

Free Menstrual Product Accessibility Across the Five College Consortium:
The Cost of Blood Behind the Tofu Curtain

Kadin Ellsworth

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Chair: Thom Long
Co-chair: Jina Fast

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Abstract

Menstrual Health Management (MHM) initiatives in recent years motivated by student activism and public health support have invested in providing free menstrual products for students and citizens across the United States and many other high and low income countries, including but not limited to, Scotland, New Zealand, Kenya, Uganda, etcetera. The bulk of the MHM research and activism done in high and low income countries has focused on the mental, emotional, and psychosocial aspects of period poverty, leaving a gap in data about the progress and practical aspects of these initiatives and their success in combating period poverty.

The Five College Consortium in Western Massachusetts engages over 30,000 students and has some free menstrual provisions for students, but their origins and information about their physical and financial maintenance are not readily available to the student body. Through interviewing groups on each campus who supply free menstrual products and fieldwork of these menstrual product sites I investigate all of the Five Colleges to measure the accessibility of their menstrual products and bathrooms, compare and interrogate how they are maintained and funded across sites, and experiment with methods to communicate this accessibility and funding data to students to create a well maintained feedback loop of free product sustainability for all.

Keywords: urban planning, poststructuralism, feminism, disability design, critical menstruation studies, public health design, sociology, public health

Introduction

“...almost one-fifth (17.4%) of the women [where?] reported financial difficulty as a barrier to product access in the past 6 months.” (Bersinska, 153).

Period poverty is not a new phenomenon, as in the shortage of period products by way of high prices, physical distance/physical inaccessibility, lack of preferred and tailored products, social stigma, lack of research/funding/distribution efforts, and more. Research in Menstrual Hygiene Management (MHM) and period poverty is aware of its demographic, thematic, and technical gaps; most research is in low and middle income countries among adolescents, more studies are being done in high income countries on populations of college students and working adults, and dominant across both is the emotional and embodied experiences of period poverty. Among these innovations in critical menstrual studies, consistent monitoring of installed policies and product quality maintenance is lax and unstudied, meaning that the technical and

structural reality of free period product provisions is not thoroughly accounted for, leaving holes in the research and in the lives of menstruators.

Menstrual hygiene management and access is predominantly seen as a female issue rather than a public health and accessibility issue. The Five College Consortium is a closely related group of institutions in both concept and geography that serve around 31,000 students, who take classes and participate across these five campuses.

Students, academics, and locals alike know that the area containing the five college consortium is left leaning and wealthy enough to afford environmentally friendly products and politics REFINE etc, leading it to be referred to as the “Tofu Curtain”.

The identity of each college is calculated by the budget distributions of each (often indicated by the architecture, amount/variety of classes and professors, the quality and size of the resources they provide); history/origin of the college; the values of the institution; the students view of the institutions hypocrisy/dissonance of said values; and the values/image/practices/beliefs of the student body generally (as displayed by their dress, leisure activities, attitudes towards academia). Accessibility levels

Students of the Five College Consortium during their rounds of classes often notice the disparities in resources, including but not limited to quality and quantity of dining options, professors, sports teams, infrastructure, classes, campus size, etc. In particular I noticed which colleges supply menstrual product options to their students in ratio to their supply of menstrual product disposal options. Disposal areas are always more abundant than actual products, and while frustrating and often embarrassing on an individual level, it structurally indicates inaccessibility and how mainstream shame on human bodies influences the financial priorities of institutions. Menstruation is not a disability but not being able to quickly and comfortably acquire means to ease the flares of my body is something any menstruator shares with chronically ill and physically disabled people (those are often co-morbid as well).

Getting acquainted with Hampshire during my first semester in January 2023 I brought with me plenty of pads and utilized friends and their cars to drive me to CVS when I needed more, where I paid with my own funds. This avenue is notable because I was privileged to have outside access and personal funds that I didn't need to search for free local provisions supplied by the school(s), but also because there *weren't* any free products of my preference supplied by Hampshire College in the first place, leaving me venture out of the network. As I began to take classes at the other Five Colleges, I found myself soothed by the presence of a basket of pads in the school bathrooms, over time noticing the subtle differences in quantity and quality, assessing its features to glean if people hover over this basket in maintenance frequently or if it's likely left unchecked for longer periods of time. Thus, from that first semester I started noting the presence of free pads and tampons wherever I went, taking pictures of the baskets, the coin operated dispensers, the notes listing who supplied the products, mapping quality over time and location.

Study over how many semesters preliminary fieldwork begun in spring 2023, official in fall 2023
 Difference in the way colleges talk about this v how they act and financially provide

I decided to step into a select few buildings on the Five College Campuses, to see if they are:

1. Accessible to the community
2. Accessible to wheelchair/rollator users (different sizes of wheelchairs)
3. Offer free and various period products

Additionally, I interviewed the groups supplying these products and framed the accessibility issue of menstrual products on their school population

I am extremely able bodied, with no diagnosis of physical disability restraining or slowing my movement or flexibility; thus if i find myself needing pads but my body is not enough to get them, my environment is not human centered, and if the interior design and architecture slows down even me, then the environment is truly inaccessible to those confined to wheelchairs, rollators, and more.

Literature Review

The field of MHM is still fairly new to the research world with most studies, activism, lobbying, organization building, etc. beginning in the late 90's and early 2000's. Primary school and adolescent girls in low and middle income countries and populations during humanitarian emergencies make up most of the research population because they have the highest levels of period poverty and thus are most vulnerable to the health risks imposed by improper MHM (Dave et al) . Additionally, long term observational and intervention studies created public awareness and such visibility to the public (through news media coverage, school curriculums, public health workers in medicine and sanitation) combined with urgent messages from researchers fueled policy and funding to alleviate period poverty. More recently, research subjects have expanded to those in high income countries and populations identified for current and future research have been college students, working adults, homeless people, disabled people and more (CITEEE)

The main conclusions gathered from these studies across populations were: financial barriers to acquiring an adequate number and quality of products, culturally and structurally enforced period stigma inhibits activism for MHM, deleterious effects of period poverty upon those in school and workplaces such as nonattendance and lower quality work, lack of standardized education about menstruation and menarche in homes and schools, inadequate WASH (water, sanitation, and hygiene) facilities for changing and disposing of menstrual products, types of successful intervention, and results of intervention as well as its impact on quality of life and work.

A more macro theme division in the literature is those that focus on mental health experiences of period poverty and those that center results of practical interventions. My work in this study will also focus on the latter, therefore I will first discuss research with similar populations, localities, and intervention centered analyses.

As a precedent, several articles focus on measuring definitions, progress, and noting the vagaries in MHM studies. Hennegan et al conducted a systematic analysis of both macro themes to assess the frequency of concepts researched in MHM, displaying which parts of the menstrual experience are studied more; beliefs, norms, hygiene practices, knowledge are studied more than symptomatic/health experiences and psychosocial outcomes, and intervention acceptability and WASH conditions and access are researched even less. These studies are further categorized into what already created measurement constructs were used to assess the concepts researched, for example the Menstrual Attitude Questionnaire used to gauge menstrual attitudes, beliefs, norms and restrictions in many studies. Further subcategories are made to understand what is actually being defined to be studied in articles, for example, the interchangeable use of the terms "menstrual practices," "menstrual behaviors", "menstrual hygiene", all refer to bathing frequency, changing of menstrual products, types of products used, etc; such notation on the confusion of terms and definitions is useful to creating more detailed and standardized yet globalized measurements for ensuring menstrual quality of life. Specifically of note to my research is that one article gathered by Hennegan noted that WASH infrastructure to support menstruation did not improve over the course of the study. I also found particularly useful the suggestions for operationalisation and creation of reliable measuring techniques in MHM research, through full disclosures of questionnaires and interview questions, cultural relativity of menstrual experiences and attitudes,

In a webinar held by Columbia University's school of Public Health for their research and activism group Period Posse, Bethany Caruso, Therese Mahon, and Caroline Kabiru discuss in their video "How Do We Measure Progress?" the importance of

Gruer et al. displays examples of four university's initiatives to combat period poverty and found four key themes including, "(1) The critical role of champions, (2) the importance of social and financial support, (3) challenges diffusing menstrual equity from pilot to scale, and (4) recommendations for future initiatives." (p. 1). Champions in these universities were one to two undergraduate students who were the main initiators, motivated by personal and fellow students' experiences with period poverty and a general desire to combat inequality (p.4). Champions were also few for a good reason, one or two students in authority for menstrual equity initiatives allowed for clarity of roles, goals, and communications; information could be linearly traced from administration to champions to student body and back again. Such efficiency and ease of contact set the foundation for successful organizing. Notably, all the student champions documented were members of the student governments of their schools (p.5) which provided

“...unique access to members of the administration and a strong understanding of the university bureaucratic systems.” (ibid). Gruer found that students conducted pilot runs of free menstrual products in centralized locations, who stocked the baskets themselves and funded through their student governments; these pilots were successful in motivating a wider program with the administration and disproving fears of overuse of products (p.6). These pilots often still did not fully convince administration to aid the students in this endeavor and required substantial convincing, and considerable planning for who would be involved in the restocking, facilities or students; Facilities usually proved to be the more sustainable option, to combat student graduation and leadership turnover (ibid). Also notable is the different marketing tactics used by students to gain support for their initiative. Administrators were more convinced through urgency while fellow students were brought in with the gains of equality (9).

Alexander et al. discuss how sanitation conditions in 10 schools in Kenya support the menstrual needs of schoolgirls by defining the traits of an acceptable bathroom and monitoring if the schools improved the quality of their latrines over the duration of the 15-month study. Firstly they noted, “For latrines, staff recorded the stability of the floor or platform, and the presence of: (1) holes in the wall; (2) an offensive smell; (3) feces or urine pooled on the floor; (4) a door; and (5) a working inside lock. The presence of handwashing water and soap for students was also observed and recorded upon arrival at the school.” (p. 4). Secondly, they reported improved conditions in the schools that provided pads to their students and a decrease in hygienic traits such as privacy walls in the control group (p.6), and those provided menstrual cups saw a significant decline in private changing places during the follow up reports. There were also important disagreements between study staff and school staff on the availability of hygienic materials such as soap and clean water (p.10), which indicate the importance of accountability advocates for objective results, maintenance quality and timing, and extra support for menstruating students. Also mentioned is the influence of governments and higher authorities beyond the school that dictate the hygiene resources provided to schools, meaning that schools themselves are not always the perpetrators of inadequate WASH facilities. This study is significant to me because it uniquely points out the sensory and physical design features that embody a safe and hygienic space for students.

Michelle Blowes’ short article describing the intervention that was installed in conjunction with Alana Munro’s systematic study about menstrual experiences in Australia of college students; Munro worked with Share the Dignity to introduce a free vending machine for menstrual products, and it is also mentioned that the University of Sydney Union used their student services funding to introduce free PIIIXI menstrual products as well for a pilot program in several of their buildings.

Global menstrual collective making the case

Rawat et al

Now I will elucidate the other macro theme of MHM research, that of studying mental health and cultural experiences of period poverty. Schmitt et al. found during her research on

effects of period poverty on young adults during the Covid-19 pandemic that “Menstruating students who may have relied on schools for accessing menstrual products before the pandemic lost access to such supplies due to school shutdowns and shifts to remote learning” (2), income losses and raised prices led to shifts in product brand and type purchased plus decrease in availability of products made specifically for heavier flows (problematic for those with menstrual disorders and disabilities) which increases the risks of TSS and leaks (p. 4-5). Cardoso et al. discussed associations between period poverty, economic security, and mental health, finding a significant relationship of period poverty and moderate/severe depression using standardized depression questionnaires, “...we could not test if period poverty was associated with depression independent of economic deprivation: (5).

