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Being a girl shouldn't hurt

The dimensions of girls' right to menstrual dignity and legislative mapping in the National Congress

May, 2026

Being a girl shouldn't hurt: the dimensions of girls' right to menstrual dignity and legislative mapping in the National Congress

1. Diagnosing the problem: a historically invisible pain

Although menstruation is a natural biological phenomenon, it remains marked by stigma, silence, and a lack of integrated public policies. Historically, the institutional response to the issue has been predominantly linked to the notion of menstrual hygiene and period poverty[1], focusing on access to products and basic infrastructure[2].

While this approach represents a necessary and important advance, it is insufficient to address the complexity of the issue, which requires a comprehensive, intersectoral, rights-based approach to menstrual health that also addresses pain and conditions such as endometriosis, for example, and connects them to human rights, particularly the rights of children and adolescents.

For this population, menstruation is not merely a physiological event, but a social milestone that brings new restrictions and constraints. From their first period, many girls face misinformation and shame and may be exposed early to gender-based violence that affects their

[1] SOMMER, M. et al. Adolescent menstrual health must go beyond pads. BMJ. 2025 Jan 28;388:e077515. doi: 10.1136/bmj-2023-077515. PMID: 39875162; PMCID: PMC12036561.

[2] HRC - UN Human Rights Council. *Menstrual hygiene management, human rights and gender equality.* A/HRC/56/L.26. Geneva: United Nations, 2024. Accessed: Apr. 16, 2026.

self-esteem and social participation. These barriers disproportionately affect girls and adolescents in vulnerable situations, deepening structural inequalities of gender, race, and territory. This context creates a landscape of invisibility that directly undermines the realization of a range of fundamental rights.

The reality of girls in Brazil and worldwide:

66% - 73%

of adolescent girls and young women worldwide live with menstrual pain

30% - 35%

of them experience moderate to severe pain

62% - 75%

of those referred for specialized assessment have confirmed endometriosis[4,5].

Diagnosis, however, can take up to 12 years[6], prolonging suffering and worsening physical and emotional consequences.

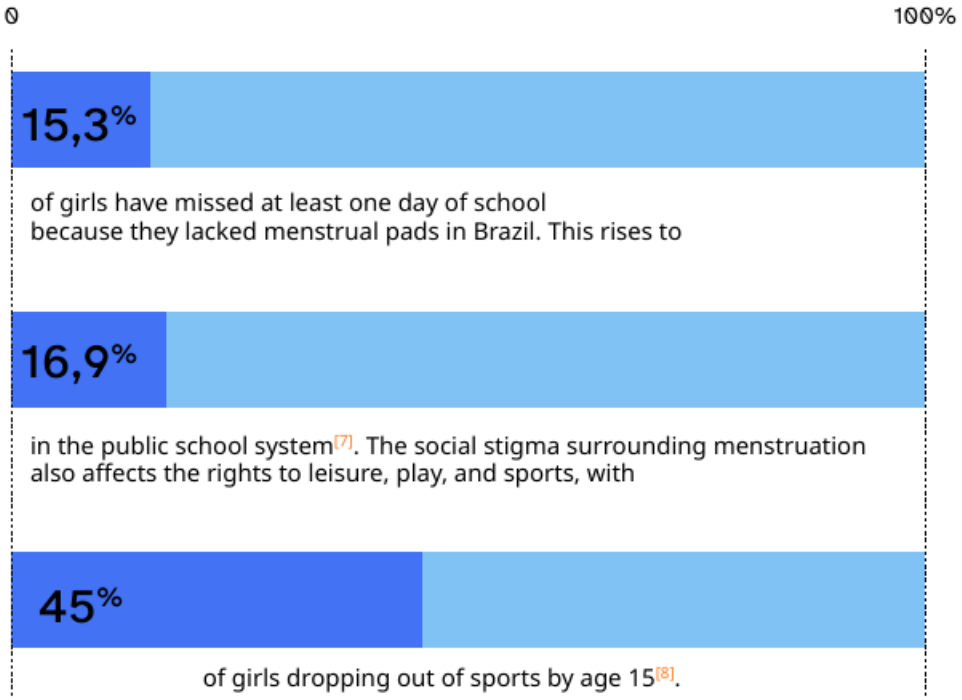
[3] WANG, Liwen et al. *Prevalence and Risk Factors of Primary Dysmenorrhea in Students: A Meta-Analysis.* Value in Health, v. 25, n. 10, p. 1678-1684, 2022. Available at: https://doi.org/10.1016/j.jval.2022.03.023.

