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### **The Problem: The "Access Gap" in Maryland**

While Maryland has taken strides in school settings, "Period Poverty" remains a critical barrier for adults in public spaces.

- **1 in 9:** Maryland women and girls (ages 12–44) live below the Federal Poverty Level.
- **64%:** Of low-income women report being unable to afford menstrual products at least once in the past year (*Journal of Obstetrics & Gynecology*).
- **The "Biological Penalty":** Unlike soap or toilet paper, menstrual products are often treated as "luxury items" in public infrastructure, forcing low-income individuals to choose between hygiene and other basic needs like food or fare.

### **The Clinical Risk: Why This Matters to Healthcare**

When products are unavailable or unaffordable, individuals resort to "product stretching" or unsafe substitutes.

- **Infection Risk:** Prolonged use of tampons or pads increases the risk of **Bacterial Vaginosis (BV)** and **Toxic Shock Syndrome (TSS)**.
- **Unsafe Substitutes:** Use of rags, paper towels, or newspapers leads to skin irritation and urogenital infections.
- **Systemic Burden:** These preventable infections lead to increased **Emergency Department (ED) visits**, placing an avoidable financial and operational strain on Maryland's healthcare system.

### **The Economic Impact: Participation & Productivity**

Access to hygiene is a prerequisite for a functional workforce and an inclusive economy.

- **Attendance:** Lack of access is a leading cause of missed shifts for hourly workers and missed appointments for social services.
- **Public Dignity:** Public buildings (libraries, transit hubs, government offices) are meant to be accessible to all. Without basic hygiene provisions, these spaces are functionally "off-limits" for those experiencing a cycle.

### **The Solution: HB 0941**

This bill aligns Maryland's public infrastructure with modern health standards.

1. **Parity:** Treats menstrual products with the same "standard of care" as toilet paper and soap.
2. **Continuity:** Bridges the gap between the school-based mandates and the adult public sphere.
3. **Fiscal Prudence:** Preventative hygiene is significantly less expensive than treating the clinical complications of period poverty.

**Recommendation: FAVORABLE Report for HB 0941**

**Selected References & Data Sources**

- **Kuhlmann, A. S., et al. (2019).** "Unmet Menstrual Hygiene Needs Among Low-Income Women." *Obstetrics & Gynecology*, 133(2), 238–244.  
[doi:10.1097/AOG.0000000000003060](https://doi.org/10.1097/AOG.0000000000003060).
  - *Key Finding:* 64% of low-income women were unable to afford needed supplies in the previous year; 21% experienced this monthly.
- **Cardoso, L. F., et al. (2021).** "Period poverty and mental health implications among college-aged women in the United States." *BMC Women's Health*, 21(14).  
[doi:10.1186/s12905-020-01149-5](https://doi.org/10.1186/s12905-020-01149-5).
  - *Key Finding:* 14.2% of college-aged women experienced period poverty in the past year, with significant correlations to depression and anxiety.
- **Alliance for Period Supplies (2025).** "State of Maryland Period Poverty Report."  
[Maryland.pdf](#)
  - *Key Finding:* 1 in 9 women and girls in Maryland live below the Federal Poverty Level.
- **Thinx & PERIOD (2021).** "State of the Period 2021: The impact of period poverty on U.S. students."
  - *Key Finding:* 23% of students have struggled to afford period products; 16% have worn a product longer than the recommended 4–8 hours due to lack of access.