Munro et al. (2021) conducted an excellent systematic analysis of both qualitative and quantitative studies on how menstruation impacts university students, comparing the countries of research, their income level method of data collection, and more. She found that most participants in these studies associated menstruation with shame, stress, pain, and even suicidal ideation, while some found it a positive, feminine experience. Lower menstrual knowledge, social support, behavioral restrictions during menstruation and low quality facilities contributed heavily to miserable and unhygienic menstrual experiences (p. 16-8). Such factors created educational consequences of absenteeism and reduced participation, concentration in class, and academic performance (p. 18). Poetically, the keywords that had the greatest number of occurrences were “‘menstruation’, ‘woman’, ‘university student’, and ‘pain’” (p.6). Munro also noted that further research is needed on the experiences of migrant and international students, as the cultural differences she found in her synthesis were significant, such as the amount of pad changes, disposal locations, preference for bathing during menses, etc. She also found no data on the menstrual experiences of non-binary and transgender students, either qualitative or quantitative. Notably, in relation to the goals of my work, Munro found that, “No studies in high-income countries explored students’ perceptions of their *environments*.” (p.14)(emphasis added), “Few studies, especially from high-income countries, focused on students’ perceptions of the extent to which their campus sanitation facilities enabled them to execute their preferred menstrual practices. Depending on students’ practices, students may perceive that campus facilities are not equally accessible to them despite being of the same design and standard” (20). Barrington et al. conducted a similar systematic analysis focused on studies in high income countries capturing personal experiences of menstruation, finding several themes that she sorted into Antecedents, Experience, and Impacts. Antecedents included socio-cultural context, behavioral expectations, social support, knowledge, and resource limitations; these factors lay the foundation of how menstruation will be felt, known, acted upon, received. Experience was thematized as menstrual practices, perceptions of menstrual practices, negative and positive emotional responses, confidence to engage in activities during menstruation, and individual menstrual factors; menstruation as a phenomenology. Impacts, such as mental burdens, participation, and relationships(how menstruation shapes them) refer to the results of the above. Significant to my research is Barrington’s short section on articles that mentioned perceptions of physical

environments, with participants expressing that they did not have “access to private, appropriate facilities where they could regularly bathe, dispose of menstrual materials and change their menstrual materials.” Noting this acknowledgment of substandard architecture, design, and urban planning is further proof towards the innate intersectionality of these disciplines.

This research, as well as on the ground activism and civilian urgency creates policies for combating period poverty in individual states, counties, schools, and nations as a whole. USE NOTES AND REFS FROM MY POLICY PROPOSAL AND A FEW OTHER PAPERS IN MY CHART addressing menstruation at universities columbia yt

The above literature in MHM studies and history is of great quality but they do not discuss accessibility beyond ADA and WASH, the theorizations of accessibility in conceptual and actual measurement, and urban planning sociology. I will innovate this convergence by detailing in my study how urban planning and understandings of accessibility directly impact the creation and resolutions of period poverty. I will first discuss more grounded and philosophical considerations of what access is, how it is felt and functions, how it is debatable as a definition and lived reality. Then those ideas will be used to discuss authors who have investigated accessibility specifically at universities in high and low income countries.

First, Hall and Imrie in 1998 discuss at the root where the architect's understanding of and attitudes towards disability originate, and how they are incorporated into design. They begin by describing how architectural education does not lead with teaching creative accessible design but rather the priority of the architect's creativity over the humanity of the population that will be using their feature. Through interviews with RIBA, one noted that considering continuing education and professional development for architects, they, as in RIBA authorities, "don't need to declare to us that they've done it and we don't actually monitor the system." The weaknesses of the formal education and training systems were made evident by respondents to the postal questionnaire, with most saying that their learning is acquired 'on the job' or through direct experience” (416). They discuss further the variability of architects that see themselves as inclined to align their work with academic ethics and sociocultural political movements, with some branches of architecture being considered impersonal, apolitical, and the use function secondary to the “high artistry” of the building itself. Still, Hall and Imrie recognize that many features and human creativities of a public building are authored not by architects but by other authoritative forces dictating the project, such as urban managers, construction, engineers, etc. Through a survey, it is found that disability is often seen as a rare, generic looking, and personal problem instead of the environment itself being the disabling force (414-5). Further, the survey respondents stated physical disability and wheelchairs are the most common image related to disability design, even though other features such as color contrasts, paving, ramps, lifts, lighting, etc, is necessary to create an accessible environment for those with visual and intellectual disabilities (414). Hall and Imrie also collected interviews with RIBA, the Royal Institute of British Architects, one respondent admitted that, "part of the problem is that so few

disabled people do our courses and present no direct challenge to the system. It's easy to ignore their concerns” (416). They continue to describe how even though a small number of access groups are consulted on the accessibility during the design process, and that they are difficult to locate in the first place, their input is mostly ignored due to the authority and economic limitations of the project managers and paying clients taking precedence.

The next few articles I discuss deal mainly with the phenomenological aspect of access and its measurements, its variability and ephemerality. Robert Lynch sets this foundation by describing the more technical aspects of ADA regulations and a brief opening of a case study noting the tediousness and precise ontological obstacles in reporting accessibility issues, “You may have a problem with a ramp's steep slope. You must first get the facts. Learn how to determine a ramp's slope and compare it with the guidelines. The slope may “feel” steep to you, but it may actually comply. The slope may be within legal limits but the ramp's texture made it difficult to negotiate. The fault may actually be with the railings, but you assumed it was with the slope.” Lynch further goes on to list samples from the ADA regulations regarding drinking fountain height, toilet stalls requiring atleast one accessible stall in any public restroom, library carrels and check out area height, amount of doors that need to be accessible, etc.

Pot et al. discuss perceived accessibility versus calculated accessibility and it's importance in urban planning and human centered architectural design. Spatial data of distance and time needed to get from A to B applies poorly to the realities of disabled people and their necessity to form mental maps of personal accessibility. Pot describes perceived accessibility as the potential to participate in spatially dispersed opportunities, meaning that one’s perception of their ability to get from A to B is not only informed by spatial data that is displayed on and communicated by a map, (distance, topography, public transit, sidewalks, etc), but also by past/current experiences of non-map details of the physical environment such as quality of the sidewalks, changing weather conditions, construction obstacles, condition of the roadway, public bathrooms and water stations, etc. He concludes that ‘objective’ accessibility cannot exist because of the highly personal cognitive processes involved in one perceiving an environment as accessible and comfortable, as well as the frequent failings of ‘accessible’ public amenities and encourages such personal variabilities to be considered in communicating access opportunities to the public.

Church and Marston explain the shortcomings of traditional accessibility requirements, noting how spaces are determined to be accessible in a very binary manner, ‘accessible’ or ‘not at all’, which is referred to as “absolute” access. This means that fine details of the quality of the access are not considered and accommodated for, leaving it inaccessible to some. The authors use calculations to compare the main types of met

The Tokyo Toilet is an urban design and architectural project in Japan innovating accessible, beautiful, and humane public bathroom designs;

Finally, I reviewed a few papers that specifically discussed students’ perception of accessibility on university campuses and how such physical barriers impact their student lives. Simonson et al. note importantly how much of higher education infrastructure was built before

ADA standards came into fruition, making not only basic accessibility a difficult adaptation, but more minute and complex conditions that influence accessibility more expensive and time consuming; yet they found that smaller interior design details also heavily influence accessibility, student comfort, and productivity as much as the immovable infrastructure. They used surveys to consult students with disabilities on the perceived accessibility of their campuses, not only on physical accessibility but also visual, auditory, cognitive, and other needs. They found that students frequently commented on the inaccessibility of sidewalks especially during winter, vague signage on and number of accessible restrooms, signage and orientation in general for buildings, narrowness of class spaces and hallways, lights being too bright for some and more details. Further, students with cognitive disabilities in particular stated that the intense design elements of campus buildings (lighting, sound proofing, space, etc) affected their ability to focus on homework; the authors state that such complaints have not been researched in previous literature.

Then I will explain some papers and webinars that discuss periods and accessibility together,

Finally, urban planning takes a special subset in public health by explaining how our built environment influences our personal health and creates patterns visible in the healthcare system. Clara Greed's work on bathroom design in the UK leads this conversation as she weaves urban planning sociology with feminism and public health;

Tariverdi et al. uniquely discusses accessibility of public infrastructure for humanitarian disaster risk management, which is often the underbelly of the MHM research conducted in low income countries fraught with imperial deprivation.

In summation, Dave et al. quite bluntly put it, "Given the high costs associated with hospitalization, especially for individuals without comprehensive health insurance, providing free feminine hygiene products can be considered a preventative public health measure." (p. 224)

Explain how they all connect and need each other to create an optimal environment

Pot et al.

Overall, these subjects of mental health and menstruation, period poverty and measuring progress, variances in policy in the face of activism, disability and able bodied access, the meaning of access, urban planning, humanitarian risk preparation, populations left out of research so far, all coalesce in the fact that our current infrastructures are not prepared to ensure a hygienic menstrual experience for its citizens, which is arguably, an ethical and governmental failure. Such systemic failure is well known to those who experience it every month clawing for pads and tampons so they can continue their lives, but is only recently being theorized upon in academic disciplines and political committees, and even more recently being combined.

My work continues this argument of infrastructural public health neglect by revealing through conversation with students and faculty how menstrual health is being incorporated into

the physical, social, conceptual environment and budget of each college. I expand on the previous research by focusing on the systems developed by students and faculty in providing free menstrual products, interrogating the budget given to this cause how it was negotiated, the timeline of these systems and budgets, analysing the “perceived” and “real” accessibility of locations of free menstrual products, and synthesizing this information into comparing the cost of blood behind the tofu curtain.

Methodology

To collect a broad picture of the accessibility of free menstrual products across the five colleges and compare the implementation methods of each, I conducted fieldwork of all bathrooms in select buildings on each campus to monitor the presence of free products and facilitated interviews with specific people involved to understand the bureaucratic processes involved in maintaining this menstrual health initiative. This combined methodology is dense but essential since it is well noted that sole reliance on the ADA’s qualifications are not a good indicator of accessibility (CITE), and to fill in the gaps of previous literature.

All data collection, assessment, writing up, was done solely by the author from September 2025 to April 2026.

Fieldwork Setting and Design

Location of research was limited to the 5 College Consortium (Amherst College, University of Massachusetts Amherst, Hampshire College, Mount Holyoke College, Smith College). Data of free menstrual product accessibility was collected by using the inter-college and inter-city PVT lines, Route 38 and Route B43 (to reach Smith College), and simply walking through the buildings selected and noting the building name and purposes (ex. Cafeteria, academic building, student center, etc), date collected, the amount of bathrooms, their accessibility, gender notation (Womens or Gender Neutral), and the presence of menstrual products). This data was kept and noted in an online document shared only with the supervisors of this project.

The initial scope of the project planned to collect data from all buildings on each campus, but this could not be achieved with the physical and timely restraints upon me, so the scope was decreased to include buildings with high traffic assumed, but this personal bias is influenced by my limited knowledge of student life at the four other colleges. Student centers, libraries, and buildings visibly busy during my preliminary fieldwork were prioritized, since these spaces are considered common, centralized, high-traffic, and thus more likely to receive maintenance and cultural funding.

Quantifying which buildings were open for public use v private student use, and the difference between accessibility + provision of menstrual products in public and private buildings

Online maps influence accessibility information and decide which buildings to prioritize also decided through fieldwork of various buildings being closed occasionally so not enough data collected

Some buildings during my fieldwork process had to be eliminated from the data set due to flooding, abandonment, or buildings moving entirely. For example, the Center for Feminisms on Hampshire campus is a central, well known, well trafficked, well loved, and well stocked area always containing free menstrual products, but I could not collect enough data to make it a part of my dataset due to the frequent flooding it experienced, rendering it closed to students for indefinite periods of time. Bartlett Hall at UMass I found seemingly abandoned, as the first few floors were active but the top floors had its lights off and not a trace of recent human attendance, so I considered the whole building was not worth my walking time, as it seems a very unlikely contender for a well trafficked and common spot. The Public Health building at UMass, Arnold Hall, was well used during the fall semester of this project and occasionally had a small box of pads and tampons in the first floor, and frequented women's bathroom that was supplied by the nearby Public Health Advisors; during my spring semester observations Arnold Hall was emptied with its lights off as well, with many notes stating all department chairs and advisors had moved to the newly built and hyper modern designed public health building to the right. Thus, I decided to also abandon Arnold Hall as a reliable data point.

How i will average out the data collected to see if there was statistically significant change over time and who had the most free products consistently.

Interview Setting and Design

Interview participants were selected first through fieldwork, as usually baskets of free menstrual products are accompanied by a note stating who provided them and how to reach them (usually through email or social media page), and second through looking online at each college's website to locate a person or committee that oversees menstrual health management and/or women's health. THIS NUMBER OF PPL WERE INTERVIEWED N = . Each person or group identified was contacted through email about their interest in providing information and their involvement in the supply and distribution of free menstrual health products; also included in the email was my intention to audio record each interview, transcribe it, and return it back to them for revisions, as well as a blank informed consent form (included in appendix) that allowed participants to note if they would like to be referred to by name or not.

Interviews were semi-structured, guided by questions about the administrative and practical processes behind the free menstrual product initiatives or lack thereof, allowing for the interviewee to attach related experiences, thoughts, procedures, or suggestions onto the main

subject. Guided questions used in all of the interviews are included in the appendix. Interviews lasted from 35 minutes to 60+ minutes, and were conducted in spaces that allowed for privacy and audio clarity, including personal offices, outdoor spaces, health centers, etc.