[4] ARRUDA, Guilherme Tavares de et al. *Worldwide prevalence of dysmenorrhea: a systematic review and meta-analysis across 70 countries.* PAIN, v. 167, n. 1, p. 41-55, 2026. Available at: https://doi.org/10.1097/j.pain.0000000000003768. Accessed: Apr. 16, 2026.

[5] SACHEDINA, Aalia; TODD, Nicole. *Dysmenorrhea, Endometriosis and Chronic Pelvic Pain in Adolescents.* Journal of Clinical Research in Pediatric Endocrinology, v. 12, Suppl. 1, p. 7-17, 2020. Available at: https://doi.org/10.4274/jcrpe.galenos.2019.2019.S0217. Accessed: Apr. 16, 2026.

[6] WHO - World Health Organization. *Endometriosis.* Geneva: WHO, 2023. Available at: https://www.who.int/news-room/fact-sheets/detail/endometriosis. Accessed:

Direct impacts on education:



In terms of professional development, the effects accumulate over a lifetime: women with endometriosis may lose up to 10.8 hours of work per week because of pain and fatigue, facing absences, reduced hours, and leave[9]. A multisectoral analysis of this scenario must also recognize that menstruation marks a moment of greater exposure to violence. It is no coincidence that about 33% of reported rapes in the country are against girls aged 10 to 13 - and most rape victims (55.6%) are Black[10].

In the cultural and information-access dimension, silence, stigma, and misinformation limit knowledge about one's own body and reinforce patterns of shame and exclusion. In the care dimension, gender inequalities show that girls spend, on average, 16 hours on household chores and caring for others, while boys spend around 9.6 hours on these tasks[11]. Finally, the dignity dimension shows that 58.8% of girls living in homes without a toilet or shower are Black or Brown[12], demonstrating the intersection of race, gender, and class in access to minimum conditions for menstrual health management.

[7] IBGE - Brazilian Institute of Geography and Statistics. *National Survey of School Health - PeNSE 2024.* Rio de Janeiro: IBGE, 2024. Accessed: Apr. 16, 2026.

[8] NIKE; DOVE. *Nike Partners With Dove to Help Build Body Confidence in Girls.* 2023. Available at: https://about.nike.com/en/newsroom/releases/nike-partners-with-dove-to-help-build-body-confidence-in-girls. Accessed: Apr. 16, 2026.

[9] NNOAHAM, K. E. et al. Reprint of: *Impact of endometriosis on quality of life and work productivity: a multicenter study across ten countries.* Fertility and Sterility, [S. l.], v. 112, n. 4 Suppl. 1, p. e137-e152, Oct. 2019. DOI: 10.1016/j.fertnstert.2019.08.082. Accessed: Feb. 26, 2026.

[10] FBSP - Brazilian Forum on Public Safety. *Brazilian Public Security Yearbook.* Sao Paulo: Brazilian Forum on Public Safety, 2025. Available at: https://forumseguranca.org.br/wp-content/uploads/2025/07/anuario-2025.pdf. Accessed: Apr. 16, 2026.

[11] IBGE - Brazilian Institute of Geography and Statistics. *Continuous PNAD 2022.* Rio de Janeiro: IBGE, 2022. Accessed: Apr. 16, 2026.

