

Period Questionnaire

Period Empowerment Gift Package Feedback Survey for Young Women

Introduction:

Hi there! 🧡 Thank you for taking the time to help us create the **best** period empowerment package for young women like you. We want to make sure our products and message truly support, celebrate, and empower you during this important milestone. Your answers will be **kept anonymous**, so please be honest and share your thoughts freely!

Section 1: About You

1. How old are you?

- 9 or younger
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19 or older

2. At what age did you start your period?

- 8 or younger
- 9
- 10
- 11
- 12
- 13

- 14
- 15
- 16 or older
- I haven't started my period yet

3. How would you describe your race or ethnicity? *(Select all that apply)*

- White (British, Irish, European)
- Black (African, Caribbean, European)
- Hispanic / Latino
- Asian (Chinese, Japanese, Korean, Filipino, Vietnamese, Other East/Southeast Asian)
- Indian
- Pakistani
- Bangladeshi
- Mixed / Biracial / Multiracial
- Middle Eastern / North African (MENA)
- Other (Please specify) _____
- Prefer not to say

Section 2: Your First Period Experience

4. How did you feel when you got your first period? *(Select all that apply)*

- Excited 🎉
- Nervous 😬
- Confused 😕
- Embarrassed 😳
- Proud 🙌
- Anxious 😟
- Curious 🤔

- Relieved 😊
- Other (Please specify) _____

5. Who was the first person you told?

- My mom
- My dad
- A sibling
- A friend
- A teacher/school nurse
- I didn't tell anyone
- Other (Please specify) _____

6. Did you feel prepared for your first period? Why or why not?

- Yes, I knew what to expect and what to do
- Somewhat, I had some information but wasn't fully ready
- No, I felt completely unprepared
- Other (Please explain) _____

7. What would have made your first period experience better or easier? (Select all that apply)

- Having a period kit ready
- Knowing more about periods beforehand
- Being able to talk about it openly
- Having a trusted person guide me through it
- More resources at school
- Other (Please specify) _____

Section 3: Products & Practical Needs

8. What period products do you use? (Select all that apply)

- Pads
- Tampons

- Menstrual Cup
- Period Underwear
- Cloth/Reusables
- Other (Please specify) _____

9. Why did you choose these product(s)? *(Select all that apply)*

- They feel the most comfortable
- They are the easiest to use
- They were recommended by someone I trust
- They are the most affordable option
- They are more eco-friendly/sustainable
- They provide the best protection against leaks
- I like that they are reusable and cost-effective long-term
- I have allergies/sensitivity to other products
- Other (Please specify) _____

10. Would you be open to trying a different product if it was included in a gift package? Why or why not?

- Yes, I like exploring new options
- Maybe, if I had more information about it
- No, I prefer to stick with what I already use
- Other (Please specify) _____

Section 4: Period Positivity & Stigma

11. Have you ever felt embarrassed about your period? Why?

- Yes, because of how people react
- Yes, because of accidents/leaks
- No, I feel comfortable talking about it
- Other (Please specify) _____

12. Would you like to see more positive role models talking about periods?

- Yes, it would help normalize periods
 - Maybe, if it was done in a fun and relatable way
 - No, I don't think it's necessary
 - Other (Please specify) _____
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Section 5: The Gift Package Experience

13. **If you received a period empowerment gift, what would make it extra special?** *(Select all that apply)*

- Surprise elements 🎁
- Customizable items
- Aesthetic and cute packaging
- An educational booklet
- Self-care goodies (candles, tea, etc.)
- Other (Please specify) _____

14. **Would you prefer this package to feel like...**

- A celebration 🎉
- A self-care kit 🐾
- Both 🎀
- Other (Please specify) _____

15. **If you could add one fun item (stickers, scrunchies, lip balm, scented candle), what would it be?**

Section 6: Final Thoughts & Suggestions

16. **What's one thing that would make you feel truly supported and celebrated during your period journey?**

17. **What advice would you give to someone about to have their first period?**

18. **Would you be interested in a subscription box for self-care during your period?**

- Yes

- Maybe
- No

Thank You!

Your feedback means the world to us! ❤️ If you'd like to stay updated or receive exclusive offers, drop your email below (optional).

Would you like us to share the final results of this survey with you? (Yes/No)