Map & Website Analysis

All of the colleges have maps publicly available online, but the quality and detail of these maps vary. Accurate and detailed maps are important for students in search of particular physical features or in their attempt to assess the length of travel from one building to another, they function as a first point of accessibility to calculate effort and assistance needed to arrive at their destinations. Cite necessity of accurate maps too

Because I am measuring and comparing where free period products are located on these campuses, and assessing how many truly accessible bathrooms exist and house products, these online maps are essential to plan my routes and selections for which buildings I will monitor for a year, and to see if what they advertise as accessible lines up with my experiences. Such information is essential to incorporate into future urban planning for these areas and adaptation to the infrastructure for developing human needs and desire paths. Interview information collected in the next section of this thesis describes how human needs and bureaucratic limits shape the mapping for free menstrual product accessibility.

Similarly, these colleges often list on their websites and student experience tabs if and where there are free menstrual products, so I will be noting that and its reality as well. Students are paying too much to be misled by their administration and duped into inaccessibility.

At this time of writing, Amherst College, Mount Holyoke College, and Smith College have interactive maps of their campuses on their websites, with the ability to pinpoint features such as cafeterias, residential halls, and accessible entrances. UMass has a map of its own noting for each building if all floors are accessible, if only some are, if there are accessible bathrooms, if there are automatic doors, if a key card is required for entrance, and more. Amherst's map indicates accessible bathrooms, elevators, entrances, restrooms. Hampshire college has a flat PDF map of its campus, but does not indicate accessibility. Mention rue who has done study on accessibility at hampshire?

First, beginning with the accuracy of campus maps, Notably, amherst college has installed a map plate outside of converse hall near the only bus stop on their campus. Hampshire college has also posted an online map tour that i noticed on the window of the kern, which was during the opening of the spring semester in january when new students were arriving

Now I will elucidate how or if these campus websites advertise where I can locate free menstrual products. Usually and with reasonable assumption, this information is under the

student health services tabs, so I will explain precisely how I got to each page. These are the currently available information about free menstrual products at each college, this information is subject to change and links subject to break. Such breakage and lack of communication of altered online location of product information is also considered inaccessibility.

Some are a consistent resource and others a requestable service. . I am analysing these websites with a bias of previous familiarity, and my judgement of their accessibility, transparency, and usefulness to students is based off of the specific information I am looking for in this study, such as, ‘Do the websites of each college note where and if i can locate free menstrual products? Do they define this as a consistent resource or requestable service? If they do say so on the website, is the information outdated? Is the website itself accessible? Can i find who funds these from just the website?;

First, for Hampshire College, under "Student Life" > Health and Wellness" list the several online, on-campus, and phone resources students can utilize for various medical and social needs. Notably, only the Wellness Center in this list writes that it supplies menstrual products; during my fieldwork, the Center for Feminisms and the Queer Community Alliance Center both supplied free menstrual products as well, but this was not listed on the website.

Smith College’s website lists “Your Campus” under which Health and Wellness > [Wellness Services](#) leads me to the main page describing Smith’s wellness team and their Community Health Organizers (CHOs) who give out free menstrual products and run the college’s garment library. It notes that menstrual cups specifically are acquired through appointments, “free menstrual cup and cleaner after a brief consult with a peer”; no other options for free menstrual products are noted.

For Amherst College, under Campus Life is “Health, Safety, and Wellbeing”, it is not clear the next location that would indicate where information about menstrual products would be. Under Health and Wellbeing Education leads to a page called What We Do, the section paragraph of which is entitled “Materials to Improve Health and Wellbeing” which notes that free menstrual health products such as pads, pantyliners, and tampons are located at the Keefe Campus Center, in the Wellbeing Makerspace and on the first floor of the campus Health Center, also stating that menstrual cups are separately available upon request, with the email HealthEd@amherst.edu attached for contact support.

On the Mount Holyoke College site, it is also quite obscure as to where information about free menstrual products can be found. Notably, I was unable to find any information on the location or even mere presence of menstrual products simply by clicking through the website and following links for student health and wellness; I could only find information through searching “menstrual products” on the website to which the second link which hosts a short article about a one students involvement in student government, with one sentence related to the SGA organizing for menstrual products in each bathroom. Further, under their Health Services tab, and Gender Affirming Care, it notes support for menstrual management but still no mention of free products.

Finally at the University of Massachusetts at Amherst, by going through the unintuitive path of Student Life > Student Support and Wellness > Dean of Students Office > Basic Needs Initiative > Student Care Supply Closet describes a free closet to help students supplement for personal healthcare items such as shampoo, conditioner, toothpaste, pads and tampons, etc. Yet, it also states that students are eligible to receive supplies only once during the semester and that they cannot guarantee the availability of any specific items. Students may visit the supply closet in person (though it is not stated where on campus it is located) on Mondays and Wednesdays from 1:30-3:30pm, or they may request a care package online and pick it up in person, where still it is not guaranteed their needs will be met. By searching “menstrual products” on the campus site, several articles appear, one of which is under Student Affairs, “What We Offer In Our Space” for the Stonewall Center on UMass Campus, located in Goodell Hall, stating in a short bulleted list that they supply free menstrual products.

Though quite surface level, this description of finding information about free menstrual products at each campus’ website shows the tediousness of wading through shallow and outdated sources for health information that should be easily visible to students to ensure maximum accessibility, trust, and reliable health support.

It should be part of the school year timeline to make sure websites are sufficiently updated with accessibility information to ensure links do not rot, accommodate with changed locations and contact information, as well as contact redundancy (supplying multiple ways to contact multiple people about accessibility and refilling of menstrual products.)

Campus accessibility map shows gender inclusive bathrooms

<https://umass-amherst.maps.arcgis.com/apps/instant/basic/index.html?appid=4575634567794afd863c83bc4d6d6d4a¢er=-72.5287;42.3906&level=20>

https://my.umass.edu/on_campus/campus_resources/index

<https://www.umass.edu/sites/default/files/2021-06/campus-map.pdf>

5 College Comparison: Accessibility of Menstrual Products

Describe the previous work that has been done and is currently going on for this, including campus group work stuff, set the stage and that past to display current fieldwork results, explain a timeline for when products were made free by who and to what degree.

Compare the colleges in fieldwork, in interview results, and come to conclusion about which is most accessible and why, what is the effect , how this fills a gap

My goal is to compare the presence of free menstrual products accessible to students across the Five College Consortium, and to uncover how much funding is allotted to this resource. To do this, I visited each college a total of six times to collect data, three visits of each school during the fall semester and three during the spring semester. I logged most of the public buildings on the campuses, specifically leaving out dorms and residential buildings since they are private for the students living in them. I visited and noted each of the female and gender neutral/inclusive and accessible bathrooms in these public buildings since these are the most common and most ideal places for these products to be. During the time of this data collection I also interviewed groups involved in the activism and distribution for free menstrual products on each campus.

Fieldwork Results

My fieldwork for monitoring the accessibility of free menstrual products across each campus consisted of a simple method, taking the local PVTA bus lines 38 and B43 to each college during the day and walking from building to building, noting the amount of floors, bathrooms on each floor, gender denomination, stated accessibility, and presence + description of menstrual products.

I did this to simulate the experience of an average able-bodied student meandering around their home campus to acquire free menstrual products, and of someone who cannot afford store bought menstrual products and thus searches on other campuses in hopes of finding enough to last for the length of their period. Such simulation is also a replication of my actual life as a student in the Five College Consortium, wandering between my classes to explore the amenities and differences of each college, looking for free items, observing the different landscapes and building architectures, noting the age of each college and the reflection in the designs, understanding each colleges' physical and symbolic place in the urban planning of the area.

The PVTA 38 line loops from Mt Holyoke to Hampshire, to Amherst, to UMass; to reach Mt Holyoke from Hampshire takes about 25 to 30 minutes depending on traffic, weather, construction, and amount of stops in between, whereas to reach Amherst college is about ten to fifteen minutes considering the above variables. This method is extremely time consuming, which cushions my argument that all schools in the Consortium should have free products easily available to reduce the amount of time a student might go without proper menstrual hygiene.

My fieldwork will be divided into two sections, the first of the quantitative assessments I collected of floors, gendered bathrooms, accessibility, and product presence; the second is qualitative, ethnographic descriptions of the bathrooms I wandered through, the details of their

infrastructure, interior design, comfort, plumbing, placement of products, my perceived accessibility, and pictures to showcase the display of menstrual products at each college.

Quantative

Buildings are coded by color for school and by letter for the purpose it houses, to organize if there is pattern in the types of buildings that do and do not provide products continuously.

Hampshire is Green Umass = red Smith = blue amherst = purple

Legend:

Type of building

(L) = Library

A = academic building

C = cafeterias

S = student centers

ATH = athletic buildings and gyms

H = health center/clinic

AD = administrative buildings

CS = campus stores

If no products, --> N

If yes products, → Y + thick description

GN = gender neutral

A = accessible

NA = not accessible

BRANDS FOUND

Hampshire:

Aunt flow

Gards

Tampax

Cora

tampax

U by Kotex

HOW TO REPRESENT THE DATA COLLECTED DAILY IN AN EQUATION THAT IS COMMUNICABLE, SHOWS STATISTICAL SIGNIFICANCE, AND CAN BE REPLICATED?

Number of bathrooms total womens and gender neutral B

Number of accessible bathrooms A and non acc
 Number of times there were free products 1 out of ten
 Equals percent out of 100 that there were products?
 Fall equation and spring equation?

B x A x X

$$4 \times 2 \times 4 = 32$$

$$4 \times 4 \times 4 = 64$$

|

V progress of thinking , note this in methodology , the calculations atleast
 This doesn't make any sense because im only including accessible bathrooms, number would
 have to include both, may as well just make the number the total of all bathrooms across all
 floors,

This fieldwork data will be shown in chronological order, the first chart is for the fall
 fieldwork during September-December of 2025, then the spring work of January-April 2026.
 They will be organized by college, then a third chart will discuss similarities and differences
 between identical buildings, such as libraries and dining halls.

Building			
FPH A, AD	9/24/25 GF GN A N 1F GN A N 2FGN N GN N	10/20/25 BF GN A N 1F GN A N 2F GN NA N GN NA N	10/31/25 BF GN A N 1F GN A N 2F GN A N GN A N
Dining Commons: C	9/24/25 1F GN NA N	10/20/25 1F GN NA N	10/31/25 1F GN A N
Kern: A, C, AD	9/24/25 1F GN A N GN A N GN A N GN A N 2F GN A N GN NA N	10/20/25 1F GN A N GN A N GN A N GN A N 2F GN A N GN A N	11/13/25 1F GN A N GN A N GN A N GN A N 2F GN A N GN A N
Library; L	9/24/25 GF GN NA N 1F 2F GN NA N 3F GN NA N	10/31/25 GF GN NA N 1F 2F GN NA N 3F GN NA N	12/10/25 GF GN NA N 1F 2F GN NA N 3F GN NA N

	GN NA N	GN NA N	GN NA N
Wellness Center: S	9/24/25 1F GN NA N, Outside bathroom 3 Aunt Flow Pads and 1 box of 1 Gards regular maxi pad	10/20/25 1F GN NA N Same stuff as last time nl change	10/31/25 1F GN NA Y one box of one gards pad. Outside room are two large buckets filled with aunt flow pads and tampons! New
Emily Dickinson Hall: A, AD	9/24/25 1F GN A N	10/31/25 1F GN A N	12/10/25 1F GN A N
Music and Dance Building: A, AD,	9/24/25 1F GN A N	10/20/25 1F GN A N	10/31/25 1F GN A N
Lemelson: A, AD	9/24/25 1F GN NA N GN NA N	10/20/25 1F GN NA N GN NA N	12/10/25 1F GN NA N GN NA N
ASH: A, A	9/24/25 1F GN A N GN A N 2F GN A N	10/20/25 1F GN A N GN A N 2F GN NA N	12/10/25 1F GN A N GN A N 2F GN NA N
CASA: AD	9/24/25 1F GN A N	10/31/25 1F GN A N	12/10/25 1F GN A N
Merrill Life Center: SC, AD	9/24/25 1F GN A N 2F GN A N	10/31/25 1F GN A N 2F GN A N	12/10/25 1F GN A N 2F GN A N
Multisport: ATH	9/24/25 1F W A N	10/30/25 1F W A N	12/10/25 1F W A N
Center for Design: A, AD	9/24/25 1F GN A N	10/31/25 1F GN A N	12/10/25 1F GN A N
QCAC; SC	10/20/25 box od tampax on shelf near workers office GN NA N GN NA N	10/31/25 Same box GN NA N GN NA N	12/10/25 More pads and tampons outside GN NA N GN NA N

