Project Details	
Project Code	PHS27Br Tinner
Title	Menstrual health and intersectional inequalities: a mixed methods study
Research Theme	Population Health Sciences
Project Type	Dry lab
Summary	Menstrual symptoms and wellbeing are shaped not only by biology, but also by social inequalities. Experiences of pain, mood changes, fatigue, mental health and access to support can differ according to ethnicity, socioeconomic position, disability and other overlapping characteristics. An evidence gap remains regarding intersectional inequalities in menstrual experiences. This PhD will use longitudinal menstrual tracking data alongside qualitative research to investigate inequalities in menstrual health experiences. Findings will improve understanding of menstrual health inequities and help inform more inclusive healthcare, policy and support for diverse populations.
Description	Menstrual health is increasingly recognised as a key public health issue and an important component of wellbeing across the life course (Hennegan et al. 2021). Menstrual cycle–related symptoms such as pain, fatigue, mood changes, sleep disturbance and cognitive difficulties are highly prevalent and can substantially affect quality of life, education, employment, social participation and mental health (Armour et al. 2019 , Sawyer et al. 2025). However, menstrual health research has historically been underfunded and under-prioritised, with many experiences normalised, dismissed or poorly understood within healthcare and research contexts (Department of Health and Social Care 2022 , Tinner and Alonso Curbelo 2025). There is emerging but limited evidence that menstrual experiences are socially patterned (García-Egea et al. 2025). Symptom severity, diagnosis, healthcare access and menstrual wellbeing differ according to socioeconomic position, race and ethnicity, disability, neurodivergence, gender identity and sexuality. However, most existing research considers these factors in isolation. Intersectionality – a framework grounded in Black Feminist Thought (Crenshaw 1989) – provides a valuable lens through which to understand how overlapping social positions and systems of oppression shape health experiences and inequalities. A more nuanced understanding of menstrual health inequalities is needed to support equitable healthcare provision, targeted intervention development and improved wellbeing outcomes Despite increasing policy interest in women's health inequalities across the UK nations, there remains limited understanding of intersectional inequalities in menstrual health and wellbeing, particularly using UK quantitative data. Innovative digital menstrual tracking datasets provide a novel opportunity to investigate symptom patterns and wellbeing dynamically and in greater depth. This PhD will address these gaps by using longitudinal menstrual cycle tracking data alongside qualitative methods to investigate how menstrual symptom experiences and wellbeing differ across intersecting social identities and positions. The project will contribute to more inclusive understandings of menstrual health inequalities and identify opportunities for improving support, policy and practice.

	Research aim: To use intersectionality as a theoretical and applied framework to examine inequalities in menstrual cycle–related symptoms and wellbeing, and to identify mechanisms and opportunities for improving menstrual health equity. To synthesise evidence on intersectional inequalities in menstrual health To examine sociodemographic intersections in relation in menstrual cycle–related symptoms, including mental health To explore ways in which intersectional menstrual health inequalities are experienced by different groups To identify implications for policy, healthcare practice and future menstrual health interventions Potential methods The balance of training and methods is flexible and will be steered by the interests of the student. The supervisory team have expertise in both quantitative and qualitative methods and this project will benefit from a mixed methods approach. Methods may include: A systematic or scoping review of studies on inequalities in young women's menstrual symptoms and mental health outcomes Quantitative analyses using longitudinal cohort data (e.g. CycleTrack as part of ALSPAC and Born in Bradford) using basic and advanced epidemiological methods to investigate inequalities in young women's experiences of menstrual symptoms Qualitative semi-structured interviews with women to explore lived experience with menstrual symptoms with an intersectional equity approach Added value features The supervisory team has a vast network of collaborators, engagement opportunities and skills enhancement that can feed directly into the student's development. Dr Tinner's longstanding collaboration with the Women's Health Plan team at the Scottish Government and the NHS Women's Health Lead's Network, who will provide unique policy opportunities for policy and practice impact. Prof Sharp leads the CycleTrack study, which is collecting frequent data over three menstrual cycles in ALSPAC and Born in Bradford participants to build a holistic understanding of menstrual health. She also leads the Menarche Menstruation Menopause and Mental Health (4M) consortium – providing access to a large global network of researchers and non-academics working in menstrual health. There is also the option for an interested student to conduct comparative analyses between UK and international women, facilitated by Prof Channon's extensive networks across low- and middle-income countries. The supervisory team will facilitate meetings with external partners, including Cysters (a grassroots charity committed to breaking down systemic barriers that create menstrual health inequalities) and Irise (a charity centred around global menstrual justice). These represent potential options for the Horizon placement, with this topic lending itself to many different environments across policy, practice and the charity sector. In encouraging this outward-looking approach, the PhD project presents a unique opportunity to engage with key stakeholders from the start, which is essential for generating impact. The student will be an active

	participant in this process, being encouraged to forge new networks of direct relevance to their PhD.
Can be completed part time?	Yes
Supervisory Team	
Lead Supervisor	
Name	Dr Laura Tinner
Affiliation	Bristol
College/Faculty	Health and Life Sciences
Department/School	Bristol Medical School, Population Health Sciences
Email Address	laura.tinner@bristol.ac.uk
Co-Supervisor 1	
Name	Professor Gemma Sharp
Affiliation	Exeter
College/Faculty	Faculty of Health and Life Sciences
Department/School	School of Pyschology
Co-Supervisor 2	
Name	Professor Laura Howe
Affiliation	Bristol
College/Faculty	Health and Life Sciences
Department/School	Bristol Medical School
Co-Supervisor 3	
Name	Professor Melanie Channon
Affiliation	Bath
College/Faculty	Faculty of Humanities and Social Sciences
Department/School	Department of Social & Policy Sciences