[12] UNICEF; UNFPA. *Period Poverty in Brazil: Inequality and Rights Violations.* Brasilia: UNICEF; UNFPA, 2021. Available at: https://www.unicef.org/brazil/relatorios/pobreza-menstrual-no-brasil-desigualdade-e-violacoes-de-direitos. Accessed: Apr. 16, 2026.

In light of the above, and as recognized by the UN Office of the High Commissioner for Human Rights, menstrual health is an important determinant for the realization of all human rights of women and girls in all their diversity[13]. For this reason, there is an urgent need to adopt a comprehensive, integrated, and multisectoral approach to this issue, based on recognizing, guaranteeing, and realizing the right to menstrual dignity.

[13] OHCHR - Office of the United Nations High Commissioner for Human Rights. *High Commissioner for Human Rights Statement on Menstrual Health.* Geneva: June 21, 2022. Available at: https://www.ohchr.org/en/statements-and-speeches/2022/06/high-commissioner-human-rights-statement-menstrual-health. Accessed: Apr. 10, 2026.

2. Girls' right to menstrual dignity

The normative response to the problem presented requires recognizing that girls are holders of a human and fundamental right to menstrual dignity, understood as an interdependent bundle of rights. This right does not arise in isolation; it stems from a systematic interpretation of constitutional and international human rights norms, especially through the lens of the doctrine of comprehensive protection and absolute priority set out in Article 227 of the 1988 Federal Constitution (CF), the Child and Adolescent Statute (ECA, 1990), and Articles 3 and 4 of the Convention on the Rights of the Child (CDC, 1989).

Adopting a child- and adolescent-rights-based approach to the right to menstrual dignity means recognizing that girls, after menarche, remain children, rights-holders with specific demands and needs. Menstruating does not automatically make them adults; they remain girls. Accordingly, an intersectoral response should be guided by:

- **Absolute priority**, which encompasses priority protection in all circumstances, precedence in public services, preference in the formulation and implementation of public policies, and privileged allocation of public resources;
- **Non-discrimination and intersectionality**, recognizing the structural inequalities that shape the right to menstrual dignity, considering that Black, Indigenous, peripheral, traditional-community, disabled, impoverished girls, or girls in the juvenile justice system face aggravated forms of rights violations;
- **Comprehensive protection and equity**, which establish the State's duty to ensure effective conditions for the full exercise of rights through legislative measures, public policies, and affirmative actions that address structural inequalities and guarantee dignified, healthy, and safe development.

[14] UNICEF; UNFPA. *Period Poverty in Brazil: Inequality and Rights Violations*. Brasilia: UNICEF; UNFPA, 2021. Available at: https://www.unicef.org/brazil/relatorios/pobreza-menstrual-no-brasil-desigualdade-e-violacoes-de-direitos. Accessed: Apr. 16, 2026.

Thus, the right to menstrual dignity is composed of:

a) Right to comprehensive health

Menstrual health should be understood as a state of complete physical, mental, and social well-being, not merely in relation to the absence of disease, but to the menstrual cycle as a whole. To this end, it should be addressed from a life-course perspective, from before menarche through after menopause, and integrated into Primary Health Care.

→ **Legal basis:** Arts. 6, 196 and 227 of the CF; Arts. 7 and 11 of the ECA; Art. 24 of the CDC; Arts. 19 and 20 of the Youth Statute.

b) Right to education

Considering that nearly 90% of school-age girls spend three to seven years of their school lives menstruating[14], schools must be menstruation-friendly environments, where policies related to physical infrastructure (safe, private, equipped toilets and access to water and basic sanitation), access to supplies, and educational and health support not only reduce school dropout but also promote students' mental health and menstrual dignity. Quality menstrual awareness and education should engage both girls and boys in combating stigma and taboos and challenging the normalization of pain.