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UMASS visits fall

Building			
Herter hall,AD, A	5/10/25 1F W NA N BF W A N 2F GN A N W NA N 3F W NAY (tampax regular, faculty level, no note) 4F W NA N 5F GN NA N 6F W NA N 7F GN NA N	11/1/25 1F W NA N BF W A N 2F GN A N W NA N 3F W NA N 4F W NA N 5F GN NA N 6F W NA N 7F GN NA N	12/1/25 1F W NA N BF W A N 2F GN A N W NA N 3F W NA N 4F W NA N 5F GN NA N 6F W NA N 7F GN NA N
Goodell Hall	5/10/25 3F GN A N 4F GN A N 5F GN A N GN A N GN A N 6F GN A N	11/1/25 3F GN A N 4F GN A N 5F GN A N GN A N GN A N 6F GN A N	12/1/25 3F GN A N 4F GN A N 5F GN A N GN A N GN A N 6F GN A N
Goessmann lab a ad	Oct 7 2025 1F GN A Y (small box teetering on top of paper towel machine, says take a pad leave a pad take what u need and donate, only 3 pads 2 without cases) 2F W NA N GN NA N	11/1/25 1F GN A N 2F W NA N GN NA N	12/1/25 1F GN A N 2F W NA N GN NA N
Lederle grad research tower	Oct 7 1F W A Y (regular sized pads and 3 thick pads on top of mirror beside a poster that says chaarg but no supplier note) 2F W NA N 3F W NA N 4F W NA N	11/1/25 1F W A Y (a few pads but not many) 2F W NA N 3F W NA N 4F W NA N 6F W NA N 7F GN A A N 8F W NA N 11F W NA N	12/1/25 1F W A N 2F W NA N 3F W NA N 4F W NA N 6F W NA N 7F GN A A N 8F W NA N 11F W NA N 12F W NA N

	6F W N A N 7F G N A A N 8F W N A N 11F W N A N 12F W N A N 14F W N A N 15F G N A N 16F G N A N	12F W N A N 14F W N A N 15F G N A N 16F G N A N	14F W N A N 15F G N A N 16F G N A N
Campus Center; SC, C	7/10/25 LL W N A N 1F W A N	10/30/25 1F W A N LL W N A N	12/1/25 1F W A N LL W N A N
StudentUnion; SC	10/30/25 GF G N A N G N A N G N A N 1F G N A N G N A N G N A N 2F G N A N G N A N G N A N G N A N	11/1/25 GF G N A N G N A N G N A N 1F G N A N G N A N G N A N 2F G N A N G N A N G N A N G N A N	12/1/25 GF G N A N G N A N G N A N 1F G N A N G N A N G N A N 2F G N A N G N A N G N A N G N A N
Hasbrouck hall; A, AD	Oct 9 GF W A N 1F 2F W N A N 3F W N A N 4F W N A N	11/1/25 GF W A N 1F 2F W N A N 3F W N A N 4F W N A N	12/1/25 GF W A N 1F 2F W N A N 3F W N A N 4F W N A N
Wocester DC; C	10/18/25 1F G N A N W A N	11/1/25 1F G N A N W A N	12/1/25 1F G N A N W A N
Integrated Sciences Building; A, AD	10/18/25 1F W N A N G N A N 2F W N A N 3F W N A N 4F W N A N	11/1/25 1F W N A N G N A N 2F W N A N 3F W N A N 4F W N A N	12/1/25 1F W N A N G N A N 2F W N A N 3F W N A N 4F W N A N
Olver Design Building; A, AD	10/18/25 1F G N A N	11/1/25 1F G N A N	12/1/25 1F G N A N

	2F W A N 3F W A N	2F W A N 3F W A N	2F W A N 3F W A N
Machmer: A, AD	10/30/25 1F GN A N 2F W NA N GN A N GN A N 3F W NA N W NA N 4F W NA N	11/1/25 1F GN A N 2F W NA N GN A N GN A N 3F W NA N W NA N 4F W NA N	12/1/25 1F GN A N 2F W NA N GN A N GN A N 3F W NA N W NA N 4F W NA N
Business Innovation Hub, Isenberg Alford ; A, AD	10/27/25 1F W A N 2F W NA N W NA N W NA N 3F W A N W NA N W NA N	11/1/25 1F W A N 2F W NA N W NA N W NA N 3F W A N W NA N W NA N	12/1/25 1F W A N 2F W NA N W NA N W NA N 3F W A N W NA N W NA N

AMHERST visits fall

Building			
Frost ; L , A , AD	10/3/25 BF W NA N AF W NA N 1F W A N 2F GN A N	10/21/25 BF W NA N AF W NA Y(lose tampons and pads on counter outside) 1F W A Y (A few tampons) 2F GN A N W A N	11/7/25 BF W NA Y (array of panty liners tampons and pads all of various size)(outdated notes from rew AF W NA Y (array of few tampons no pads) 1F W A Y (two tampons) 2F W A N (empty basket) GN A Y (Lots of tampoms amd a few panty liners)
Keefe Campus Center; SC	Oct 4 BF W NA N GN A N 1F (dining room wall, various tampon sizes no pads, note to	11/7/25 BF W NA N GN A N 1F (dining wall tons of tampons anf panty liners, few regular pads,	12/3/25 BF W NA N GN A N 1F dining wall same 2F W NA N GN A N

	rew@amherst.edu) 2F W NA N GN A N (WGC closed on weekends)	“replenished weekly by health education dept, shes and pas, funding provided ny aas, email healthed@amherst Edu) 2F W NA N GN A N	
Valentine hall, C	4/10/25 1F W A N	11/7/25 1F W A N	12/3/25 1F W A N
Chapin hall A ad	4/10/25 BF W NA N GN A N	11/8/25 BF W NA N GN A N	12/3/25 BF W NA N GN A N
Converse Hall; A, AD	OCT 4 BF GN A N W NA N	10/21/25 W NA N BF GN A N	11/8/25 W NA N BF GN A N
Fayeweather, A Ad	Oct 4 BF GN A N 1F GN A N GN A N 2F GN A N GN A N	11/7/25 BF GN A N 1F GN A N GN A N 2F GN A N GN A N	12/3/25 BF GN A N 1F GN A N GN A N 2F GN A N GN A N
Arms music center	11/8/25 GF GN A N GN A N 1F W NA N	12/3/25 GF GN A N GN A N 1F W NA N	12/8/25 GF GN A N GN A N 1F W NA N
Science center	10/21/25 3F GN NA N GN NA N GN A N GN NA N GN NA N GN A N GN NA N GN A N 2F GN NA N GN A N GN NA N GN NA N GN NA N GN NA N GN NA N	11/7/25 3F GN NA N GN NA N GN A N GN NA N GN NA N GN A N GN NA N GN A N 2F GN NA N GN A N GN NA N GN NA N GN NA N GN NA N GN NA N	12/3/25 3F GN NA N GN NA N GN A N GN NA N GN NA N GN A N GN NA N GN A N 2F GN NA N GN A N GN NA N GN NA N GN NA N GN NA N GN NA N

	GN A N 1F W NA N GN NA N GN NA N GN A N GN NA N GN A N BF GN NA N GN NA N	GN A N 1F W NA N GN NA N GN NA N GN A N GN NA N GN A N BF GN NA N GN NA N	GN A N 1F W NA N GN NA N GN NA N GN A N GN NA N GN A N BF GN NA N GN NA N
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HOLYOKE fall visits

Library	10/8/25 2F GN A Y (free aunt flow pad and tampon dispenser w braille! Half full) GN A N (old dispenser doesn't Look in use) GN NA N 3F GN NA N 4F GN A Y(aunt flow dispenser, almost full) GN A N mews W A N 5F GN NA N 6F GN A N W NA N W NA N GN NA N GN NA N(one pad stuck behind the toilet paper tower on top of old pad machine)	11/4/25 2F GN A Y GN A N GN NA N 3F GN NA N 4F GN A N GN A Y (aunt flow dispenser, not full) Mews W A N 5F GN NA N 6F GN A N W NA N W NA N GN NA N GN NA N	12/ 2/25 2F GN A Y GN A N GN NA N 3F GN NA N 4F GN A N GN A Y (aunt flow dispenser,) Mews W A N 5F GN NA N 6F GN A N W NA N W NA N GN NA N GN NA N
Dining Commons; C	Blanch 10/24/25 1F GN A N GN A N W NA N 2F W A Y (free flow pads and tampons dispenser) 3F GN A Y “”””	11/4/25 1F GN A N GN A N W NA N 2F W A Y (free flow pads and tampons dispenser) 3F GN A Y “”””	12/2/25 1F GN A N GN A N W NA N 2F W A Y (free flow pads and tampons dispenser) 3F GN A Y “”””
Carr Laboratory; A, AD	10/8/25 GF GN A N	11/4/25 GF GN A N	12/2/25 GF GN A N

	W A N 1F W A N GN A N	W A N 1F W A N GN A N	W A N 1F W A N GN A N
Clapp Laboratory; A, AD	10/8/25 1F W N A N 2F W N A N 3F GN A N A 4F W N A N	11/4/25 1F W N A N 2F W N A N 3F GN A W N A N 4F W N A N	12/2/25 1F W N A N 2F W N A N 3F GN A W N A N 4F W N A N
Kendade Hall; A AD	OCT 8 25 1F W N A N GN A N 2F GN A N W A Y (small basket on counter, some pads more tampons , tampax and unbranded “please take what you need byt do not use it as your personal supply, these are provided courtesy of physics and astronomy faculty and staff!” 3F GN A N W A N GF GN A N W A N	11/4/25 GF GN A N W A N 1F W N A N GN A N 2F GN A N W A Y (only tampons, same NOTE 3F GN A N W A N	12/2/25 GF GN A N W A N 1F W N A N GN A N 2F GN A N W A Y (only tampons, same NOTE 3F GN A N W A N
Pratt Music Hall; A	10/24/25 1F W A N 2F W A N GN A N 3F GN A N	11/4/25 1F W A N 2F W A N GN A N 3F GN A N	12/2/25 1F W A N 2F W A N GN A N 3F GN A N
Art Museum; A	10/24/25 2F W N A N GN A N 3F GN N A N	11/4/25 2F W N A N GN A N 3F GN N A N	12/2/25 2F W N A N GN A N 3F GN N A N

SMITH fall visits

Wright Hall; A	10/23/25 BF W NA Y (one Always ultras thin pad in a takeout container) W NA N GN A N 1F GN A N GN A N W NA N	BF W NA N W NA N GN A N 1F GN A N GN A N W NA N 11/11/25	12/5/25 BF W NA N W NA N GN A N 1F GN A N GN A N W NA N
Seeyle Hall, ; A, AD	10/23/25 GF W A N GN A N 1F W NA N 2F GN A N W A N 3F GN A N 4F W A N GN A N	11/11/25 GF W A N GN A N 1F W NA N 2F W A N GN A N 3F GN A N W A N 4F W A N GN A N	12/5/25 GF W A N GN A N 1F W NA N 2F W A N GN A N 3F GN A N W A N 4F W A N GN A N
Sabin Reed Hall; A, AD	10/23/25 BF 1F W NA N GN A N GN AN 2F GN A N W NA N GN A N W NA N GN A N 3F W A N GN A N W NA N GN A N 4F GN A N GN A N W NA N W NA N	11/11/25 BF 1F W NA N GN A N GN AN 2F GN A N W NA N GN A N W NA N GN A N 3F W A N GN A W NA N GN A N 4F GN A N GN A N W NA N W NA N	12/5/25 BF 1F W NA N GN A N GN AN 2F GN A N W NA N GN A N W NA N GN A N 3F W A N GN A W NA N GN A N 4F GN A N GN A N W NA N W NA N
Lilly Hall; AD only admin building, includw or not?	10/23/25 1F W NA N 2F GN A N W NA N 3FGN NA N W NA N	11/11/25 1F W NA N 2F GN A N W NA N 3FGN NA N W NA N	12/5/25 1F W NA N 2F GN A N W NA N 3FGN NA N W NA N

Ford Hall; A? Clark science center?	10/23/25 1F W NA N 2F W NA N 3F GN A N GN A N W NA N BF W NA N GN A N GN A N	11/11/25 1F W NA N 2F W NA N 3F GN A N GN A N W NA N BF W NA N GN A N GN A N	12/5/25 1F W NA N 2F W NA N 3F GN A N GN A N W NA N BF W NA N GN A N GN A N
Julia child campus center; SC	10/23/25 BF W NA N GN A N 1F W NA N 2F W NA N	11/11/25 BF W NA N GN A N 1F W NA 2F W NA N	12/5/25 BF W NA N GN A N 1F W NA 2F W NA N
Neilson Library; L	10/23/25 1F GN A N GN A N GN A N 2F GN A N GN A N 3F GN A N GN A N 4F GN A N GN A N GN A N	11/11/25 1F GN A N GN A N GN A N 2F GN A N GN A N 3F GN A N GN A N 4F GN A N GN A N GN A N	12/5/25 1F GN A N GN A N GN A N 2F GN A N GN A N 3F GN A N GN A N 4F GN A N GN A N GN A N

