



Menstruation: a Journey Supporting Clients Transition to Adulthood.



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Lets talk Menstruation



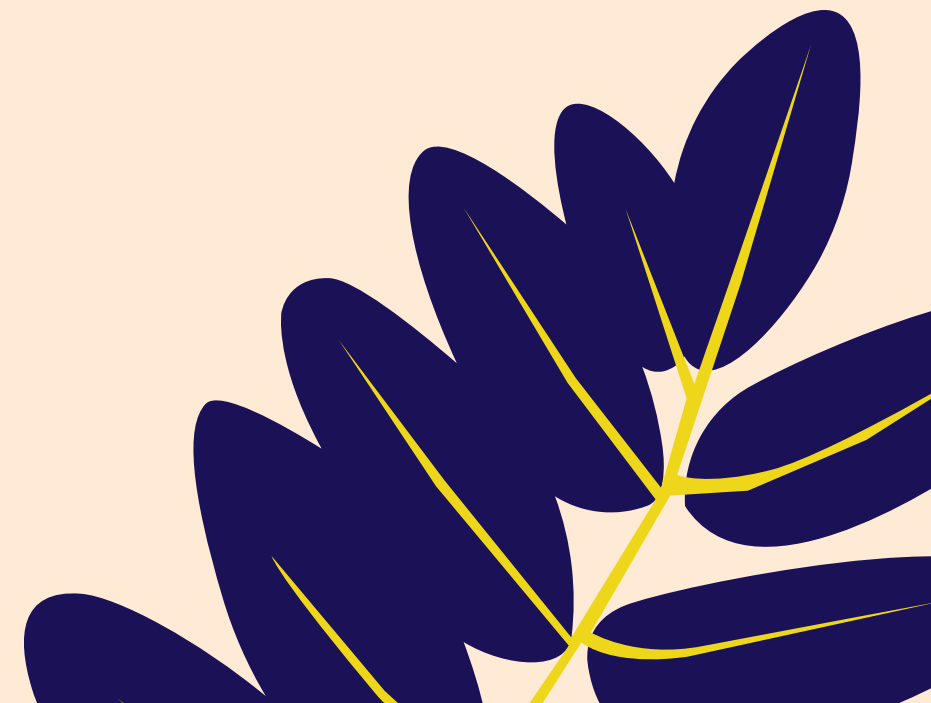
**Thank you for participating and
sharing your experience with
Menstruation**





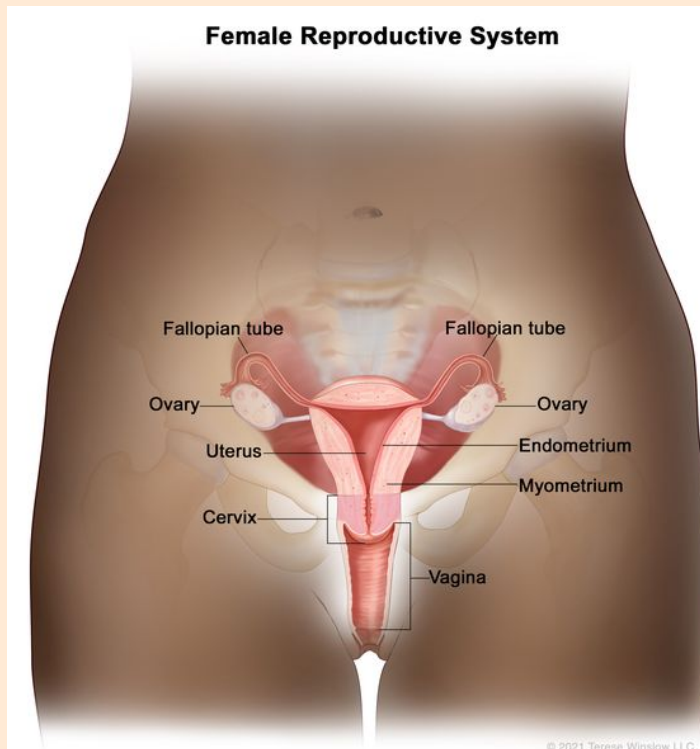
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What is Menstration?



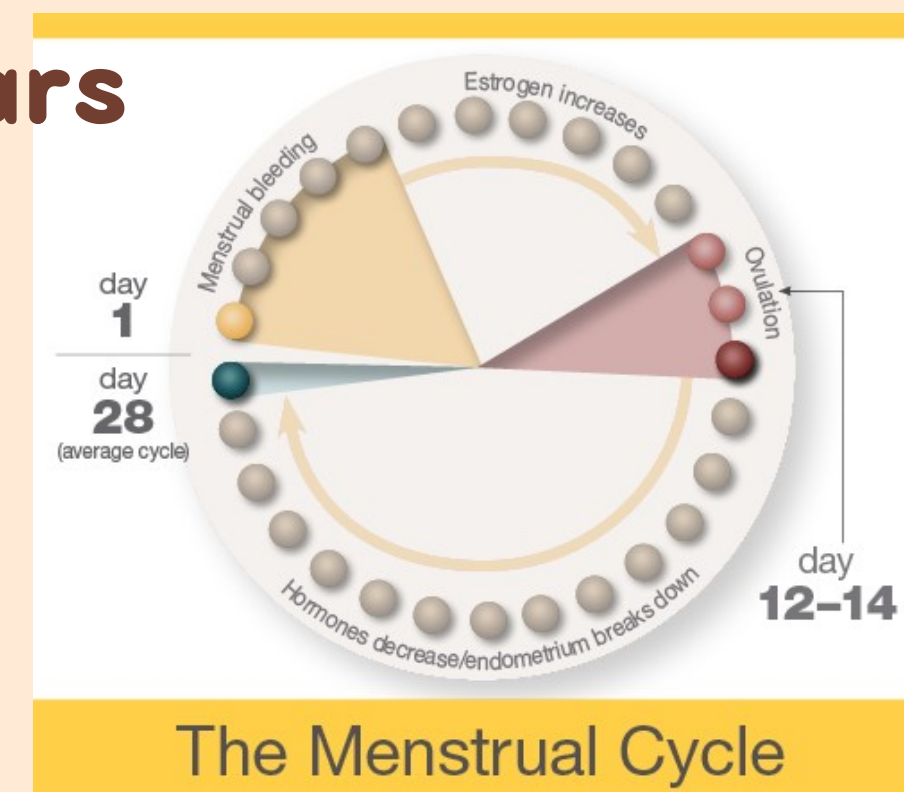
Menstruation Basics

- The menstrual cycle is a monthly process where the female hormones
 - stimulate ovaries to release eggs
 - thicken the lining of the uterus to support pregnancy
 - shed the lining if pregnancy does not happen
- The first period is known as menarche, and the final is called menopause.