→ **Legal basis:** Arts. 6 and 205 of the CF; Arts. 53 and 54 of the ECA; Arts. 28 and 29 of the CDC; Arts. 7 to 13 of the Youth Statute; Art. 4 of Decree No. 14,241/21.

c) Right to leisure, play, and sports

The right to leisure, play, and sports must be ensured continuously, including during menstruation. Restrictions on these activities do not stem from biological limitations, but from social norms and gender stigmas that associate menarche with a transition to adult roles and impose restrictive behaviors. These social constructs directly affect girls' comprehensive development, limiting their freedom and social participation and exposing them to more violence. A girl who menstruates does not stop being a

girl. Ensuring this fundamental aspect of menstrual dignity means making sure menstruation does not become an obstacle to the full exercise of this right.

➔ **Legal basis:** Art. 227 of the CF; Art. 16, IV of the ECA; Art. 31 of the CDC; Arts. 28 and 29 of the Youth Statute.

d) Right to professional development

Gender inequality in the labor market does not begin in adulthood; it is built throughout the trajectories of girls and adolescents. Marked by stigma, lack of access to supplies, and inadequate infrastructure, girls' professional development is harmed through reduced school attendance, participation in training activities, and continued presence in institutional settings. This cumulative effect reduces the qualifications and competitiveness of girls and young women and is particularly pronounced among girls in socioeconomically and racially vulnerable situations. Therefore, the right to menstrual dignity must be realized in the context of equal opportunities in the world of work.

➔ **Legal basis:** Art. 227 of the CF; Art. 69 of the ECA; Art. 28 of the CDC; Apprenticeship Law (Law No. 10,097/2000); Art. 14 of the Youth Statute.

e) Right to family and community life

Full participation in family and community life depends on overcoming symbolic and material barriers associated with menstruation. Stigma, shame, and cultural restrictions often lead girls to isolate themselves, reducing social interaction and undermining emotional and relational development. Guaranteeing the right to menstrual dignity therefore means promoting safe, informed, discrimination-free family and community environments in which girls can participate fully in social life.

➔ **Legal basis:** Art. 227 of the CF; Art. 4 of the ECA; Art. 4 of the Legal Framework for Early Childhood.

f) Right to protection from violence, neglect, and exploitation

Neglect and omission regarding menstrual needs can increase girls' vulnerabilities in intersectional ways and constitute rights violations, especially when they expose girls to health risks, humiliation, exclusion, or aggression, creating a scenario of menstrual violence. Comprehensive protection requires the State to prevent these situations by ensuring adequate material and institutional conditions for exercising menstrual dignity.

➔ **Legal basis:** Art. 227 of the CF; Arts. 5, 17 and 18 of the ECA; Arts. 19 and 34 of the CDC.

g) Right to culture and information

Access to adequate, reliable information, including online, that is scientific and free of stigma about the body and menstruation enables girls and adolescents to understand their cycles in healthy and autonomous ways, while the cultural dimension helps overcome taboos, silences, and discrimination historically associated with the issue.

➔ **Legal basis:** Art. 227 of the CF; Art. 4 of the ECA; Art. 21 of the Youth Statute.

h) Right to care

The right to care, under a human-rights-based approach, should be understood as guaranteeing the material and relational support necessary to ensure full participation in society with dignity and autonomy. Girls are holders of the right to care, and their specific needs should guide the formulation of public policies and the organization of responsive care systems that recognize these demands and ensure conditions for exercising autonomy and comprehensive development.

➔ **Legal basis:** Art. 227 of the CF; Advisory Opinion No. 31 of 2025 of the IACHR/OAS on the content and scope of care as a human right and its interrelationship with other rights.

i) Right to dignity

Article 17 of the ECA, in defining the right to dignity as the inviolability of physical, psychological, and moral integrity, provides a direct legal basis for understanding menstrual dignity as an extension of this right. Lack of access to hygiene products, adequate information, and safe conditions for managing menstruation compromises not only physical health, but also girls' self-esteem, privacy, and emotional well-being. Ensuring menstrual dignity means guaranteeing the material and symbolic conditions for the menstrual cycle to be experienced without violations of integrity and respect.