SPRING

HAMPSHIRE

FPH A, AD	2/3/26 BF GN A N 1F GN A N 2F GN NA N GN NA N	3/28/26 BF GN A N 1F GN A N 2F GN NA N GN NA N	4/21/26 BF GN A N 1F GN A N 2F GN NA N GN NA N
Dining Commons: C	2/25/26 1F GN NA N	3/28/26 1F GN NA N	4/9/26 1F GN NA N
Kern: A, C, AD	2/25/26 1F GN A N	3/29/26 1F GN A N	4/9/26 1F GN A N

	GN A N GN A N GN A N 2F GN A N GN NA N	GN A N GN A N GN A N 2F GN A N GN NA N	GN A N GN A N GN A N 2F GN A N GN NA N
Library; L	2/3/26 GF GN NA N 1F 2F GN A N 3F GN A N	3/29/26 GF GN NA N 1F 2F GN NA N 3F GN NA N GN NA N	4/9/26 1F 2F GN NA N 3F GN NA N GN NA N
Wellness Center: S	2/3/26 1F GN NA N	3/29/26 1F GN NA N	4/9/26 1F GN NA N
Emily Dickinson Hall: A, AD	2/3/26 1F GN A N	3/28/26 1F GN A N	4/9/26 1F GN A N
Music and Dance Building: A, AD,	2/3/6 1F GN A N	3/29/26 1F GN A N	4/9/26 1F GN A N
Lemelson: A, AD	2/25/26 1F GN NA N GN NA N	3/28/26 1F GN NA N GN NA N	4/8/26 F GN NA N GN NA N
ASH: A, A	2/3/6 1F GN A N GN A N 2F GN A N	3/28/26 F GN A N GN A N 2F GN A N	4/8/26 1F GN A N GN A N 2F GN A N
CASA: AD	2/25/26 1F GN A N	3/28/26 1F GN A N	4/8/26 1F GN A N
Merrill Life Center: SC, AD	2/3/6 1F GN A N 2F GN A N	3/29/26 1F GN A N 2F GN A N	4/8/26 1F GN A N 2F GN A N
Multisport: ATH	2/25/26 1F W A N	3/29/26 1F W A N	4/8/26 1F W A N
Center for Design: A, AD	2/25/26 1F GN A N	3/29/26 1F GN A N	4/8/26 1F GN A N
QCAC; SC	2/3/6 1F Outside of office pads and tampoms tampax GN NA N	3/29/26 1F tampons box GN NA N GN NA N	4/8/26 1F Outside of office pads and tampoms tampax GN NA N

	GN NA N		GN NA N
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AMHERST

Frost ; L , A , AD	2/19/26 BF W NA N AF W NA Y (some pads and tampons 1F W A Y (a few tampons left) 2F W NA Y (somr tampons n pads) GN A N	3/5/26 BF W NA N AF W NA Y (some pads one tampon) 1F W A N 2F W NA N GN A N	4/10/26 BF W NA N AF W NA Y (some pads adn some tampons 1F W A N 2F W NA N GN A N
Keefe Campus Center; SC	2/19/26 1F yes on wall plenty 2F W NA N GN A N BF W NA N	3/5/26 BF W NA N GN A N 1F dining wall same 2F W NA N GN A N	4/10/26 BF W NA N GN A N 1F dining wall same 2F W NA N GN A N
Valentine hall, C	3/5/26 1F W NA N	3/18/26 1F W NA N	4/10/26 1F W NA N
Chapin hall A ad	2/19/26 BF W NA N GN A N	3/5/26 BF W NA N GN A N	4/10/26 BF W NA N GN A N
Converse Hall; A, AD	3/5/26 BF GN A N W NA N	3/18/26 BF GN A N W NA N	4/10/26 BF GN A N W NA N
Fayeweather, A Ad	2/19/26 BF GN A N 1F GN A N GN A N 2F GN A N GN A N	3/5/26 BF GN A N 1F GN A N GN A N 2F GN A N GN A N	4/17/26 BF GN A N 1F GN A N GN A N 2F GN A N GN A N
Arms music center	3/5/26 GF GN A N GN A N	3/18/26 GF GN A N GN A N	4/17/26 GF GN A N GN A N

	1F W N A N	1F W N A N	1F W N A N
Science center	3/5/26 3F GN N A N GN N A N GN A N GN N A N GN N A N GN A N GN N A N GN A N 2F GN N A N GN A N GN N A N GN N A N GN N A N GN N A N GN N A N GN A N 1F W N A N GN N A N GN N A N GN A N GN N A N GN A N BF GN N A N GN N A N	3/18/26 3F GN N A N GN N A N GN A N GN N A N GN N A N GN A N GN N A N GN A N 2F GN N A N GN A N GN N A N GN N A N GN N A N GN N A N GN N A N GN A N 1F W N A N GN N A N GN N A N GN A N GN N A N GN A N BF GN N A N GN N A N	4/17/26 3F GN N A N GN N A N GN A N GN N A N GN N A N GN A N GN N A N GN A N 2F GN N A N GN A N GN N A N GN N A N GN N A N GN N A N GN N A N GN A N 1F W N A N GN N A N GN N A N GN A N GN N A N GN A N BF GN N A N GN N A N

UMASS

Herter hall,AD, A	2/6/26 1F W N A N BF W A N 2F GN A N W N A N 3F W N A N 4F W N A N 5F GN N A N 6F W N A N 7F GN N A N	3/12/26 1F W N A N BF W A N 2F GN A N W N A N 3F W N A N 4F W N A N 5F GN N A N 6F W N A N 7F GN N A N	4/13/26 1F W N A N BF W A N 2F GN A N W N A N 3F W N A N 4F W N A N 5F GN N A N 6F W N A N 7F GN N A N
Goodell Hall	3/4/26 3F GN A N 4F GN A N 5F GN A N GN A N GN A N	3/12/26 3F GN A N 4F GN A N 5F GN A N GN A N GN A N	4/13/26 3F GN A N 4F GN A N 5F GN A N GN A N GN A N

	6F GN A N	6F GN A N	6F GN A N
Goessmann lab a ad	3/4/26 1F W NA Y (small box in top of hand towel machine, like 3 pads and panty lines and note that says take apad leave a pad no contact info) 2F W NA N GN NA N	3/17/26 1F W NA Y (a few pads n panty liners) 2F W NA N GN NA N	4/13/26 F W NA Y (a few pads n panty liners) 2F W NA N GN NA N
Lederle grad research tower	3/4/6 1F W NA N 2F W NA N 3F W NA N 4F W NA N 6F W NA N 7F GN A A N 8F W NA N 11F W NA N 12F W NA N 14F W NA N 15F GN A N 16F GN NA N	3/17/26 1F W A N 2F W NA N 3F W NA N 4F W NA N 6F W NA N 7F GN A A N 8F W NA N 11F W NA N 12F W NA N 14F W NA N 15F GN A N 16F GN NA N	4/13/26 1F W A N 2F W NA N 3F W NA N 4F W NA N 6F W NA N 7F GN A A N 8F W NA N 11F W NA N 12F W NA N 14F W NA N 15F GN A N 16F GN NA N
Campus Center; SC, C	2/6/26 1F W A N LL W A N	3/4/26 1F W A Y (MAXIpads and tpax tampons in corner on reachable shelf LL W A N	4/20/26 1F W A Y (pads and tampons in corner) LL W A N
StudentUnion; SC	2/6/26 1F GN A Y (wall attachment w maxithins maxi pads and tampax tampons, fully stocked, only one, hard to reach, multistall bathrm) GN A N GN A N 2F GF GN A N GN A N (multistll)	3/4/26 1F 2F 3F GN A N GN A N (wall attachment empty)	4/20/26

Hasbrouck hall; A, AD	3/4/26 1F W N A N 2F W N A N 3F W N A N 4F W N A N	3/17/26 GF W A N 1F 2F W N A N 3F W N A N 4F W N A N	4/14/26 GF W A N 1F W N A N 2F W N A N 3F W N A N 4F W N A N
Worcester DC; C	2/6/26 1F GN A N W A N	3/17/26 1F GN A N W A N	4/20/26 1F GN A N W A N
Integrated Sciences Building; A, AD	3/3/26 1F W N A N GN A N 2F W N A N 3F W N A N 4F W N A N	3/17/26 1F W N A N GN A N 2F W N A N 3F W N A N 4F W N A N	4/20/26 1F W N A N GN A N 2F W N A N 3F W N A N 4F W N A N
Olver Design Building: A, AD	3/3/26 1F GN A N (really hard to close door and lock it) W A N 2F W A N 3F W A N	3/17/26 1F GN A N W A N 2F W A N 3F W A N	4/20/26 1F GN A N W A N 2F W A N 3F W A N
Machmer: A, AD	3/4/26 1F W N A N (no accessible stalls either) 2F W N A N GN A N GN A N 3F W N A N W N A N 4F W N A N	3/17/26 1F W N A N 2F W N A N GN A N GN A N 3F W N A N W N A N 4F W N A N	4/20/26 1F W N A N 2F W N A N GN A N GN A N 3F W N A N W N A N 4F W N A N
Business Innovation Hub, Isenberg Alford ; A, AD	3/3/26 1F W N A N W A N 2F W N A N W A N W A N 3F W A N W N A N W N A N	3/17/26 1F W N A N W A N 2F W N A N W A N W A N 3F W A N W N A N W N A N	4/20/26 1F W N A N W A N 2F W N A N W A N W A N 3F W A N W N A N W N A N

SMITH

Neilson library	2/11/26 1F GN A N GN A N GN A N 2F GN A N GN A N 3F GN A N GN A N 4F GN A N GN A N GN A N	3/11/26 1F GN A N GN A N GN A N 2F GN A N GN A N 3F GN A N GN A N 4F GN A N GN A N GN A N	4/6/26 1F GN A N GN A N GN A N 2F GN A N GN A N 3F GN A N GN A N 4F GN A N GN A N GN A N
Wright hall	2/11/26 BF W NA N W NA N GN A N 1F W NA N GN A N	3/11/26 BF W NA N W NA N GN A N 1F W NA N GN A N	4/6/26 BF W NA N W NA N GN A N 1F W NA N GN A N
Seelye Hall	3/6/26 GF W A N GN A N 1F W NA N 2F W A N GN A N 3F GN A N W A N 4F W A N GN A N	3/30/26 GF W A N GN A N 1F W NA N 2F W A N GN A N 3F GN A N W A N 4F W A N GN A N	4/6/26 GF W A N GN A N 1F W NA N 2F W A N GN A N 3F GN A N W A N 4F W A N GN A N
Sabin reed	3/6/26 BF 1F W NA N GN A N GN AN 2F GN A N W NA N GN A N W NA N GN A N 3F W A N GN A W NA N GN A N	3/30/26 1F W NA N GN A N GN AN 2F GN A N W NA N GN A N W NA N GN A N 3F W A N GN A W NA N GN A N 4F GN A N	4/7/26 1F W NA N GN A N GN AN 2F GN A N W NA N GN A N W NA N GN A N 3F W A N GN A W NA N GN A N 4F GN A N

	4F GN A N GN A N W NA N W NA N	GN A N W NA N W NA N	GN A N W NA N W NA N
Lilly hall	3/6/26 1F W NA N 2F GN A N W NA N 3FGN NA N W NA N	3/30/26 1F W NA N 2F GN A N W NA N 3FGN NA N W NA N	4/7/26 1FW NA N 2F GN A N W NA N 3FGN NA N W NA N
Ford hall	3/6/26 1F W NA N 2F W NA N 3F GN A N GN A N W NA N BF W NA N GN A N GN A N	3/30/26 1F W NA N 2F W NA N 3F GN A N GN A N W NA N BF W NA N GN A N GN A N	4/25/26 1F W NA N 2F W NA N 3F GN A N GN A N W NA N BF W NA N GN A N GN A N
Julia child campus center	BF W NA N GN A N 1F W NA N 2F W NA N 2/11/26	3/11/26 BF W NA N GN A N 1F W NA N 2F W NA N	4/25/26 BF W NA N GN A N 1F W NA N 2F W NA N