Menstruation Basics

- **Menstruation can start between 8-15 years old. In the US average age is 12 years old.**
 - **Contact a doctor if it happens before eight years old, has not occurred by 15 years old, or if they have not started their period three years from when their breast starts to grow.**
- **The menstrual cycle is about 28 days, with 5-7 days of bleeding.**



Other things to keep in mind with menstruation

- How often should one change their pad, tampon, cup, sponge, period panties, etc.?
 - Follow instructions for your product, or it's recommended to change or rinse before the product is soaked or full.
 - Most women change their pads every few hours.
 - A tampon should be worn for at most 8 hours.



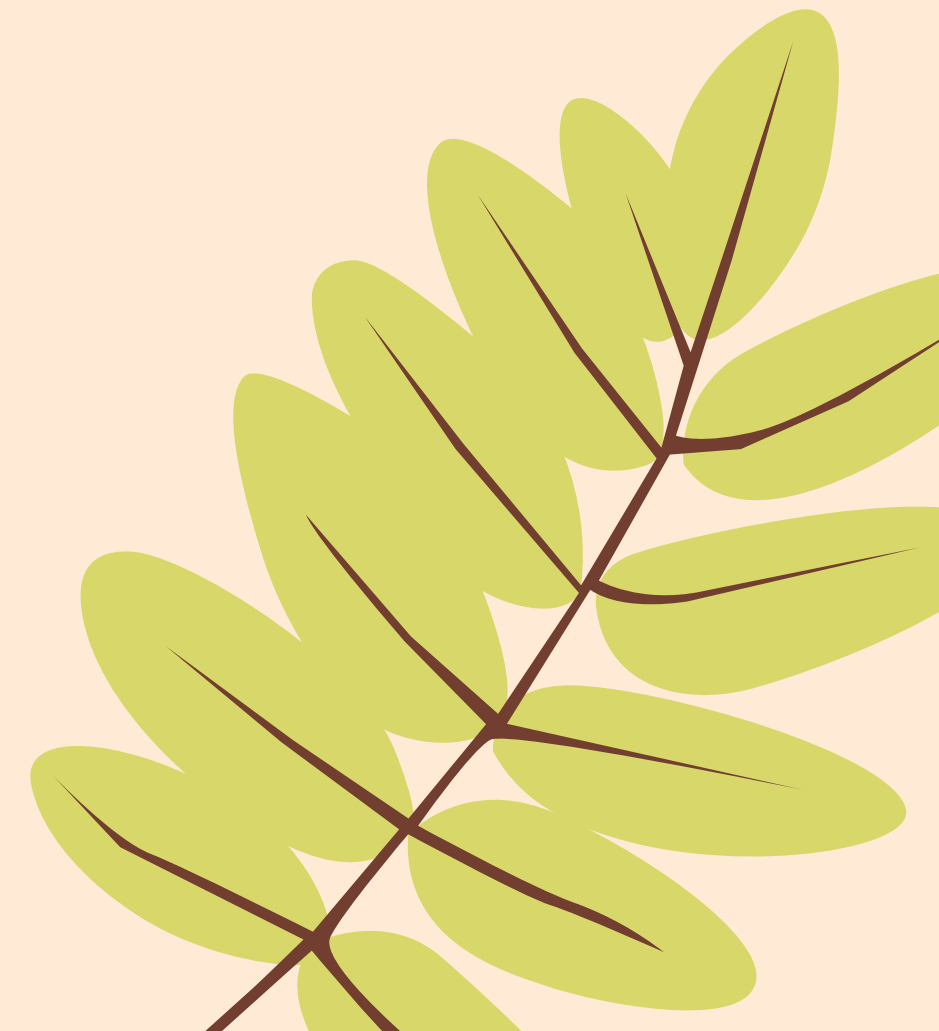
Other things to keep in mind with menstruation Cont

- How often should one change their pad, tampon, cup, sponge, period panties, etc.?
 - Menstrual cups and sponges may only need to be rinsed once or twice daily.
 -
 - Period panties (underwear with washable menstrual pads sewn in) usually last about a day, depending on the flow.




Things to keep in mind: Menstruation's possible impacts on health

- What effects can Menstruation have on your health?
 - Anemia
 - Asthma
 - Depression
 - Irritable Bowel Syndrome (IBS)
 - problems getting pregnant





Things to keep in mind: When to contact a doctor about symptoms during menstruation

- Per (Find source)
 - if one feels dizzy, lightheaded, weak, or tired, or if you have chest pain or trouble breathing during or after your period?
 - If you bleed through one or more pads or tampons in 2 hours.
 - If your period's pain, cramps, and heavy bleeding make you miss school, work, or other daily activities.
- 

Premenstrual syndrome-PMS

- PMS is a combination of symptoms many women get about a week or two before their period.
 - Combination of physical and emotional symptoms that many women get after ovulation and before the start of their menstrual period
- There is no definitive answer on how many physical or behavioral symptoms there are, but some sources state there are more than 150