➔ **Legal basis:** Art. 227 of the CF; Art. 15 of the ECA.

3. The role of the Legislative Branch in guaranteeing the right to menstrual dignity

In light of Article 227 of the CF and Article 4 of the ECA, which establish the duty of the family, society, and the State to ensure, with absolute priority, the rights of children and adolescents, the right to menstrual dignity should be understood as a shared responsibility among different actors. In this context, the role of the Legislative Branch stands out: it is responsible for formulating and improving public policies aimed at realizing this right. Thus, bills addressing menstrual health, disabling pelvic pain, and endometriosis are essential to confronting conditions that affect millions of girls and women, often rendered invisible or underdiagnosed.

According to an analysis of proposals under consideration in the Chamber of Deputies and the Federal Senate, completed in April 2026 (see mapping below), some themes appear more frequently:

- **Access to health and care in the SUS:** proposals aimed at expanding access to diagnosis, treatment, and follow-up for endometriosis in the Unified Health System (SUS), with emphasis on reducing diagnostic delays and improving comprehensive, integrated care.

- **Education and school retention:** initiatives that recognize the impacts of menstrual health on educational trajectories, including proposals to guarantee leave for students at different levels and modalities of education, in order to reduce absenteeism and promote school retention.

- **Labor rights and social protection:** proposals addressing the interface between menstrual health and labor relations, including specific leave provisions and social protection mechanisms, such as the possibility of work leave and, in

some cases, retirement for women with disabling pain.

- **Institutionalization of public policies:** proposals aimed at creating, expanding, or improving government programs related to menstrual health and addressing endometriosis, with a focus on structuring permanent public policies.

- **Symbolic recognition and social mobilization:** proposals related to establishing commemorative dates and official campaigns to increase the visibility of the issue and strengthen public awareness.

- **Menstrual dignity and access to supplies:** initiatives that guarantee and expand access to menstrual hygiene products, together with awareness campaigns aimed at reducing stigma and promoting menstrual dignity.

It is commendable that the bills under consideration in the Chamber of Deputies and the Federal Senate, although taking segmented approaches, indicate a trend toward moving menstrual health and endometriosis from a private and neglected sphere into the sphere of rights, public health, and equality of social, educational, and labor conditions.

Although they represent important legislative advances, effective realization of girls' right to menstrual dignity still requires a broader, integrated, and intersectoral approach encompassing the rights to comprehensive health, education, leisure, play, sports, professional development, family and community life, protection from violence, neglect and exploitation, culture, information, care, and dignity.

Accordingly, Alana commits to collaborating with Parliament to broaden discussions on the issue and provide technical input for existing and future legislative proposals, including the perspective of children and adolescents, in order to promote girls' and all children's full exercise of rights, protection, and comprehensive development, with absolute priority.

Mapping of proposals under consideration

ACCESS TO HEALTH AND CARE IN THE SUS				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 5239/2025	Provides for the availability of a first gynecological consultation from age 10 within the Unified Health System (SUS), aimed at promoting girls' reproductive and preventive health.	Adriana Ventura	NOVO	SP
CD PL 3246/2021	Establishes the Endometriosis Prevention and Treatment Program.	Roberto de Lucena	REPUBLI-CANOS	SP
SF PL 406/2024	Establishes the Early Detection and Treatment Program for Adenomyosis.	Clarissa Tércio	PP	PE
SF PL 1069/2023	Establishes basic guidelines to improve the health of women with endometriosis and amends Law No. 8,080 of September 19, 1990 (Organic Health Law), and Law No. 14,324 of April 12, 2022.	Dayany Bittencourt	UNIÃO	CE
CD PL 762/2025	Provides for priority or urgent care and examinations for women with endometriosis; creates programs, campaigns, and service initiatives for endometriosis treatment; and makes other provisions.	Roberta Roma	PL	BA
CD PL 85/2025	Guarantees universal access to endometriosis treatment in the Unified Health System (SUS) and makes other provisions.	Icaro de Valmir	PL	SE
CD PL 23/2022	Establishes the Women's Check-up Campaign for guidance and disease prevention within the Unified Health System (SUS) and makes other provisions.	Alexandre Frota	PROS	SP
SF PL 1881/2022	Amends Art. 14 of Law No. 8,069 of July 13, 1990, which establishes the Child and Adolescent Statute (ECA), to require health research involving the child population.	Jorge Kajuru	PSB	GO