MT HOLYOKE

Library	2/9/26 2F GN A Y (dispenser requires significant force) GN A N GN NA N 3F GN NA N 4F GN A N GN A Y (dispenser) Mews W A N 5F GN NA N 6F GN A N	4/1/26 2F GN A Y GN A N GN NA N 3F GN NA N 4F GN A N GN A Y (aunt flow dispenser,) Mews W A N 5F GN NA N 6F GN A N W NA N	4/21/26 2F GN A Y GN A N GN NA N 3F GN NA N 4F GN A N GN A Y (aunt flow dispenser,) Mews W A N 5F GN NA N 6F GN A N W NA N
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	W N A N W N A N G N N A N G N N A N	W N A N G N N A N G N N A N	W N A N G N N A N G N N A N
Dining commons blanch	2/9/26 1F G N A N G N A N W N A N 2F W A Y~(dispenser is completely empty) 3F G N A Y (no pads only tampons and under 10 left)	4/1/26 1F G N A N G N A N W N A N 2F W A Y~(dispenser pretty full) 3F G N A Y (dispenser half full	4/21/26 1F G N A N G N A N W N A N 2F W A Y 3F G N A Y
Carr	3/9/26 G F G N A N W A N 1F W A N G N A N	4/1/26 G F G N A N W A N 1F W A N G N A N	4/21/26 G F G N A N W A N 1F W A N G N A N
Clapp	3/9/26 1F W N A N 2F W N A N 3F G N A W N A N 4F W N A N	4/1/26 1F W N A N 2F W N A N 3F G N A W N A N 4F W N A N	4/27/26 1F W N A N 2F W N A N 3F G N A W N A N 4F W N A N
Kendade	3/9/26 G F G N A N W A N 1F W N A N G N A N 2F G N A N W A N 3F G N A N	4/1/26 G F G N A N W A N 1F W N A N G N A N 2F G N A N W A N 3F G N A N	4/27/26 G F G N A N W A N 1F W N A N G N A N 2F G N A N W A N 3F G N A N
Pratt music hall	3/9/26 1F W A N 2F W A N G N A N 3F G N A N	4/1/26 1F W A N 2F W A N G N A N 3F G N A N	4/27/26 1F W A N 2F W A N G N A N 3F G N A N
Art museum	3/9/26 2F W N A N	4/1/26 2F W N A N	4/27/26 2F W N A N

	GN A N 3F GN NA N	GN A N 3F GN NA N	GN A N 3F GN NA N
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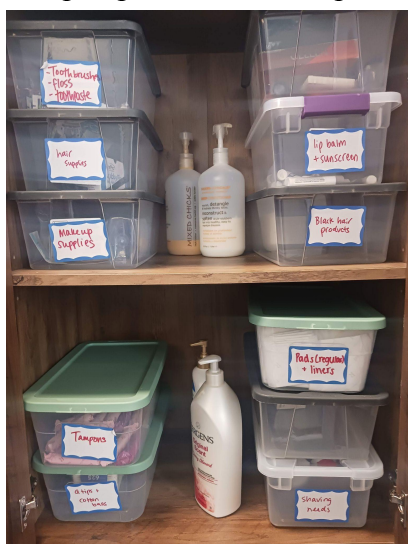
Qualitative

The experiential aspect of this fieldwork is just as important as the presence of products itself; the experience of traversing each campus and navigating the bathrooms often superimposed into very old academic buildings. Most people do not fully notice or actualize the discomfort they may feel in a public bathroom because of its subpar amenities and structures. Acknowledging how this discomfort negatively affects menstruators seeking a space clean and workable to change their menstrual products is essential to a fuller understanding of how design and accessibility intersect to form our cultural health standards. As noted in the literature, of Clara Greed's work of public bathroom sociopolitics in the UK and the architectural experiments of the Tokyo Toilet Project, the beauty, cleanliness, and quality of structures (toilet, sinks, changing tables, mirrors, door length, ramps, stability bars, counters, door locks, lighting, etc) are heavily influenced by the surrounding culture and respect for physical space; Greed notes the closure of many public bathrooms and hesitation of authorities to design and fund more bathrooms because of vandalism, space for drug use, crime, while the Tokyo Toilet Project's website indulges in the description of its cleaning schedule for the bathrooms and dedication sanitation teams, as well as adding plenty of counter space for changing babies and medical device cleaning, as reflective of Japan's deep respect for public spaces and functionality.

Because I did not have the time to conduct surveys with students about their qualitative bathroom accessibility experiences, I am using this section to provide the detailed information needed to contextualize the numbers, using my experiences and observations during my fieldwork as well as student opinion I collected informally during my rounds and in student newspapers. I will describe the design, transport, landscape architecture, infrastructure, of a few bathrooms on each campus and their free menstrual product displays to illustrate the experience of their use-case.

Firstly, during my fieldwork around Amherst College, I randomly picked up Volume clv Issue 5 of the Amherst Student Newspaper, unaware it contained a short article related to bathroom accessibility and amenities! Written by Edwyn Choi, Hailey Yoon, and Jenny Chan, they denote each of the bathrooms in the Valentine dining hall to begin with, discussing how restroom quality is an important part of the campus ecosystem. They created a small criteria for their ratings including amenities, cleanliness, smell, traffic, and location. They consider free menstrual products as amenities and note how both of the women's bathrooms do not provide them. This published student article shows how such a "small" feature such as free products or the lack thereof is very noticeable to students and considered part of their opinion of the school's quality.

Amherst College is loved for its wall of free menstrual products in the Keefe Campus Center that stays well stocked throughout the entire year. Still, I encountered a student who noted that because the product boxes are placed in an area where students regularly walk, eat, sit for long periods, study, etc, it requires reaching over students who are sitting beside the product display. Such social inconvenience and physical inaccessibility renders this option unavailable for many who cannot wait for the crowd to disperse.. (PUT PICTURE HERE). Upstairs in the Keefe Center in the Women's and Gender center, IS IT ACCESSIBLE BY ELEVATOR?, Monday through Friday from 9am to 6pm, lies a tall shelving unit containing free menstrual products, pregnancy tests, band-aids, over the counter medications, lip balm, sunscreen, hair and makeup supplies (WHICH IS WHAT EXACTLY), toothpaste, toothbrushes, and more personal care products. A note attached to the front of the shelving unit asks that students only take a maximum of three items so that plenty can be left over for others as well. The WGC contains several couches and chairs, a large wall of craft supplies, an administration desk, and many informative pamphlets about campus events and health support.



In Amherst College, all floors of the library had plenty of pads in the women's and gender inclusive bathrooms. The lactation room on the bottom floor of the library had tons of pads available, and I noticed the broken down box in the trash can nearby showing the stock was recently filled. The box was labeled one box of tampax super 20 tampons and one always ultra thin regular 42 pads. In the second floor of the library, there were products in the gender inclusive and accessible bathrooms. There were no pads in the Keefe center women's or gender inclusive bathrooms.

I wished to use Hampshire College's Center For Feminisms space as a piece of data for its consistency in supplying free menstrual products in the table right to the left of its door, but there were too many times that floodwaters closed the building. Though there are other

centralized buildings on campus stocking them and other precious features of the CFF suffering from the dismal infrastructure, I first think of the students grateful to have a building so close by for products, going up the ramp ramp leading up to the door only to find it locked as they feel the waves of menstrual cramps moving through them.

Thankfully, the QCAC remains open regardless of torrential rains or melting snow, allowing me to walk in easily (though there is a lip at the door) and meander to the office area where a box of pads and free Plan B is located on the very bottom shelf. Easy to reach for me, but perhaps tedious and even painful for someone in a wheelchair, crutches, rollator, to bend down and extract the needed products and neatly place the box back into its place on the shelf.

PUT PICTURES HERE

UMASS' Student Union building houses plenty of meeting spaces for student clubs and open spaces for studying and eating. In the building is a large, gender neutral, multi stall bathroom and there is no push door to get in, simply a square opening. The stall doors extend from the top of the ceiling to the floor and the locks include visual aids of vacant and occupied with green and red colors, respectively. There are many stalls, over twenty, mostly very narrow and not wheelchair accessible. The counters are also taller than what would aid a wheelchair, and hand dryers sit at waist height and require putting hands into the dryer from an above angle. Admirable for the privacy and high quality of these design features, it lacks accessibility and menstrual products. During my first fieldwork rounds in the spring, I noticed a new addition to the bathroom, a clear plastic attachment to the wall above the sinks containing individually packaged maxi pads and individual tampons. My next visit to this site I noted that the plastic container was empty of menstrual products, signaling use and also lack of maintenance.



In the Campus Center, which contains several student eating locations and campus store on the ground level, hotel rooms on the upper levels, and conference rooms on the lower levels, the large multi stall bathroom on the lower level, accessible by escalator and elevator, houses a small box of menstrual products with no supplier note attached.



Smith College's Neilson library holds several beautifully designed single occupant bathrooms on each floor, yet no free menstrual products can be found on the campus of this historically women's college. The library bathrooms are very spacious, large doors with low locks that visibly display vacant or occupied to the outside of the door, the bathroom is very well

lit but not obnoxiously bright, with ceiling lighting and a round, flat light fixed to the top middle of the very large mirror that sits above the sink. The sinks are quite small and possibly a little too high for a wheelchair to reach the handles. The counters are very large and cream colored, I could imagine how easy it would be to place a small basket of menstrual products on this counter and attach it with a velcro or tape strip to prevent it from moving too far away from the edge of the counter, as if it were placed all the way back towards the wall it would be unreachable to a wheelchair user. Another unique detail was the flushing knob on the side of the toilet, a round silver appendage that is pressed in towards the main chassis and only flushes as it is held in, it does not continue on its own after being released as in other toilets. This feature was new to me and felt relatively unintuitive, and quite low to reach even for a short person like myself.



smith library bathroom

Mount Holyoke proved to be the most thoughtful and sustainable with their free menstrual product approach, including layout, labor and financial distribution, PICTURESSSSSSSSSSSSSSSSSS of library dispensers or in blanch and another bathroom that doesn't have them

Similarities and differences between college design adn infrastructure, between menstrual displays

Preliminary Fieldwork

I want to note that before the formal conduction of fieldwork for this project, I observed and sought out the presence of free menstrual products at the five colleges for my own need and while casually wandering after classes, and in the budding preparation for this thesis itself. These notes below are scattered, uncoded, and over spring 2023 - spring 2025. These notes provide some image of the changes in product supply and budget allocation over time, but do not display the full picture because of the small sample size.

At Hampshire College, the first piece of data that led me to this whole jotting project, was on April 19, 2023 in the FPH first floor “without urinals” bathroom, I noted two period products available that had already been picked though, one box of u by kotex heavy flow ultra thin pads (16) on the box, and one box of tampax pearl tampons in three sizes (8 light 18 regular 8 super), 34 total. Semesters later, I also could only find products in this bathroom, such as U by kotex heavy flow pads ultra thin (16) free

Tampax pearl pack of light(8) regular(18) super(8) free. I noted pads and tampons available for free on a public table in the Kern alongside condoms and lubricant; in the Cole Science Center in a few bathrooms. These products always disappeared within a few days. Some pads were also placed in the student life center, FPH, and laundry room of a dorm building. Also, the wellness center where products are also left, is locked in the winter, leaving students staying over the break with even less free period coverage.

At UMass, I noted that the bathrooms were difficult to find in the library and were often incredibly uncomfortably small, inaccessible even for me as a petite able bodied person.

At Mount Holyoke College, the library had many reserved carrells and there was a common pattern of personal decoration, some of these included small baskets or pouches with pads and tampons, some labeled for public taking. Some of the library bathrooms do not even have disposals for products in them. In the second floor bathroom of the library, to the right past media services, there were 3 gender neutral bathrooms, one with a free tampon and pad dispenser. The stocks were low, indicating high use and or lack of updating the stocks. The brand was aunt flow.

I had no classes at Smith College and was continuously confused by the bus that led there, so I do not have preliminary data on products at Smith.

An important but slightly unrelated public health feature I also noted on Hampshire campus was the introduction of period products and pregnancy tests at the Hampstore, a small on campus store that sells college merchandise, school supplies, snacks, drinks, over the counter medicine, shampoo, soap, and other small things in small quantities. During fall 2023, I once noted the variety and prices of the products available since these products at a cost were more visible to students than the free provisions placed sparingly in random bathrooms across campus. I found that : tampax regular tampons (10) for \$4.29; tampax super tampons (10) for \$3.69 ; Tampax pearl regular tampons (18) \$8.79; Tampax pearl super plus tampons (18) 8.79; Stayfree

ultrathin regular (18) \$7.49; Always ultra thin regular (10) \$4.59; One natracare regular maxi pads(14) \$7.89; Stayfree maxi pads \$7.49; Always thin liners (20) \$2.19; Cottons cotton tampons super(16) \$3.99

During my first semester in Spring 2023, to acquire a pregnancy test on campus one had to make an in-person appointment with Health Services on campus, which would be charged not to the student's college card fund, but to their actual school tuition. On the 19th of October 2023 I called to see if Health Services gave out pregnancy tests, and they said no, but to check if the Hampstore had any, to which I informed them it did not. I was alarmed that the on-campus health administrators were not even aware themselves if proper public health provisions were visibly available to students. Twelve days later, Clearblue pregnancy tests appeared on the Hampstore shelves, the price was not listed on the box. At the nearest CVS, the same test costs \$17.79.