Most Common PMS Symptoms

Emotional symptoms include

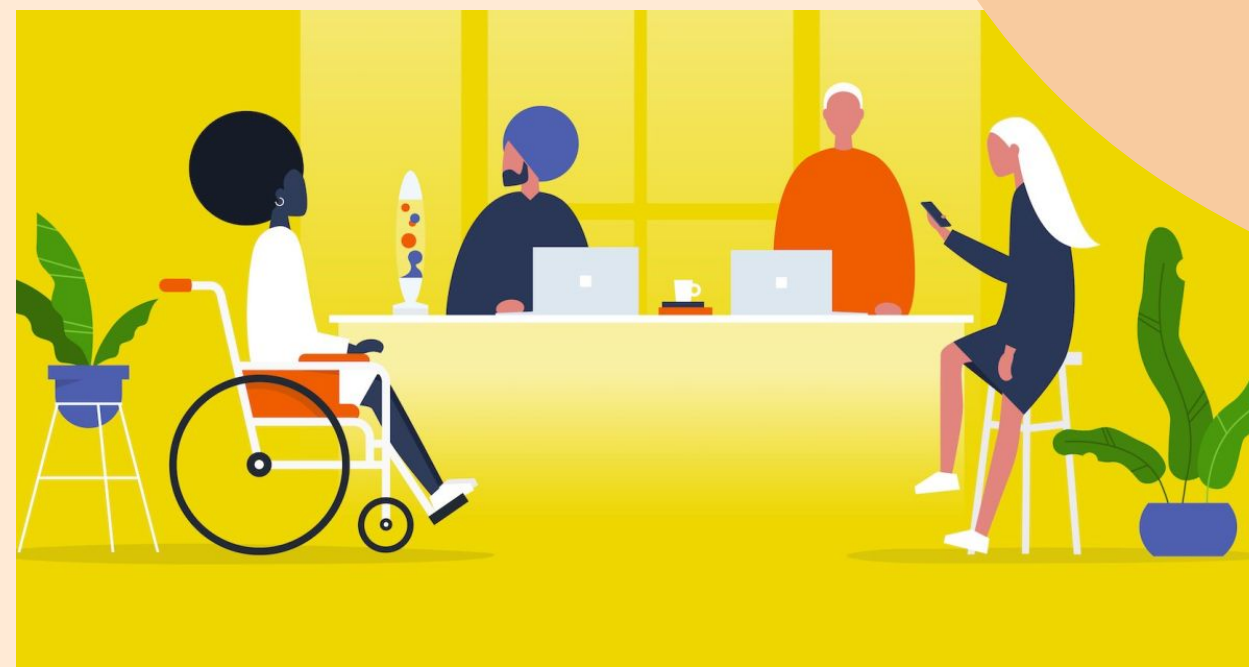
- depression
- angry outbursts
- irritability
- crying spells
- anxiety
- confusion
- social withdrawal
- poor concentration
- insomnia
- increased nap-taking
- changes in sexual desire

Physical symptoms include

- thirst and appetite changes (food cravings)
- breast tenderness
- bloating and weight gain
- headache
- swelling of the hands or feet
- aches and pains
- fatigue
- skin problems
- gastrointestinal symptoms
- abdominal pain

03

**What role does
cultural
competency
play in
menstruation?**



Cultural Humility

Cultural Humility:


- A different take on cultural competence
- Cultural Competence focuses on knowing specific cultures and demonstrates that there is some mastery.
- Cultural Humility is a lifelong learning approach demonstrating openness, reflection, and self-awareness.

Societal Views on Menstruation

- Periods are still taboo in many contexts in low, middle, and high-income worlds.
- Wilbur et.al
 - Regular menstruation is a sign of health and fertility; it is inherently female. However, drawing on feminist theory, femininity is linked to beauty, freshness, and cleanliness [8]; these are opposed to the qualities associated with menstruation: dirty, bloody, and smelly

Menstruation and Disability

- Disability also carries a stigma, so disabled people may face layers of discrimination when they are menstruating.
- Wilbur et. al. There is a widespread misconception that disabled people are asexual, so they do not receive information on sexual and reproductive health or menstrual hygiene.




04

Starting the
start the
conversation.





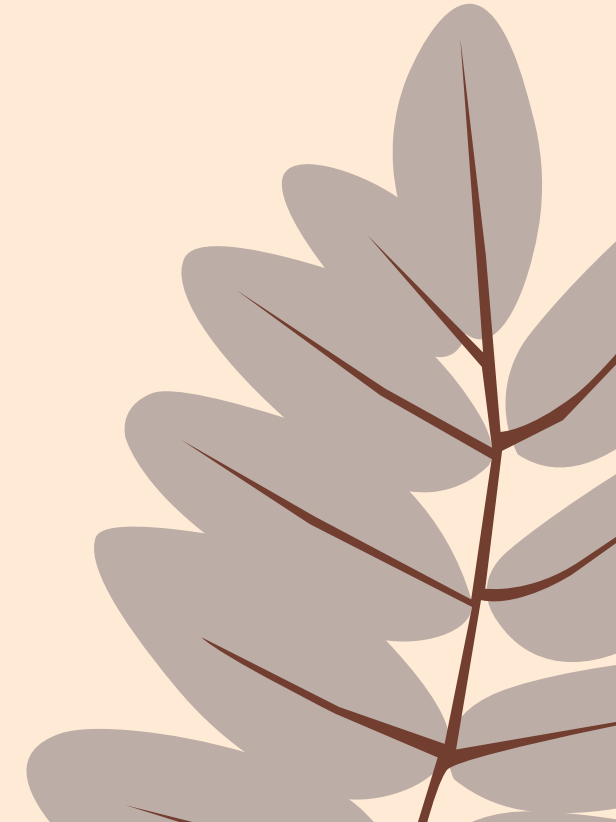
Are We Ready to Start Discussing Menstruation?

- Do you feel comfortable asking about this subject?
 - If there are reservations, you can reflect on what makes you feel nervous, uncomfortable, awkward, etc.
 - Do you understand your client's goal for adulthood?
 - Has the child started to master or work on other multiple-step ADLs (shoelace tying, brushing teeth, cutting with fork and knife, bathing, perineal care, etc.?)
- 



Are you ready to start discussing menstruation with your client's family?

Things to keep in mind as a clinician


- Would you happen to have access to your client's other providers who can help with collaboration? School teacher, speech therapist, ABA, or psychologist?
 - Also, check in with your OT staff to ask if anyone has worked on MHM, what resources they have, or what they have tried.
- 

Role Play For Start the Conversation

- I wanted to check in about Sussies IEP. Does her schooling focus on self-help skills, continuing higher education, or entering the workforce?
- Hey Jane, we have been working together on different ADLs. Susie is now 8, and I wanted to see if you were interested in targeting menstruation hygiene and other puberty-related goals.
 - Have you started to see signs of puberty in Suisse? Such as hair on her legs, pubic hair, changes in emotions, or growth in her breast?