THEME: MENSTRUAL DIGNITY AND ACCESS TO SUPPLIES				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 6709/2025	Amends Law No. 8,080 of September 19, 1990 (Organic Health Law), to include guaranteeing menstrual dignity as an objective of the Unified Health System (SUS).	Amom Mandel	REPUBLI-CANOS	AM
CD PL 3179/2025	Provides for the inclusion of women with disabilities in the Menstrual Health Protection and Promotion Program.	Duarte Jr.	PSB	MA
CD PL 1309/2024	Amends Law No. 14,214 of October 6, 2021, which establishes the Menstrual Health Protection and Promotion Program and amends Law No. 11,346 of September 15, 2006 to require that basic food baskets distributed within the National Food and Nutrition Security System (Sisan) include feminine hygiene pads as an essential item, in order to expand universal access to menstrual pads.	Luiz Couto	PT	PB
CD PL 1702/2021	Establishes the Menstruation Awareness and Universal Access to Sanitary Pads Policy within the Unified Health System, SUS (Menstruation Without Taboo).	José Guima-rães	PT	CE
CD PL 2991/2021	Provides for the offering of sanitary pads at primary health care facilities.	Marília Arraes	SD	PE
CD PL 2683/2021	Provides for guaranteeing menstrual dignity for girls and women in the groups it specifies.	Tereza Nelma	PSD	AL
CD PLP 117/2026	Provides that ICMS, PIS/Pasep and Cofins taxes and contributions shall not apply to the sale of tampons, internal or external sanitary pads, disposable or reusable products, period underwear, and menstrual cups.	Eduardo da Fonte	PP	PE
CD PL 217/2021	Reduces to zero the rates of the Social Security Financing Contribution (Cofins) and the PIS/Pasep Contribution levied on sanitary pads, tampons, and similar hygiene articles made of any material.	Marília Arraes	SD	PE

THEME: MENSTRUAL DIGNITY AND ACCESS TO SUPPLIES				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 2852/2023	Provides for reducing to zero the rates of the PIS/Pasep Contribution and the Social Security Financing Contribution (Cofins) levied on imports and gross domestic sales revenue of essential products intended to meet women's basic health needs.	Neto Carletto	PP	BA
CD PL 3085/2019	Establishes an exemption from the Tax on Industrialized Products (IPI) levied on the feminine hygiene products listed herein.	André Fufuca	PP	MA
CD PL 2946/2021	Provides for reducing to zero the rates of the PIS/Pasep Contribution and the Social Security Financing Contribution (Cofins) levied on imports and gross domestic sales revenue of sanitary pads and tampons.	Aline Gurgel	REPUBLI-CANOS	AP
CD PL 128/2021	Amends Law No. 10,865 of April 30, 2004, to reduce to zero the Cofins and PIS/ Pasep rates levied on sanitary pads and tampons and requires the free provision of these products to persons from families registered in the Unified Registry (CadUnico).	Dagoberto Nogueira	PSDB	MS