Interview Results

During my past few years as a student and casually searching for free menstrual products between classes, I observed that often, there is a small note alongside a basket of products noting the group that supplied them and sometimes an email for contact information. For locating interviewees, I used the email attached to the products, social media to find campus groups organized around menstrual health awareness, and the health service center email address listed on campus websites. Snowballing was also used as interviewees mentioned other groups or specific people that aided in supplying free menstrual products, as their involvement was not clear or noticeable from the display of products themselves or online sources.

Occasionally, the supplier noted beside these products is vague or non-existent. Finding the email for health services required a lengthy search process across the campus website; some emails never receive a reply, some emails tell me that this department responsibility has been transferred to another (BE PRECISE HERE AND RELATE IT DIRECTLY TO AMHERST COLL), some emails are replied to months later. Some interviews were planned simply by stationing myself in one of the locations that supply them until I am faced with a staff member who has the information I need.

Interviews were semi-structured and conversational, leading with my list of questions about funding, communication with students and administration, distribution procedures, transfer of power, past and future initiatives, and more. Interviewees were encouraged to speak about the fine details of their experiences and role involved in supplying free menstrual products on their campus. I will summarize each individual interview first and then compare and analyse them thematically alongside previous literature.

Sort by themes

Funding, tariffs

Administrative communication and organization

Product distribution and labor

Dealing with turnover and trial and error, knowing how much product one needs

Procedures in years before

Future possibilities

By using the main health services email on Mt Holyoke's website, I was then forwarded to Jamie DeCaro in the office of student involvement. Decaro explained how the student government proposed to the administration a plan for sustainable free menstrual products on campus; the student government receives its funding for student activities and amenities through tuition and administrative funding, so they decided that part of that money be sectioned off to pay for the purchase of menstrual product dispensers and continual purchase of products for restocking. Previously, 5,000 a year was sectioned off the SGA budget for these purchases, and due to increased demand and tariffs, the budget has risen to \$7,000 a year to accommodate. A pilot program was created with seven dispensers purchased from Aunt Flow, with institutional discounts for the school; dispensers were placed

A relatively direct initiative, the most turbulent part of implementation was the labor decisions. Initially, Decaro and others considered making restocking the menstrual product dispenser a student job, so students could be more involved in the health of their community, get paid, and help the administration in product ordering; but because students are busy, get sick, graduate, need different work, it was determined that placing the replenishment on students was unsustainable. SGA continues to purchase the products, but now, facilities staff restocks the dispensers on their daily rounds alongside their regular janitorial responsibilities. Decaro notes that adding this task to facilities took "a lot of convincing" because managers did not want to put more work onto their employees, but this was overturned due to the student demand. Staff of the select buildings used to email Decaro if their dispensers needed more frequent attention since there was not a clear idea of how many products and dispensers should be put out, but now the patterns and needs of certain areas are more well known and dispensers usually are stocked during the semester. Mount Holyoke students have been vocal about their desire to have these dispensers in the residential halls and other building staff reaching out to ask for them as well, but Decaro states that there is not enough funding to cover all the 19-21 residential halls on campus and every building, as the allocation of funds to this project is entirely upon the student government, not the administration. Before this initiative and as it began rolling during the latter half of the Covid pandemic from 2021 to 2022, the Mt Holyoke health clinic on campus could not supply any funds or aid to the distribution of products, and could only offer a place to store surplus materials if needed. Decaro mentions the necessity of having good administrative and student partnerships, a sense of community and trust to help such social and personal initiatives garner institutional support and practical maintenance. She states that facilities now do the "back-end" work while she and the student government maintain the front end support.

Through social media, I found the student group Period@UMASS on Instagram, where they advertise events to discuss menstrual health and awareness, generate funding for the purchase of products and host product drives, pack menstrual kits to donate to nearby homeless and survival shelters, and collaborate with other student groups on campus to discuss the intersection of menstruation with other areas of life and study, such as exercise and medical research.

I interviewed Leah and Zoe and discussed the trajectory of Period@UMass. They explained that this student group was born of a thesis project by a Public Health PhD student who received a grant to purchase pads, tampons, and other menstrual supplies, and several students partnered with her to host an event for the packing of those products as part of the community service aspect of the thesis. Leah explained that when that PhD student graduated in 2022, the club remained, but without much administrative funding or recognition, and significant questions about how to keep up the momentum and manage the transfer of power. Now, the club relies on a yearly budget of around \$70, with it rarely exceeding that; they noted occasional increases to \$120-\$150, but never higher than that. Because of this bare-minimum budget, Period@Umass relies on external partnerships, grants, and collaboration with other clubs to utilize others' higher budget and increased campus connections to acquire menstrual products and have more labor to distribute them to the student body for free.

For example, they discussed how the period product brand Cora reached out to the club members specifically, not through the university administration, to promote Cora's Change the Cycle scholarship by distributing 16,000+ tampons during the run of the scholarship by tabling and other forms of social promotion. Because there was still a supply of tampons after the scholarship closed, the club decided to use the extras to donate and pack menstrual kits for local organizations and drives. Zoe and Leah noted that they contacted their RSO administration to discuss if there were any monetary or administrative conflicts to be solved for this partnership, and they never received a reply, so they continued without much involvement from UMass higher up's.

This led into a further dialogue about the difficulty of being in an RSO, or registered student organization, on UMass' enormous campus. With hundreds of RSO's competing for the university's budget, they note that the university does look at numbers of club members and social reach to determine how funding is distributed. Receiving approval for events and purchases is a tedious and overwhelming process, with both Zoe and Leah describing:

"And then to put in purchase requests you have to do it like 20 days in advance. You have to do it through Amazon. Yeah, like you just send them a link and they prefer Amazon.

Which is a little annoying... So pretty much the timeline is for purchase requests, you submit the purchase request, you have to wait for that to get approved. If you get that approved, then you have to request an appointment with student finance. And then from there you make the appointment and then you have to go into SACL to purchase everything with somebody present and they have to put the card information in and then that's purchased. And then it comes like all the packages come to the student union and we pick them up from source, which is like the resource center... It's kind of hard to partner with local things which I feel like they should make easier because don't they want us to partner with locals, interact with

the community? You know also if you travel off campus, you have to put in a travel request. Because I know basically running an RSO at UMass is just insane. Like a full time job... So tabling here, you also have to go through the administration event request. Yeah, so tabling requests are done through the student union. That's the only place you're really allowed to table unless you get invited to an event. So we tabled twice this semester just in front of Student Union, which is very heavily trafficked during class time. Yeah, I'd say Student Union is probably one of the busiest buildings on campus at Campus center too. But they're right next to each other. Oh, then we also tabled at Sex on the Lawn which was an event done by the reproductive justice club, that was cool and that was just out by the library. I feel like tabling outside has always been better than going inside.

Such lack of dedicated administration to give personalized help, and the division of time between student life and increasingly confusing club paperwork, leaves students with difficulty in maintaining momentum, managing turnover and transfers of power when students graduate, and expanding their scope. The challenge of providing free menstrual products to such a large population like UMass is significant, but not impossible considering the money it takes to maintain the quality of other campus amenities and student life needs of the largest public research university in New England.

We discussed ways UMass could optimize the distribution of free menstrual products, including incorporating it into the regular tasks of custodial staff on their daily rounds, such as how Mount Holyoke College has adapted their menstrual program.

Leah and Zoe note they are unaware of any earlier free menstrual product initiatives before the thesis project that started it all in the early 2020's. Over the course of my year long fieldwork, I have noticed a slight increase in the amount of free products available which may be correlated to increased budgets or connections Period has to other helpful clubs. In February 2024, the Period@UMass Instagram posted about free menstrual product dispenser locations in six buildings on campus: the Integrative Learning Center (S295, S290, S293), Student Union (306), Isenberg School of Management (G39) CROSS CHECK THESE WITH FIELDWORK! AND MENTION THIS IN FIELDWORK SECTION INSTEAD?

At Hampshire College, I met with Isabelle Grady of the Wellness Center to understand how she navigates management of free menstrual products on Hampshire's unique campus. She explained the new and lengthy processes involved in rebuilding the monitoring procedures for refilling free menstrual product sites after years of financial and administrative turbulence, loss of previous data due to IT transitions, and other plans to expand the products offered.

Grady noted that the funding for free menstrual products is combined from the Student Activities Fund (SAF) and administrative budget assigned to Wellness, which is negotiated each year based on information about student need collected through informal monitoring and communication, such as conversations with students or observing how often the free product sites are utilized. She noted that the budget does fluctuate, and that it has gotten "marginally smaller" over the course of the past few years, but it has not significantly dented their ability to purchase and distribute free menstrual products.

Considering student communication, Grady described part of the process of deciding which buildings and locations in buildings would be priority placement for free menstrual products, which included receiving feedback from students that it would be more beneficial to have products in the dorms than in public academic or student center buildings, due to privacy, travel time, and dignity. It is also mentioned that many Residential Advisors (RA's) place free products in the dorm bathrooms through personal funding and in accordance with the needs of students in their halls.

Grady elucidates the turbulent history of turnover and role changing that made it difficult for smooth distribution of menstrual products into public academic buildings; products have been mostly stationed in the Wellness Center, QCAC, and CFF for several years until Grady taking on the role this year to expand the program. She describes that administration such as ResLife or herself in the Wellness Center, rather than janitorial staff, restock the new menstrual product baskets placed in the common rooms of each dorm hall. It was decided products would not be placed in bathrooms because of privacy concerns, as the dorm multi stall bathrooms include showers, and are quite small. Further, because of the crowded design of dorm bathrooms, installations of menstrual product dispensers would be placed at awkward angles for both student use and laborers who would refill them, making that an unsustainable option for the current infrastructure. The turnover rate at Hampshire College is also considered in the laboring decisions, as constantly unfamiliar faces restocking menstrual products in crowded bathroom spaces may deter students from using them. Thus, someone in a consistent Wellness or student residential life role is ideal for restocking the products, as knowing who to contact for further information about the products is necessary for a tight-knit, well functioning community that serves students' immediate needs.

We further discussed accessibility needs beyond the standard ADA compliance, and how the inaccessibility of current infrastructure at Hampshire limits the availability of free menstrual products, such as how a box of pads might be placed on a bathroom counter, but still be out of reach to students in wheelchairs or rollators. We concluded that important factors of product placement include: reach access, ease of restocking, sanitization, and privacy.

Kaitlin Rooks, Medical Director at Smith College describes the online store used by Smith students to acquire free menstrual products.

Previous
Funding
Labor who doing what depending on the population size
Communication
Adaptations and trial and error and accessibility
Further refinement ideas

There was a noticeable amount of difficulty in contacting each person or group I aimed to interview, either through misdirected emails, time spent waiting for a reply, the administrators were significantly swamped .

As a result of these interviews, I have reached several specific conclusions that aid further research in critical menstrual studies: relations between campus population size and labor distribution methods,

Discussion

The Tofu Curtain is a sociological term used to describe the divide between geographic regions and the economic statuses of those on either side; with left-wing politics, higher education, shopping districts on one side and working class, adult families, and lower incomes on the other. The term is most applicable to the divide between college-covered Amherst and working-class Holyoke Massachusetts. This distinction argues that Amherst receives more funding and community care resources than Holyoke because of the prioritization of college students' wellbeing and amenities needs. With a simple trek into downtown Holyoke versus downtown Amherst, it is very clear who receives more maintenance on sidewalks, storefronts, public space, housing, etcetera. This visual clarity of funding begets the question as to why, if there is so much money waiting to be piled onto new campus buildings, landscaping, dining, why is there not more funding diverted to the endurance of free menstrual health programs? My discussions with representatives from each college involved in menstrual initiatives revealed that funding for products is negotiable, done so usually yearly among other budgetary changes, but there is a unanimous agreement that if only they were allocated more money they would be able to easily and eagerly increase students' access to free menstrual health products.

Menstrual health management at higher education facilities are a subtle indicator of the sociopolitical consciousness functioning at that campus. As I have collected through my fieldwork and interviews, creating a sustainable MHM program is not one-size-fits-all, but requires a deep understanding of the campus' unique accessibility, labor routes, student population needs, priorities, and student to admin communication methods to ensure maximum endurance and mutual aid.

Further, I lead this work with intertwining arguments, that menstrual amenities should be mandatory and free at every place of higher education, and that campus design must be more considerate of the comfort of menstruators in their public and residential bathroom floorplans. This study begins as monitoring a feminist inequity, then caves in to reveal the financial and urban design priorities of these five colleges; the inherently connected nature of urban design,

public health, socioeconomics is shown in the MHM trials and errors in front of the Tofu Curtain.