Suggested prompts to start the conversation

- Does anyone want to share other ways they have brought up the conversation?
 - How did it feel about role-playing?
 - Did you experience any physical responses?
- 

Why is starting this conversation important?

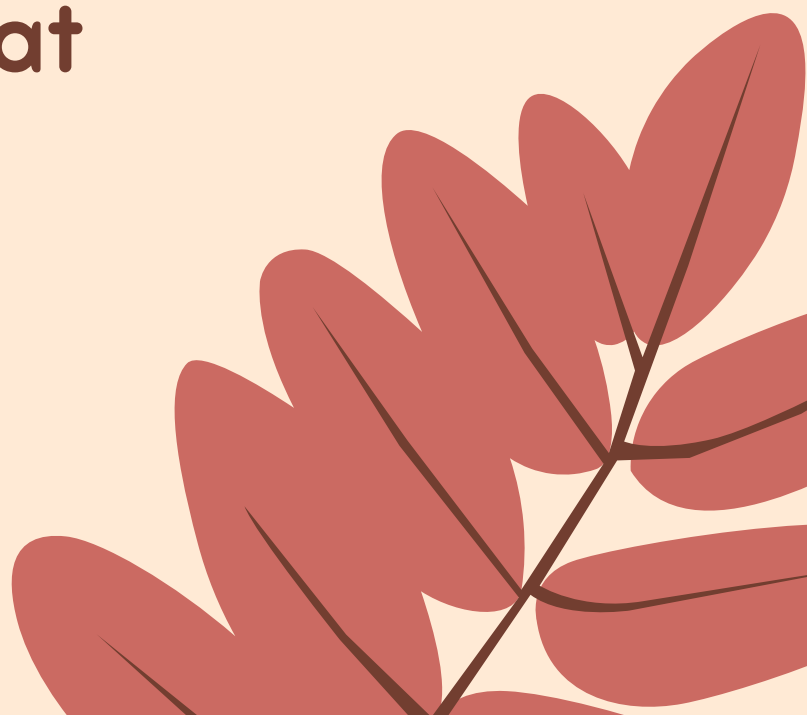
- Periods and people with disabilities' sexual health are taboo in our society.
- Wilbur et.al Many pre-pubescent girls do not receive information about menstruation, so their first menstrual cycle can be a frightening experience. In India, a cross-sectional study of 387 school-going girls reported that only 37% of them were aware of menstruation before menarche.

Why is starting this conversation important?

Sommer et.al Girls have indicated receiving inadequate guidance before their first menstrual period and experiencing fear, shame, and embarrassment in managing menstruation, particularly while in school [4,6,7,17,18].




Why is starting this conversation important?

- It helps families think about their current team and how that team can support their children to meet their goals.
 - We are helping each team member be accountable and family-centered
 - Ensures that we do not delay planning and that things do not slip through the cracks.
- 



Occupational Therapy's unique role within the conversation

- As OTs, we are always thinking of how to help our clients gain skills to take care of themselves, engage in occupations important to them and their families, and succeed in various environments.
 - We can help families start planning for adulthood; this can help them re-evaluate goal areas and overall goals for their child and may allow them to understand the benefit of adaptations or modifications.
- 



05

Goals for Feminine hygiene



Assessing Skills Using Strength-Based Approach

- What is a strength-based approach?
 - The problem and the person are separate; however, the problem is never minimized.
 - Views situations realistically and looks for opportunities to complement and support existing strengths/capacities instead of staying focused on the problem or concern.

Assessing Skills Using Strength-Based Approach

- What is a strength-based approach?
 - Uses questions to identify what works for the child and how it works so that those strategies can be continued and developed to match the child's abilities.
 - Strengths can be defined as a child's intellectual, physical, and interpersonal skills and capacities,

Assessing Skills Using Strength-Based Approach

- Strength-based approach is NOT about positively describing a child's learning and development and neglecting to identify areas for further development and areas of concern.
- Nor is it about framing the learning and development message one way for families and another way for professionals - it's about the consistent sharing of information.

Underlying Principles of Strength-Based Approach

- All children have strengths and abilities.
- Children grow and develop from their strengths and abilities.
- The problem is the problem—the child is not the problem.
- When children and those around them (including professionals) appreciate and understand the child's strengths, he/she is better able to learn and develop.

Understanding learning styles

- Understanding learning styles helps to inform educators about the differences in how children learn or solve problems.

Table 4: Intelligences and learning styles, Gardner, 1983

| Intelligence type | Preferred learning style evidenced by |
|----------------------|--|
| Verbal-Linguistic | <ul style="list-style-type: none">• words and language |
| Logical-Mathematical | <ul style="list-style-type: none">• numbers and logic, sequencing, patterns |
| Musical-Rhythmical | <ul style="list-style-type: none">• music, sounds, rhythm |
| Body-Kinaesthetic | <ul style="list-style-type: none">• physical experience and movement, touch and feel |
| Visual-Spatial | <ul style="list-style-type: none">• pictures, shapes, images and 3D space |
| Interpersonal | <ul style="list-style-type: none">• other people's feelings, human contact, cooperation, communication |
| Intrapersonal | <ul style="list-style-type: none">• self-awareness, self-reflection, self-discovery |

Client Factors Needed to Engage in Menstruation Hygiene Management?

- Person factors
 - Mental Functions
 - Higher cognition – Metacognition, mental flexibility, judgment, executive functioning, Memory
 - Global Mental Functions
 - Temperament and personality: self-control, self-expression, confidence, motivation, impulse control

Client Factors Needed to Engage in Menstruation Hygiene Management?