THEME: LABOR RIGHTS AND SOCIAL PROTECTION				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 1143/2019	Adds an article to the Consolidation of Labor Laws (CLT), approved by Decree-Law No. 5,452 of May 1, 1943, to provide for leave from work during an employee's menstrual period.	Carlos Bezerra	MDB	MT
CD PL 4137/2024	Amends the Consolidation of Labor Laws (CLT) to provide for leave from work for women with endometriosis, fibroids, or another condition that increases blood flow during the menstrual period.	Elisângela Araujo	PT	BA

THEME: LABOR RIGHTS AND SOCIAL PROTECTION				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 1370/2025	Establishes adenomyosis leave for female federal civil servants, public employees, and interns with severe or disabling adenomyosis, and makes other provisions.	Dayany Bittencourt	UNIÃO	CE
SF PL 546/2021	Amends Law No. 8,213 of July 24, 1991, on Social Security Benefit Plans, and makes other provisions, to exempt insured women with severe endometriosis from the qualifying period for sickness benefit and disability retirement.	Jorge Kajuru	PSB	GO
SF PL 1249/2022	Amends the Consolidation of Labor Laws (CLT), approved by Decree-Law No. 5,452 of May 1, 1943, Law No. 11,788 of September 25, 2008, and Complementary Law No. 150 of June 1, 2015, to guarantee the right to leave professional activities for up to two consecutive days each month due to debilitating symptoms associated with the menstrual cycle.	Jandira Feghali	PCdoB	RJ

THEME: EDUCATION AND SCHOOL RETENTION				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 1919/2025	Amends Law No. 9,394 of December 20, 1996, to establish three days of menstrual leave per month, without prejudice to attendance or assessment, for students suffering from severe and disabling pain caused by endometriosis or adenomyosis who are enrolled in public or private educational institutions at all levels and modalities.	Dayany Bittencourt	UNIÃO	CE
CD PL 6698/2025	Amends Law No. 9,394 of December 20, 1996 (National Education Guidelines and Framework Law), to include the provision of menstrual hygiene supplies and make other provisions.	Amom Mandel	REPUBLI-CANOS	AM

THEME: EDUCATION AND SCHOOL RETENTION				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 3480/2021	Requires the free provision of a "Sanitary Pad Kit" in the public health network and public schools.	Carlos Henrique Gaguim	UNIÃO	TO
CD PL 3591/2024	Establishes the National School Health Policy.	Lucyana Genésio	PDT	MA
SF PL 2887/2024	Establishes the National School Health Policy.	Janaína Farias	PT	CE
CD PL 4992/2016	Establishes the National School Health Policy (PENSE).	Laura Carneiro	PSD	RJ
CD PL 6868/2010	Authorizes public authorities to conduct annual health examinations for elementary and secondary school students and establishes National School Health Week.	Marisa Serrano	PSDB	MS
CD PL 4592/2025	Provides for creation of the School Preventive Medicine Program through coordination between the Family Health Program (PSF) and the Health at School Program (PSE), and strengthening of the More Doctors for Brazil Program.	Samuel Santos	PODEMOS	GO
CD PL 6234/2025	Provides general guidelines for promoting health in public basic education schools and makes other provisions.	Amom Mandel	REPUBLI-CANOS	AM
CD PL 1793/2022	Amends Law No. 9,394 of December 20, 1996, which establishes the guidelines and foundations of national education, to include Health Education Concepts as a cross-cutting topic in early childhood, elementary, and secondary education curricula.	Vinicius Carvalho	REPUBLI-CANOS	SP