Considering previous literature, the findings of this study point towards

The results of my fieldwork and interviews especially are consistent with a study by Gruer et al. across four university campuses looking into patterns of success in free menstrual product initiatives. Gruer notes that, “...the student champions were heavily involved in the conception and initiation of the initiative, but the administration was primarily responsible for funding and implementation.” (5); “...the need for an administration champion was less crucial due to the ability of the student government to cover the cost of the initiative by levying stable and recurring funds via student fees. The role of these administration champions varied, and included securing funding, helping students to navigate the university bureaucracy, providing guidance on proposal development, and gathering support and approval from other members of the university beucrascy...across the cases, this administration champion was seemingly more effective when they were more senior, had budgetary control, and were better connected to senior leadership whose approval and buy-in was required for implementation (e.g., operations or facilities staff).” (ibid). Similar findings were communicated in interviews with Jamie DeCaro of Mt Holyoke and

Success in free menstrual product initiatives is driven by clear and sustained student demand through student government, surveys, petitioning, conversations with staff, combined with administration developing the foundation for sustainment of these initiatives through funding, work with faculty and staff, monitoring progress, managing turnover and adaptations. Though adapting this process to any campus will have to work with existing infrastructure and administration, there are specific

Further, themes such as accessibility and existing infrastructure, privacy, and practicality, dominated these interviews and fieldwork, and are underresearched in Critical Menstrual Studies.

Financial negotiations were also a consistent theme determining breadth and depth of free menstrual product initiatives.

Conclusions

Menstrual health management will always be important to the lives of menstruators and non menstruators alike. MHM research must increase intersections of menstruation with other aspects of life and practical disciplines such as interior design and accessibility, allowing for strides in public health. This study connects the reality of in-progress menstrual health initiatives at five higher education institutions and understands their origins, similar and different troubles,

distribution methods, negotiations with infrastructure, plans for sustainability, and intersections with campus accessibility. Further, this study places the groundwork for the monitoring of these initiatives, as the codes and formats used to note the presence of products can be reused in future work. With this, a higher awareness can be constructed and realized in critical menstrual studies.

Limitations, Positionality, & Further Research

This collection was done only by me, so the time for data collection was quite limited compared to if I had others to help fieldwork run far more efficiently and acquire a larger sample size. I also decided to only interview at least one person involved in supplying free menstrual products from each college for time's sake, but more perspectives, especially ones that have gone through turnover, would have been very useful for capturing the development of this initiative and cross-checking. As evident as well in interviews conducted with staff currently developing and sustaining free MHM initiatives, changes to accessibility and methods of implementation will move into place after this study ends, changes that I cannot see, document, experience, interview about, thus the "true" and current accessibility of free menstrual products is nearly impossible to reflect. Still, this study is a snapshot of this moment's progress in menstrual health and hygiene. Interviews and surveys with students would have also been ideal, but time did not allow and I wanted to focus on the bureaucratic process rather than student opinion, the latter of which is already plenty documented and explored in other literature, and is discussed by each supplier in my interviews already.

The monitoring of free menstrual products across not only the Five College Consortium but across all universities requires longevity and analysis of real and perceived accessibility for students which must be surveyed as often as the population changes to gauge usage, successes, deficiencies, and solicit suggestions for improvement; as well as transparency of suppliers and financiers of how budgets are allocated toward free products and distributed by who and when.

Future studies in this Consortium should also more thoroughly assess if the brands of free products affects if students use them or not, survey at each college how the spatial details of the placement of products affects access, pilot more campaigns for awareness and student support, and continue innovating work to make each campus accessible to menstruators and their specific spatial needs.

Labor is also a topic especially in need of extended research for menstrual product advocacy, as all interviewees expressed that conversations with facilities and janitorial workers were the hinge for smooth, sustainable menstrual product distribution.

References APA ALPHABETICAL

Rooks, Kaitlin. Personal Interview. Interview by Kadin Ellsworth. March 28, 2026.

Grady, I. Personal Interview. Interview by Kadin Ellsworth.

Leah; Zoe. Personal Interview. Interview by Kadin Ellsworth.

Decaro, J. Personal Interview. Interview by Kadin Ellsworth.

Alexander, K. T., Zulaika, G., Nyothach, E., Oduor, C., Mason, L., Obor, D., Eleveld, A., Laserson, K. F., & Phillips-Howard, P. A. (2018). Do Water, Sanitation and Hygiene Conditions in Primary Schools Consistently Support Schoolgirls' Menstrual Needs? A Longitudinal Study in Rural Western Kenya. *International Journal of Environmental Research and Public Health*, 15(8), 1682. <https://doi.org/10.3390/ijerph15081682>

Crawford, B. J., & Waldman, E. G. (2022). *Menstruation Matters: Challenging the Law's Silence on Periods*. NYU Press. <http://www.jstor.org/stable/jj.4493315>

Munro AK, Hunter EC, Hossain SZ, Keep M (2021) A systematic review of the menstrual experiences of university students and the impacts on their education: A global perspective. *PLoS ONE* 16(9): e0257333. <https://doi.org/10.1371/journal.pone.0257333>

Lauren F. Cardoso¹, Anna M. Scolese², Alzahra Hamidaddin² and Jhumka Gupta^{2*} Period poverty and mental health implications among college-aged women in the United States Cardoso et al. *BMC Women's Health* (2021) 21:14 <https://doi.org/10.1186/s12905-020-01149-5>

Palgrave Handbook Of Critical Menstruation Studies.
<https://link.springer.com/book/10.1007/978-981-15-0614-7>

Rawat, M., Novorita, A., Frank, J. et al. "Sometimes I just forget them": capturing experiences of women about free menstrual products in a U.S. based public university campus. *BMC Women's Health* 23, 351 (2023). <https://doi.org/10.1186/s12905-023-02457-2>

Røstvik, C. M. (2022). *Cash Flow: The businesses of menstruation*. UCL Press.
<http://www.jstor.org/stable/j.ctv20pxz8z>

Schmitt, M.L., Dimond, K., Maroko, A.R. et al. "I stretch them out as long as possible:" U.S. women's experiences of menstrual product insecurity during the COVID-19 pandemic. *BMC Women's Health* 23, 179 (2023). <https://doi.org/10.1186/s12905-023-02333-z>

Columbia Public Health. (2020). How Do We Measure Progress? Monitoring Menstrual Health and Hygiene. [Video]. Youtube. <https://www.youtube.com/watch?v=TqGDNBr76xk>

Vredenburg, A. G., Williams, K., Zackowitz, I. B., & Welner, J. M. (2010). EVALUATION OF WHEELCHAIR USERS' PERCEIVED KITCHEN AND BATHROOM USABILITY: EFFORT AND ACCESSIBILITY. *Journal of Architectural and Planning Research*, 27(3), 219–236.
<http://www.jstor.org/stable/43030907>

<https://www.google.com/search?q=how+accessibility+is+measured&oq=how+accessibility+is+measured&aqs=chrome..69i57.5758j0j1&sourceid=chrome&ie=UTF-8>

<https://www.itf-oecd.org/sites/default/files/docs/measuring-accessibility-methods-issues.pdf>

<https://community-partnership.org/wp-content/uploads/2020/07/MeasuringforAccessibility101.pdf>

https://www.itf-oecd.org/sites/default/files/docs/measuring-accessibility-methods-issues_1.pdf

<https://www.nature.com/articles/s41598-023-28460-z>

<https://journals.library.columbia.edu/index.php/cjgl/article/view/8842/4544>

Lynch, R. J. (1998, August). Accessibility: how do you measure (and achieve) it? PN - Paraplegia News, 52(8), 24+.
https://link.gale.com/apps/doc/A21049448/HRCA?u=mlyn_oweb&sid=googleScholar&xid=41686366

Hennegan, J., Brooks, D.J., Schwab, K. J., & Melendez-Torres, G.J. (2020). [Measurement in the study of menstrual health and hygiene: A systematic review and audit](https://doi.org/10.1371/journal.pone.0232935). PLoS ONE, 15(5) e0232935. <https://doi.org/10.1371/journal.pone.0232935>

WATCH (57:57): Save the Children USA (2019, November 27). [Innovation in School-based MHM Programming: How do we know what works?](#) [Webinar].

Columbia University Mailman School of Public Health (n.d.). [Measuring Progress on MHH: Infographics \[Education, Gender, Psychosocial Health & Sexual and Reproductive Health\]](#).

Barrington, D.J., Robinson H.J., Wilson, E., & Hennegan, J. (2021). [Experiences of menstruation in high income countries: A systematic review, qualitative evidence synthesis and comparison to low- and middle-income countries](#). PLoS ONE, 16(7):e0255001.

Haver, J., Long, J.L., Caruso, B.A., & Dreibelbis, R.(2018). [New Directions for Assessing Menstrual Hygiene Management \(MHM\) in Schools: A Bottom-Up Approach for Measuring Program Success](#). *Studies in Social Justice*. 12(2), 372-381

Hall, P. and Imrie, R. (1998), “Architectural practices and disabling design in the built environment”, *Environment and Planning B: Planning and Design*, Vol. 26, pp. 409-425. <https://doi.org/10.1068/b260409>

United States. Department of Health and Human Services. Office on Women’s Health author, United States. Congress. House. Committee on Appropriations sponsoring body, United States. Department of Health and Human Services. Office of the Secretary, & Document without shelves. (2022). *Menstrual hygiene product affordability and accessibility for U.S. individuals a report to the House Committee on Appropriations U.S. Department of Health and Human Services, Office of the Secretary, Office on Women’s Health*. U.S. Department of Health and Human Services, Office of the Secretary, Office on Women’s Health.

[1]U. Dave, A. Palaniappan, E. Lewis, and B. Gosine, “AN OVERVIEW OF PERIOD POVERTY AND THE PUBLIC HEALTH BENEFIT IMPACT OF PROVIDING FREE FEMININE HYGIENE PRODUCTS”, *IJHSRP*, vol. 7, no. 2, pp. 221–226, Aug. 2022, [doi: 10.33457/ijhsrp.971839](https://doi.org/10.33457/ijhsrp.971839).

Simonson, S., Glick, S., & Ellen C. Nobe, M. (2013). Accessibility at a public university: student’s perceptions. *Journal of Facilities Management*, 11(3), 198–209. <https://doi.org/10.1108/jfm-06-2012-0025>

Felix Johan Pot, Bert van Wee, Taede Tillema, Perceived accessibility: What it is and why it differs from calculated accessibility measures based on spatial data. *Journal of Transport Geography*. Volume 94, 2021, 103090, ISSN 0966-6923, <https://doi.org/10.1016/j.jtrangeo.2021.103090>

Muzemil, Abdulfettah. “Campus physical environment accessibility for person with disabilities in the Ethiopian public universities.” *International Journal of Multicultural and Multireligious Understanding*, vol. 5, no. 5, 11 Oct. 2018, p. 286, <https://doi.org/10.18415/ijmmu.v5i5.455>.

Further Reading

<https://www.aljazeera.com/news/2022/6/17/a-crisis-the-us-tampon-shortage-explained>

Appendix

INFORMED CONSENT FORM

You are invited to take part in a research study conducted by Kadin Ellsworth, a student at Hampshire College, Amherst, MA, as a part of her research project, Measuring Accessibility of Free Menstrual Products Across the Five Colleges. This study, as well as your rights as a participant, are described below.

Description: This study compares how many free menstrual products each of the Five Colleges provides to students, and how these products are financed, distributed, and contributed to by the student body. To do this I will conduct fieldwork at a select sample of buildings at each school, visiting these buildings three times a semester to note if each bathroom contains free menstrual products or not. Interviews will be conducted with select members of each school's community that contribute to the financing and distribution of these products, to investigate and compare the details of each college's procedure for this public health initiative.

Confidentiality: The records of this study will be kept private. The information you provide will be kept confidential. Your answers will not be associated with your name unless otherwise indicated below. Rather, each participant will be given an identification number on the interviewer's sheet. In any report we may publish, your information will not include any identifiable data. The audio/videotape of your participation will be destroyed after it has been transcribed. All identifying records will be destroyed after one year

☐ I Do/ ☐ Do Not Agree to have my real name used in this research and any publications that result from the research.

☐ I Do/ ☐ Do Not Agree to have my interview audio recorded by the researcher.

☐ I understand that research consented to may be published and available to the public indefinitely.

Risks & Benefits: There are minimal to no risks to your safety posed by this study. If you ever feel uncomfortable during the study, you may stop at any time. Should local support be needed, the researcher will provide you with contact information for local support groups who can assist you.

Freedom to Withdraw or Refuse Participation: You have the right to stop at any time, to refuse to answer any of the interviewer's questions at any time, and to withdraw from the project at any time without prejudice from the investigator.

Grievance Procedure: If you have any concerns or are dissatisfied with any aspect of this study, you may report your grievances anonymously if desired to the Human Subjects Institutional Review Board, % Dean of Faculty Office, Hampshire College, Amherst, MA 01002, 413-559-5676, IRB@hampshire.edu. Questions? Please feel free to ask the investigator any questions before signing the consent form or at any time during or after the study.