- **Person factors**

- **Sensory Function**

- Visual, pain, interception

- **Muscle factors**

- Muscle power, muscle tone

- **Body Functions**

- Interoception , pain

Functional Skill Areas in Menstruation Hygiene Management

- **Safety Skills**
 - Cognition and perspective-taking, interoception, pain
- **Social Skills**
 - Metacognition (perspective-taking), impulse control, knowledge about social norms or rules
- **Putting on and taking off the feminine pad**
 - Fine motor skills, cognitive skills, motor planning, attention,
- **How to identify when to change a pad**
 - interoception, awareness, cognition, interoception
- **Does anyone want to share any other areas or skills?**

Activity Analysis of MHM

Donning pad

1. Bring a pad with you
2. Go to the restroom
3. choose a stall or go over to the toilet
4. Pull pants down
5. Sit down on the toilet
6. Open pad
7. Pull the pad off the wrapper
8. Remove wing stickers
9. Put a pad on underwear
10. wrap wings around underwear
11. Throw away wrapper
12. Wipe yourself
13. Pull up underwear
14. Pull up pants
15. Possibly flushing the toilet
16. walk to the sink
17. Wash hands



Activity Analysis of MHM

doffing pad

1. Bring Pad with you
2. Going to the restroom
3. Go into a stall or toilet
4. Pull pants down
5. Sit on a toilet, checking to see if the pad is dirty. If yes, continue if no, skip stepping 11
6. Pull toilet paper off the roll
7. Pull the dirty pad off the underwear
8. Wrapping pad in toilet paper
9. Throwing away dirty pad
10. Donning pad steps 6-11 (6 more steps)
11. Wipe yourself if needed
12. Pull up underwear
13. Pull up pants
14. Flushing toilet
15. Washing hands



Feminine hygiene

Case A

- It was 8 years 9 months when we started a menstruation Hygiene goal (MHM).
- She is diagnosed with ASD and can say words verbally but cannot effectively communicate her needs or wants. She just received an AAC.
- She was working on or has met goals for multiple-step ADLs.
- She enjoys swinging, cuddling, iPad, Yo GABA GABA, crafts, and songs.
- She is intelligent, patient, and has good frustration tolerance.
- We worked on MHM for about 3 years



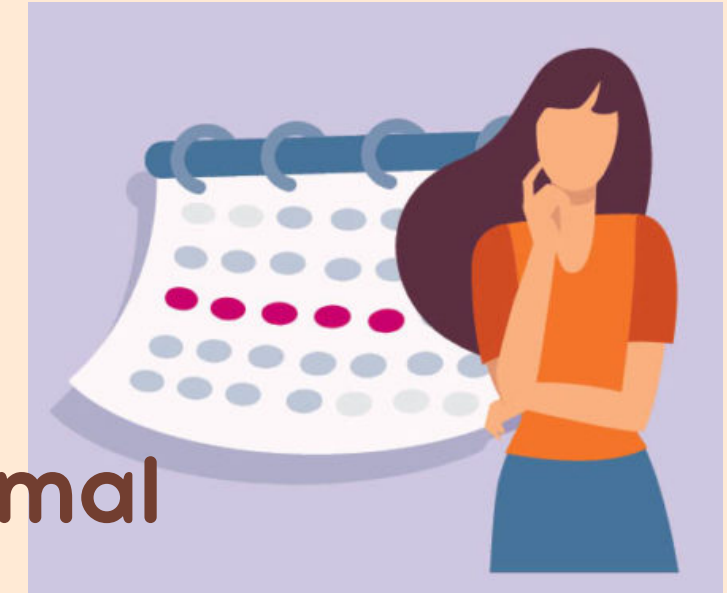
Feminine hygiene

Case A POC

- **LT In 6 months, A will be able to complete preparing a feminine hygiene pad with moderate assistance (2018)**
 - **In 3 months, the Child will be able complete 2 out of 8 steps of preparing a feminine hygiene pad (i.e., open feminine hygiene pad and pull off strips) in 3 out of 4 opportunities.**
 - **In 3 months, the Child will improve self-help skills by preparing a feminine hygiene pad by being able to wrap the wings of the famine pad to the underwear she is wearing with 2-3 verbal cues in 2 out of 4 opportunities.**


Feminine hygiene Case A

- In 3 months, the Child will be able to correctly identify a dirty pad and a clean pad with minimal assistance in 3 out of 4 opportunities.
- In 6 months, A will be able to complete preparing a feminine hygiene pad with supervision
 - ST 3.2021-In 3 months, the Child will be able to remove and wrap feminine hygiene pad in toilet paper or wrapper with minimal assistance and 2 verbal cues in 3 out of 4 opportunities





Feminine hygiene Case B

- It was 8 years and 11 months when we started a menstruation Hygiene goal (MHM).
 - She is diagnosed with ASD, communicates verbally, and can do so effectively and consistently.
 - She is in a general education class but has an IEP.
 - She enjoys science, movies/video games, drawing/art, and singing songs.
 - She is curious, enjoys learning about new things, and is strong-willed.
 - Currently working on MHM for 6 months
- 

Feminine hygiene Case B

- In 6 months, B will independently complete all age-appropriate ADL's.
 - In 3 months, B will be able to orient a feminine hygiene pad on underwear placed on the table with moderate assistance in 3 out of 5 opportunities.
 - In 3 months, B will be able to improve her perspective-taking and personal safety skills by identifying who is a safe person to talk to about puberty and who is not safe in 3 out of 4 opportunities with no more than two verbal cues.



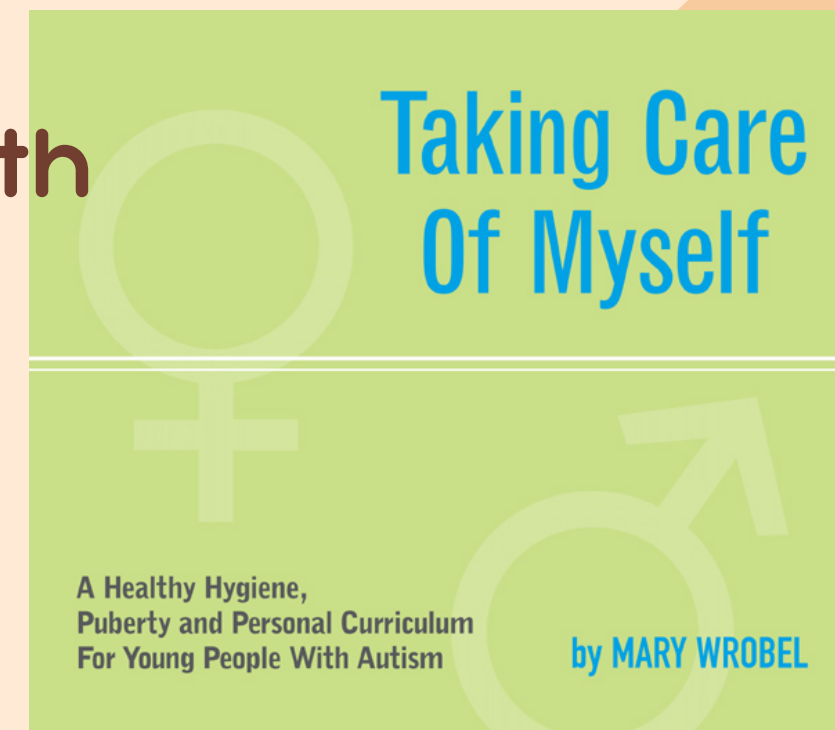
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Treatment Ideas



Treatment Plan Ideas: Social Stories

- The purpose is to prime the client about what to expect and solutions for possible problems that may arise.
- I am taking Care of myself: healthy hygiene, puberty, and personal curriculum for people with autism.



