Proposed Sanitary Products (Free Provision) (Scotland) Bill

Page 2: About you

Are you responding as an individual or on behalf of an organisation?

on behalf of an organisation

Which of the following best describes you? (If you are a professional or academic, but not in a subject relevant to the consultation, please choose "Member of the public".)

No Response

Please select the category which best describes your organisation

Public sector body (Scottish/UK Government/Government agency, local authority, NDPB)

Please choose one of the following; if you choose the first option, please provide your name or the name of your organisation as you wish it to be published.

I am content for this response to be attributed to me or my organisation

Please insert your name or the name of your organisation. If you choose the first option above, this should be the name as you wish it to be published. If you choose the second or third option, a name is still required, but it will not be published.

Glasgow City Council

Please provide details of a way in which we can contact you if there are queries regarding your response. Email is preferred but you can also provide a postal address or phone number. We will not publish these details.

Page 7: Your views on the proposal

Q1. Which of the following best expresses your view of the proposed Bill?

Partially supportive

Q1. Which of the following best expresses your view of the proposed Bill?

Please explain the reasons for your response

universal free provision is not something that would be necessary. Glasgow City Council is currently working towards implementation of sanitary provision within schools and extension of this at a later date.

Page 8: Universal provision of sanitary products

Q2. Do you think a universal, card-based system (modelled on the c-card system for free condoms) would be an effective means of providing sanitary products for free to those who need them?

Unsure

Please explain the reasons for your response

The C-card is on a smaller scale to a card that would be for sanitary products. There would be a relatively substantial cost for administration under this system and difficult to target to achieve the policy aim of girls at schools, colleges and universities. There are more discreet and dignified mechanisms for providing sanitary products.

Q3. Which of the following best expresses your view in relation to a card-based system?

There is no need for a card scheme

Please explain the reasons for your response. We do not believe that a card system is the way forward.

Q4. Do you have a view on which locations would be most suitable for dispensing free sanitary products (e.g. GP surgeries, pharmacies, community centres, health clinics)?

It is likely that GPs would charge NHS for this, as would pharmacies. The policy intention is for free access for those experiencing period poverty including at schools, colleges and universities. The estimates for costs is based on an extremely low uptake – 5% to 20%.

Locations would also be varied and would really be dependent on where women spend majority of time ie. Work, school etc.

Page 11: Schools, colleges and universities

Q5. Do you agree that there should be specific obligations on schools, colleges and universities to make sanitary products available for free (via dispensers in toilets)?

Unsure

Please explain the reasons for your response

We agree that schools, colleges and universities should make sanitary products available for free but we do not agree that the method of dispensing should be legislated for. In a school setting, there would be a need for specially designed dispensers. There would be increased demands for refilling and the some of the girls in

Q5. Do you agree that there should be specific obligations on schools, colleges and universities to make sanitary products available for free (via dispensers in toilets)?

school we consulted felt that there would be potential for increased vandalism. Dispensers would have a negative environmental impact as there would be increased packaging. There are easier, more discreet and cost effective ways to dispense than vending machines.

Page 12: Personal experience (questions 6 and 7 are for individual respondents only)

Q6. Have you ever struggled to access or afford sanitary products during menstruation? (e.g.financial barriers, unexpected circumstances, health issues)

Not applicable: I do not need or use sanitary products

Q7. If sanitary products were available for free, which of the following would apply to you?

Not applicable: I do not need or use sanitary products

Page 14: Financial implications

Q8. Taking account of both costs and potential savings, what financial impact would you expect the proposed Bill to have on:

	Significant increase in cost	Some increase in cost	Broadly cost- neutral	Some reduction in cost	Significant reduction in cost	Unsure
(a) Government and the public sector (e.g. local authorities, the NHS)	х					
(b) Colleges and universities	Х					
(c) Businesses (including suppliers/retailers of sanitary products)						x
(d) Individuals (including consumers of sanitary products)					x	

Q9. Are there ways in which the Bill could achieve its aim more cost-effectively (e.g. by reducing costs or increasing savings)?

Universal free access is not necessary.

Q9. Are there ways in which the Bill could achieve its aim more cost-effectively (e.g. by reducing costs or increasing savings)?

The costs in the notes are based on a very modest uptake. There is no clear evidence base for the assertion that women would take less time off work because they can't afford sanitary products. Similarly, while there is a correlation between attendance and attainment, there is little evidence of girls not coming to school because of affordability for sanitary products. This is not denying that 'period poverty' exists rather it is the lack of evidence of the scale of this. There is evidence of girls missing schools when they have periods due to pain and discomfort.

It is suggested in the notes that savings would be generated from NHS through reduction in toxic shock syndrome, yet the figures show less than 10 admissions a year for this. There was no evidence base offered for the potential reduction in prescriptions, hospital admissions and other medical appointments to treat infections related to poor access to sanitary products.

Page 16: Equalities

Q10. What overall impact is the proposed Bill likely to have on equality, taking account of the following protected characteristics (under the Equality Act 2010): age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation?

Slightly positive

Q11. In what ways could any negative impact of the proposed Bill on equality be minimised or avoided?

No Response

Page 18: Sustainability

Q12. Do you consider that the proposed Bill can be delivered sustainably i.e. without having likely future disproportionate economic, social and/or environmental impacts?

No

Please explain the reasons for your response: Reliance on vending machines for dispensing would have a disproportionate impact on the environment.

Page 19: General

Q13. Do you have any other comments or suggestions on the proposal?

Overall, we are very supportive of the policy intention to reduce the impact of period poverty for those experiencing poverty. We accept that there are girls in schools whose families are experiencing significant levels of poverty and who would benefit from free access to sanitary products. We are very supportive of providing access to free sanitary products for girls at schools, colleges and universities. However, we should

Q13. Do you have any other comments or suggestions on the proposal?

not legislate for the method of dispensing or universality of access.

In Glasgow, we will be working with girls in schools to explore the best ways to dispense free sanitary products which meets their needs.