THEME: INSTITUTIONALIZATION OF PUBLIC POLICIES				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 2812/2025	Amends Law No. 8,080 of September 19, 1990, to establish, within the Unified Health System (SUS), the Comprehensive Women's Health Care Policy for the Menstrual Cycle, focusing on premenstrual syndrome (PMS) and premenstrual dysphoric disorder (PMDD).	Romero Rodrigues	PODEMOS	PB
CD PL 4922/2025	Establishes the National Policy for Education and Awareness on Endometriosis and Menstrual Health.	Renata Abreu	PODEMOS	SP
CD PL 1621/2024	Amends Law No. 14,214 of October 6, 2021, to include women affected by extreme climate events, public calamities, and climate displacement as beneficiaries of the Menstrual Health Protection and Promotion Program.	Erika Hilton	PSOL	SP
CD PL 850/2025	Establishes basic guidelines to improve the health of women with adenomyosis; includes disabling adenomyosis among diseases exempt from qualifying periods for sickness benefit and disability retirement; and makes other provisions.	Dayany Bittencourt	UNIÃO	CE
CD PL 3518/2021	Creates the Fund for the Promotion and Protection of Menstrual Health.	Alê Silva	REPUBLI-CANOS	MG
CD PL 2403/2025	Establishes the National Assistance Policy for People with Endometriosis.	Duda Ramos	MDB	RR
CD PL 783/2026	Establishes the National Support and Assistance Program for Women Experiencing Homelessness.	Raimundo Santos	PSD	PA
CD PL 1040/2022	Establishes the National Policy for Comprehensive Care for People with Myalgic Encephalomyelitis and Chronic Fatigue Syndrome and other associated diseases, and makes other provisions.	Alexandre Frota	PROS	SP
CD PL 5673/2023	Establishes the National Policy for Comprehensive Women's Health.	Ana Pimentel	PT	MG
CD PL 3518/2021	Creates the Fund for the Promotion and Protection of Menstrual Health.	Alê Silva	REPUBLI-CANOS	MG

THEME: SYMBOLIC RECOGNITION AND SOCIAL MOBILIZATION				
Proposal	**Summary**	**Author**	**Party**	**State**
CD PL 1396/2022	Establishes May 28 as National Menstrual Dignity Day.	Tabata Amaral	PSB	SP
CD PL 2779/2021	Creates the Week to Combat Period Poverty.	Célio Studart	PSD	CE
CD PL 1373/2025	Establishes the Purple Seal for the Fight Against Adenomyosis, intended to identify companies that adopt practices aimed at the professional inclusion of a person with adenomyosis or their parents, spouse, or legal guardian, as applicable, and makes other provisions.	Dayany Bittencourt	UNIÃO	CE
CD PL 1379/2025	Establishes the Adenomyosis Identification Card (Cipad) and makes other provisions.	Dayany Bittencourt	UNIÃO	CE
SF PL 5049/2023	Establishes the Yellow Seal for the Fight Against Endometriosis, intended to identify companies that adopt practices aimed at the professional inclusion of a person with severe or disabling endometriosis or their parents, spouse, or legal guardian, and amends Law No. 14,133 of April 1, 2021 (Public Procurement and Administrative Contracts Law), to include, among tender tie-breaking criteria, the bidder's receipt of the Yellow Seal for the Fight Against Endometriosis.	Dayany Bittencourt	UNIÃO	CE
CD PL 6067/2023	Amends Law No. 14,324 of April 12, 2022, which establishes March 13 as National Endometriosis Awareness Day and National Week for Preventive Education and the Fight Against Endometriosis, to establish the Endometriosis Identification Card (Cipe) and make other provisions.	Dayany Bittencourt	UNIÃO	CE

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About Alana
Alana is a socio-environmental impact ecosystem that works to transform the living conditions of children and adolescents in Brazil and around the world.

It operates across multiple fronts - education, science, health, entertainment, and advocacy - to guarantee children's rights and influence public policies and cultural practices that affect their lives now and in the future.

Comprising Instituto Alana, Alana Foundation, and Maria Farinha Filmes, this ecosystem develops initiatives ranging from the production of scientific knowledge to the creation of campaigns and cultural content, as well as policy engagement and legal action. All its organizations work in an interconnected and convergent manner, focused on building a fairer, more sustainable, and more inclusive society for children and adolescents.

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