Treatment Plan Ideas

Video Modeling

- Video Modeling

- Video modeling is a teaching procedure involving an individual viewing a video sample of a model performing a specific scripted activity or task.
- Immediately after viewing the video-based model, the individual is directed to perform the activity or script he or she observed in the video.



-




Treatment Plan Ideas

Video Modeling


- EBP

- video modeling is a teaching procedure involving an individual viewing a video sample of a model performing a specific scripted activity or task.
- Immediately following having viewed the video-based model, the individual is directed to perform the activity or script he or she observed in the video.






Treatment Plan Ideas Motor Planning and Sequencing

- Simulation with being mindful of not being wasteful as feminine hygiene products are expensive.
 - I made more durable pads by adding card stock to the back so that they can be used multiple times without needing to replace.
 - Highly suggest making 2, one for you and one to take home.
 - Grading from model to being in the restroom
- 




Sensory and interoception

- Some research reports that some families have had difficulties with their daughters wearing the pad, possibly due to tactile sensitivities or discomfort.
 - Encourage the families to have their child wear a pad at home or the clinic so they can learn how it feels, and we can see their reaction
 - highly suggest using a social story to model expectations
 - check in with the family to see what reactions the child had so we can assess and help
- 



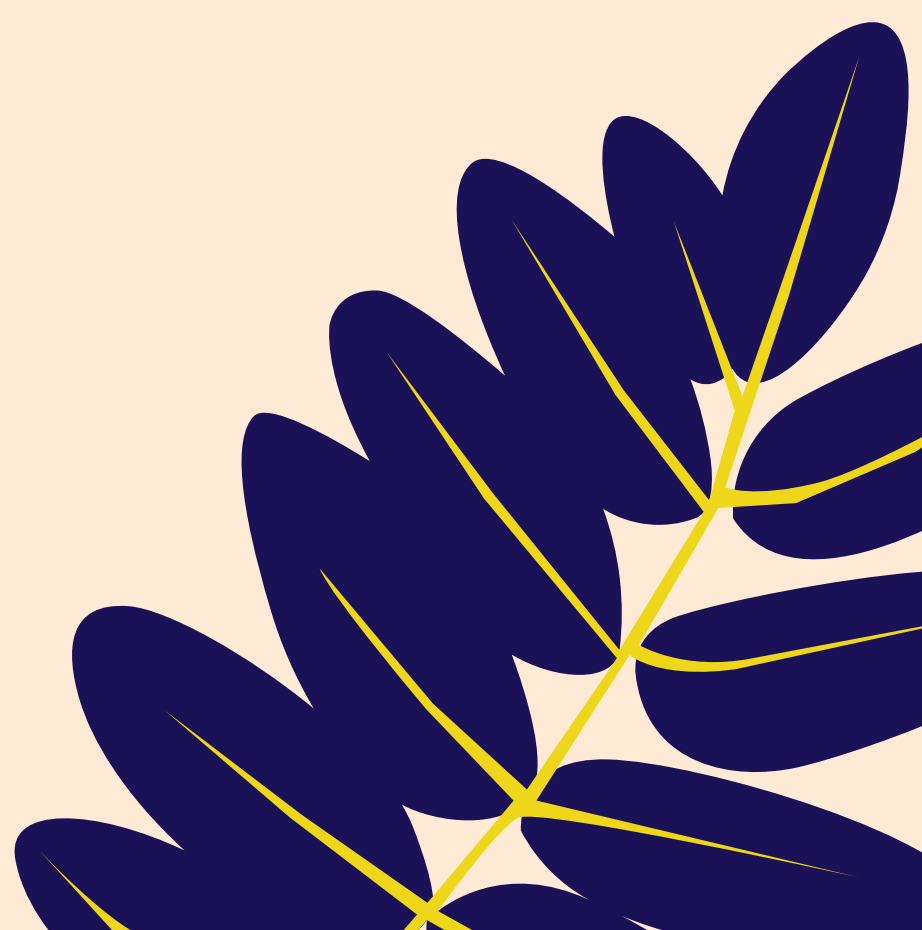
Interdisciplinary Collaboration

- **SLP help**
 - suggested language to use as we want words that are simple and understandable to the client
 - we had in simple visual schedule New, but she thought clean might be better, which worked :)
 - Maybe highlight the words "**dirty**" by putting them in **red** font as another cue to associate **red** with **dirty**
 - How to use AAC to help with communication and reinforce understanding of clean and dirty
- 




07

How is this relevant to transitioning to adulthood and what are the next steps






Menstruation and Transitioning to Adulthood

- If we know that girls can start their period 8-15
 - Then we have a natural opportunity to start helping families think of the future at age 8
 - Natural opportunity to talk about the child's team and how those teammates can help in the transition to adulthood.
- 

