

The response of Figure 13 suggests that 86 respondents support the implementation of menstruation leave mandated by law, whereas 20 people are of the view that it should be left to the discretion of employers.

15. How do you think menstruation leave policies would impact small businesses or startups?

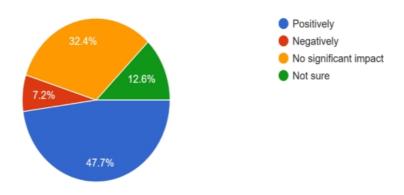


Figure 15: Impact on small businesses and startups

The response of Figure 15 shows that there is a diverse reaction of respondents on the impact of menstruation leave. 53 people believe it will affect positively, 36 people believe that it will have a significant impact, whereas only 8 people believe that it will affect negatively.

16. What role, if any, should governments play in supporting menstruation leave policies?

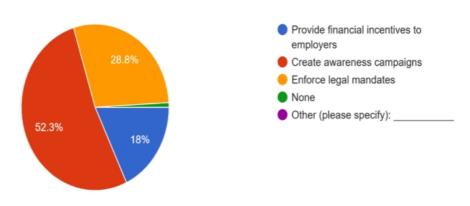


Figure 16: Role of government

The response of Figure 16 showcases the expectations of respondents from the government in support of menstruation leave. 58 reactions suggest that the government should create awareness campaigns, other suggests that they should enforce a legal mandate, and some believe that providing financial incentives to employees is a way to go.

Suggestions

Menstrual leave policies must be strategically integrated into comprehensive workplace equality frameworks to avoid unintended consequences while promoting gender equity. "Successful implementation requires combining menstrual leave with broader equal pay strategies, career progression initiatives, and diversity programs that normalise health accommodations without creating penalties for employees." "Key strategies include treating menstrual leave similarly to other medical policies, implementing bias-free performance metrics that prioritise output quality over attendance, linking leave policies to leadership development programs, and ensuring gender-neutral language that includes transgender men and non-binary individuals who menstruate." "Companies like Salesforce and Unilever have demonstrated success by integrating menstrual health policies with mentorship programs and regular audits to track promotion rates, resulting in 30% more women in senior positions and increased female leadership retention". 61

"The future of women's health policies extends beyond menstrual leave to encompass holistic approaches addressing menopause support, fertility treatments, mental health services, and chronic conditions like endometriosis and PCOS throughout women's career lifecycles."62 "Global standardisation efforts are emerging through the International Labour Organisation's guidelines and the European Parliament's 2023 resolution calling for minimum paid leave standards, though implementation faces challenges from cultural resistance and concerns about reinforcing gender stereotypes."63 "Success depends on intersectional approaches that provide customised support for underserved populations, comprehensive health benefits coverage, ongoing education to eliminate stigma, and international cooperation through frameworks like the UN Sustainable Development Goals to establish menstrual health as a universal workplace right."64

⁵⁹ Garg, S., et al. (2021). Menstrual Health and Workplace Productivity. Journal of Women's Health; ILO. (2023). Gender Equality and Labour Rights.

⁶⁰ Human Rights Watch. (2023). Trans-Inclusive Workplace Policies; Williams, J. (2021). The Equality Paradox in Workplace Policies. Harvard Business Review.

⁶¹ McKinsey & Lean In. (2023). Women in the Workplace Report; Deloitte. (2022). Women in the Workplace: The Role of Policy in Career Advancement.

⁶² WHO. (2023). Women's Health in the Workplace: A Global Priority; Harvard Business Review. (2023). How Fertility Benefits Are Reshaping Retention.

⁶³ ILO. (2024). Menstrual Health and Dignity at Work: Global Guidelines; Euronews. (2023). EU Menstrual Leave Proposal: What's Next?

⁶⁴ UN Women. (2023). SDGs and Gender Equity in Labor Policies; World Economic Forum. (2024). The Case for Standardizing Menstrual Leave.

CONCLUSION

Menstrual leave remains a contentious yet evolving policy issue in India, where federal law does not mandate such leave, but "several states like Bihar (since 1992) and Kerala have implemented policies for government sector women, while private companies including Zomato, Swiggy, and Byju's have adopted paid menstrual leave as progressive wellness initiatives." Research indicates that when properly implemented, menstrual leave can reduce presenteeism, increase productivity, and improve employee well-being, with companies like Zomato reporting positive feedback from female employees regarding higher morale and reduced stigma." However, "critics warn that without robust anti-discrimination protections, these policies risk perpetuating gender stereotypes and creating hiring biases that portray women as less reliable workers, while the majority of Indian women working in the informal sector remain unprotected by such policies, exacerbating disparities between formal and informal workers."

"For menstrual leave to significantly improve gender equality, it must be integrated into comprehensive strategies that include anti-discrimination laws, pay equity measures, and broader workplace health initiatives, as policy alone proves insufficient without societal attitude changes." International examples from "Spain and Japan demonstrate that even where menstrual leave is legally available, cultural stigma often prevents women from utilizing it, highlighting the need for gender-sensitive policy design that incorporates employer education and integration with existing labor rights." Ultimately, "successful implementation requires discretionary, gender-neutral policies combined with flexible work arrangements to avoid segregation and backlash, while future research should examine the long-term employment impacts of such policies, particularly in developing countries like India where informal labor markets and patriarchal customs challenge gender-sensitive reforms".

⁶⁵ Sahoo, N. (2022). Menstruation Leave Policies in India: A State-Wise Analysis. Journal of Gender Studies; ET HRWorld. (2020). Why Indian Companies Are Introducing Period Leave Policies.

⁶⁶ ILO. (2023). Menstrual Health and the Future of Work in India; ET HRWorld (2020). Why Indian Companies Are Introducing Period Leave Policies.

⁶⁷ Desai, R. (2021). Menstrual Leave in India: Empowerment or Exclusion? Economic & Political Weekly; Dasgupta, P., & Sarkar, S. (2020). Menstrual Health and Workplace Policies in India.

⁶⁸ Menon, A., & Sinha, K. (2022). Gender Equality and Labor Reforms in India; The Hindu. (2023). The Pros and Cons of Menstrual Leave in Indian Workplaces.

⁶⁹ BBC (2023). The Global Debate on Menstruation Leave; Menon & Sinha (2022). Gender-sensitive policy design recommendations.

⁷⁰ ILO (2023). Menstrual Health and the Future of Work; Dasgupta & Sarkar (2020). Informal sector analysis and policy integration needs.