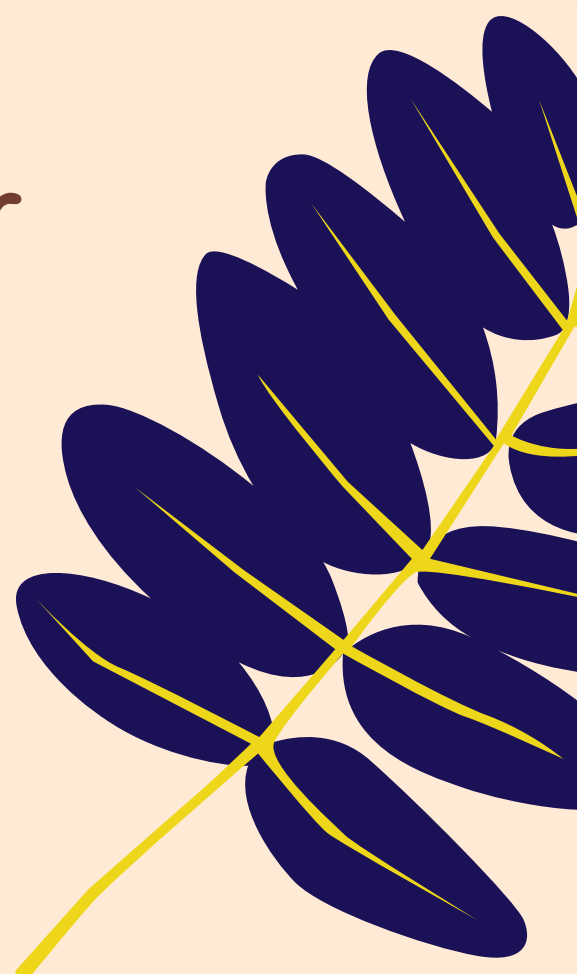


Research on Transitioning to Adulthood For People with Disabilities

- Per Pandey & Agarwal,
 - UNICEF defines “adolescents” (those between the ages of 10– 18) and the United Nations as “youth” (19–24).
 - Childhood to adulthood: young people are expected to acquire skills, go through physical and psychological maturation and assume a social identity
 - Adolescents and young adults are often bypassed by the program and policies designed for disabled children and left out of advocacy initiatives and employment schemes targeted at adults with disability.
- 



Research on Transitioning to Adulthood For a People Disabilities

- Feelings and emotion transition Per Pandey & Agarwal,
 - Transition and the family
 - Stories from youth and parents indicate that they feel like they "have been dropped off a cliff" once they reach adulthood Youth with disabilities have reported that they have similar aspirations to their counterparts without disabilities.
- 



Research on Transitioning to Adulthood For a People Disabilities

- Transition and the family Per Pandey & Agarwal,
 - The literature does highlight that family involvement is essential to make an effective transition but can often be overlooked and not implemented by professionals.
 - One study stated that the most critical factor is the absence of special funding or special projects to help this population.

-



Research and Transition to Adulthood Cont.



**“The Best Journey to Adult Life”
For Youth with Disabilities**

**Evidence-based Model and Best Practice Guidelines
For The Transition To Adulthood
For Youth With Disabilities**

Research and Transition to Adulthood Cont.

- **Best Journey to adulthood**
 - The model believes each person is on a journey at different life course stages.
 - A life-course approach to viewing the transition to adulthood and other transitions during a person's life acknowledges that there are many common issues and challenges along the way.
 - Within each theme, guidelines are provided for three critical phases of the transition process: preparation, the journey itself, and the landings in the adult world.



Research and Transition to Adulthood Cont.

- Navigator

- A navigator is a person or possibly a group of people of various backgrounds with knowledge and expertise of the transition process and the adult world.

- A navigator can act as a coordinator with all persons involved to allow the sharing and telling of transition stories.

- Navigator qualities include:

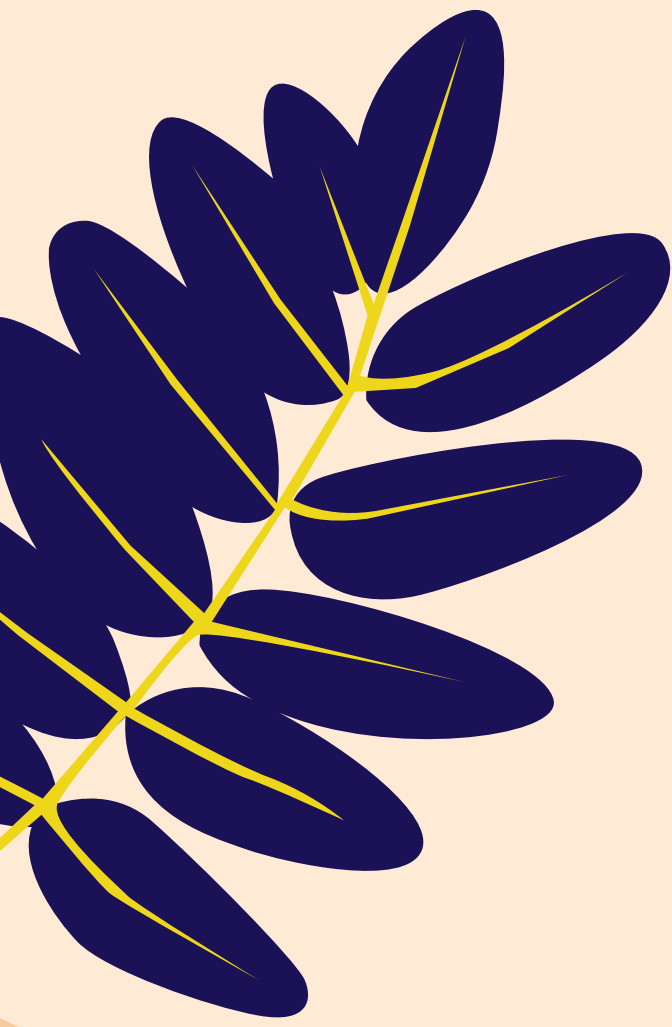
- Having personal investment and dedication to families.
- Understanding how asking for help is a difficult step for people and being able to nurture this in them.




“The Best Journey to Adult Life”
For Youth with Disabilities

Research and Transition to Adulthood Cont.

- Navigator qualities include:
 - Being a creative thinker and explorer.
 - Having an understanding of specific ethnocultural and socioeconomic considerations for specific populations.
 - Taking a whole family approach.
 - Assisting the person/family to develop a support network
 - Helping the person/family to ensure the continuity, integrity, and evolution of a plan.
 - Monitoring the plan's implementation, reviewing its effectiveness, and ensuring the person/family's choices are being honored.



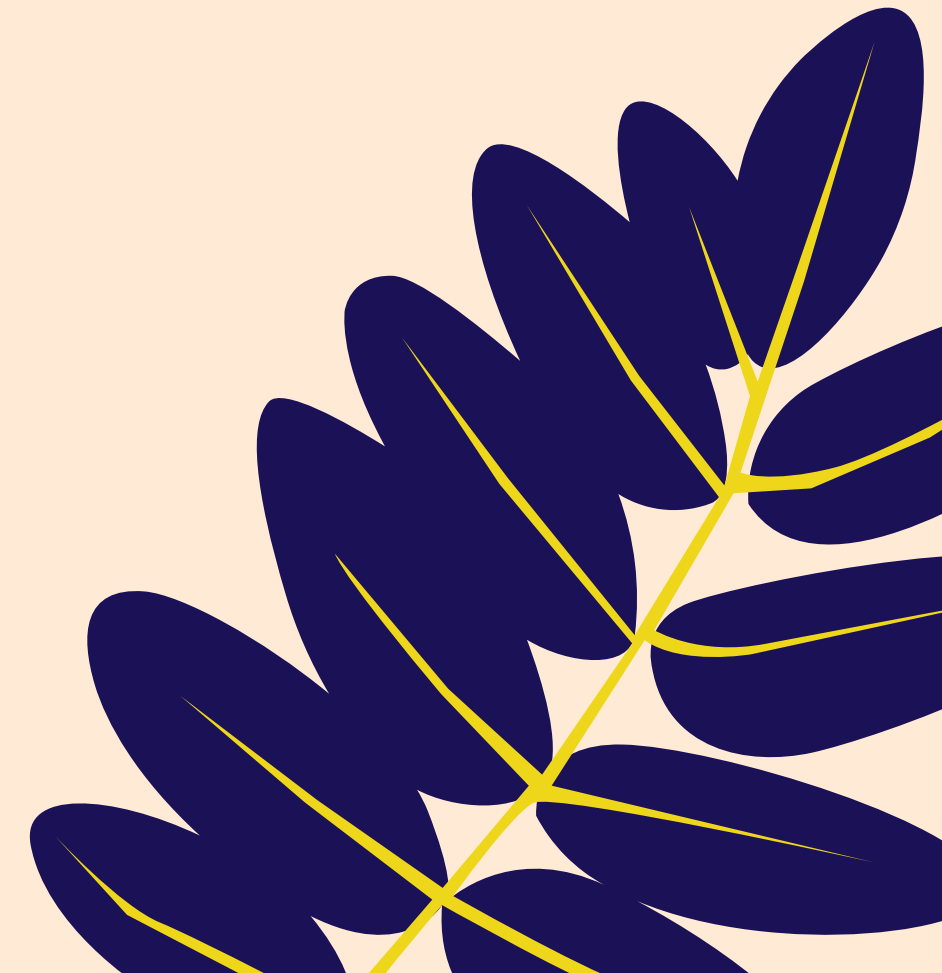
Occupational Therapy's Role in Transition to Adulthood

- OTs have a unique perspective and education that can support families in planning for their child's transition into an adulthood
 - we have been educated in occupations that cover a lifespan
 - we value holistic care and understand that meaningful occupations can be done independently, with adaptations or modifications
 - we are trained and specialists in activity analysis,
 - I believe we can transfer this skill into life planning and life transitions
- 



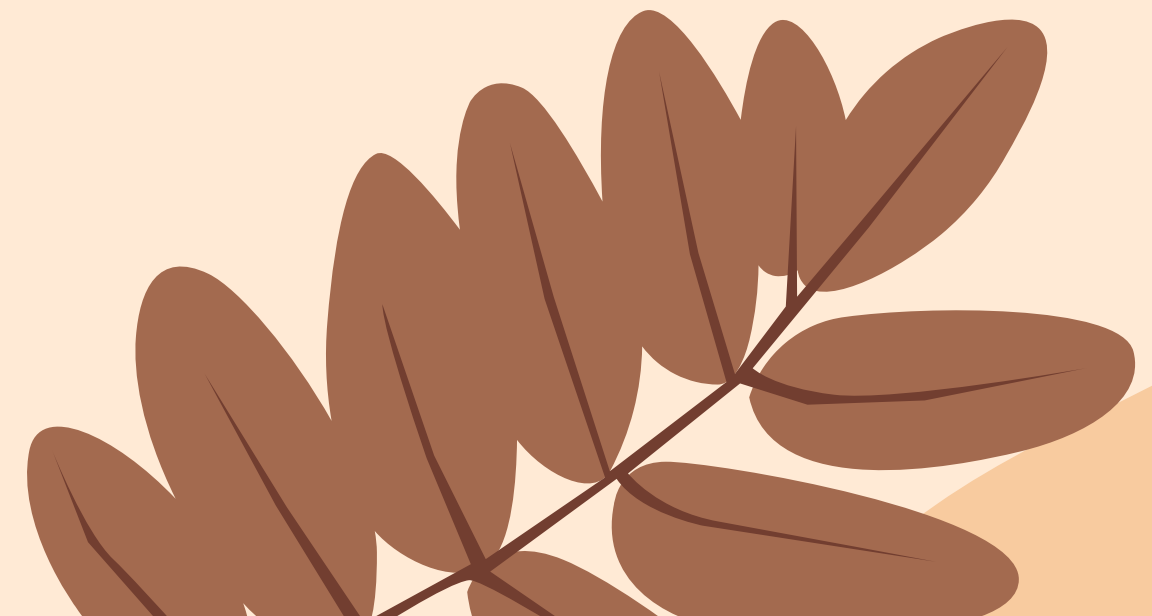
Q&A

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Thank You



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Marni Sommer¹ *, Bethany A. Caruso² , Murat Sahin³ , Teresa Calderon⁴ , Sue Cavill³ , Therese Mahon⁵ , Penelope A. Phillips-Howard⁶

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Girls have indicated receiving inadequate guidance prior to their first menstrual period and experiencing fear, shame, and embarrassment managing menstruation, particularly while in school [4.6.7.17.18]

There exists a window of opportunity to reach girls at menarche, as their bodies are biologically changing and they are encountering profound new social dynamics within their families and communities [42.43].

Regular menstruation is a sign of health and fertility; it is inherently female. However, drawing on feminist theory, femininity is linked to beauty, freshness, and cleanliness [8]; these are opposed to the qualities associated with menstruation: dirty, bloody, and smelly