

PERIOD. THE MENSTRUAL MOVEMENT x always

# THE PERIOD TALK: WHAT MOMS COVER, WHAT THEY SKIP, AND WHAT WOULD HELP

***A national study examining how mothers approach menstrual education with their daughters, including the content, timing and confidence that shape the first-period conversation.***

**Always & PERIOD. (2026). Period Conversations:**
A national survey of 1,011 mothers on how they prepare their daughters for their first period.
Research by Worthy Strategy Group; fielded and tabulated by Change Research.

Online survey of 1,011 U.S. mothers of daughters aged 7–15, conducted May 11–21, 2026; margin of error ±3.1%.

WORTHY STRATEGY GROUP

CHANGE RESEARCH

# Period Conversations

A national survey of 1,011 mothers on how they prepare their daughters for their first period: what they talk about, what they skip, and what would help.

Research by Worthy Strategy Group • Fielded & tabulated by Change Research
May 11–21, 2026 • n = 1,011 mothers of daughters aged 7–15 • Margin of error ±3.1%

**95%**
say it matters that their daughter understands her period

**68%**
say the conversation should start by age 10

**64%**
of girls would rather learn about periods from mom

**43%**
wrongly believe severe cramps are normal

## Introduction & Methodology

For most girls, a first period is a milestone, and how prepared they feel for it depends largely on the conversations they have at home. This report looks at those conversations from the mother's side: what she talks about, what she leaves out, where she feels sure of herself, and where she could use help.

The findings come from a national survey of **1,011 American mothers**, each with at least one daughter between the ages of 7 and 15. The research was designed and led by **Worthy Strategy Group**. Change Research fielded and tabulated the survey, conducted online from **May 11–21, 2026**. The margin of error is ±3.1%. The sample reflects mothers across regions, races, and income levels; 60% have a daughter who has already started her period. Because only mothers were surveyed, all findings about daughters reflect what their mothers reported, not responses from the girls themselves.

## Survey Findings

The overall picture is encouraging. Nearly every mother is already talking with her daughter about periods, or plans to. Just one percent have no intention of having the conversation at all. Most feel confident, most have already started, and most say they want to do better than the mothers who raised them.

But confidence can hide gaps. The subjects mothers tend to skip are often the ones that matter most for long-term health, like knowing the difference between a normal period and a warning sign. And on one important point, even the most confident mothers get it wrong: more than four in ten believe it's normal to have cramps so bad you can't get out of bed. It isn't. The pages that follow show where mothers are strong, where the gaps are, and what would help close them.

## Confidence Comes From Talking

Most mothers feel ready, but not all, and confidence is closely tied to whether the conversation has actually started. Starting the conversation is what builds the confidence to keep having it. The biggest factor of all is a mother's own childhood: those who learned about periods in an open, positive way pass that ease on to their daughters. Black mothers, for instance, are more likely to recall their own experience as very positive and open (41% vs. 27% of White mothers), reflected in higher confidence.

- About **7 in 10** mothers feel confident or very confident; roughly 1 in 7 still feels uneasy about the conversation.
- **51%** of mothers already having ongoing conversations feel highly confident, compared with just 8% of those who haven't started.
- The mothers who feel least ready tend to be younger, have daughters who haven't started their period yet, and remember their own upbringing on the topic as negative or absent.

## Earlier Is Better

Mothers agree the conversation should happen early, ideally before a girl's first period and before she learns about it at school. In practice, though, many wait for a sign: a question, a certain age, or the age mom was when she started. The problem is that many girls never ask. A daughter's silence usually means she's uncomfortable, not that she has no questions. Mothers who prepare ahead of time end up more confident and have fuller conversations.

- **68%** say the conversation should start by age 10, before most schools teach it.
- Most wait for a cue: a child asking questions, reaching a certain age (46%), or nearing the age mom was at her first period (44%). Only **29%** look for resources ahead of time.
- It pays off: **87%** of girls who had already started their period were described by their mothers as prepared.

## Mom Leads, Dad Is an Opening

By their mothers' account, girls want to learn about periods from mom, far more than from doctors, friends, teachers, or the internet. Mothers are the most trusted source there is, so the clearest way to help girls is to help mothers have better conversations. But mom doesn't have to carry it alone. Fathers and other male guardians are still on the sidelines of the conversation, and daughters are least comfortable raising periods with them. That's less a fixed limit than an opening: bringing dads in, with the right framing and tools, can make period education a whole-family effort rather than a mother-and-daughter secret.

- **84%** of girls are comfortable asking mom, versus 65% with a doctor, 50% at school, and just 45% with a father or other man.
- **64%** would rather learn from a one-on-one talk with mom than from a doctor (27%), friends (26%), books (22%), or school (20%).
- Fathers or male guardians take part in the period conversation in just **20%** of households, so the low comfort with dads is less a limit than a chance to widen the conversation.

**65%**

of mothers rely first on their own knowledge and experience when they need information, which works well for those who had good examples growing up, and leaves others on shaky ground. Doctors are a distant second, trusted by just 27%.

## What Moms Cover and Skip

Mothers handle the basics well: what a period is, when to expect it, how to use products. Coverage drops off on the subjects that matter most for a girl's long-term health: telling a normal period from a warning sign, how periods connect to overall health, and reusable products like cups and period underwear, which a quarter of mothers have neither discussed nor want resources on.

| Topic | Discussed | Neither |
|---|---|---|
| When to expect a first period | 64% | 7% |
| What a period is and why it happens | 59% | 7% |
| Normal vs. warning signs | 46% | 12% |
| How periods relate to overall health | 45% | 12% |
| Reusable products (cups, underwear) | 38% | 24% |

"Neither" = have not discussed the topic and do not want resources on it (they may still plan to raise it).

## Myths That Persist

Mothers know the basics, but a few myths with real health consequences hang on. The most striking: more than four in ten believe it's normal to have cramps so bad you can't get out of bed. It isn't, and that belief can stop a girl from getting help for conditions like endometriosis. Strikingly, the most confident mothers are just as likely to believe it, which is why good information needs to reach everyone.

| Statement | Truth | Got It Right |
|---|---|---|
| Periods usually last 3–7 days | True | 93% |
| Stress can affect your cycle | True | 93% |
| Periods always last exactly 28 days | False | 88% |
| Change your product every 4–6 hours | True | 81% |
| Swimming or exercising is unsafe | False | 77% |
| You can't get pregnant on your period | False | 70% |
| It's normal to have cramps so bad you can't get out of bed | False | 48% |

**43%**

of mothers believe it's normal to have period cramps so bad you can't get out of bed. It isn't, and that belief can keep a girl from getting care for conditions like endometriosis. It's just as common among the most confident mothers, so accurate information has to reach everyone.

## What Would Help

Mothers are clear about what they want. Above all, they want a first-period kit: something concrete to give their daughter. Beyond that, their needs are practical: dependable access to products, products they can trust, affordability, and privacy.

- A first-period kit is the most-requested resource (**39%**), ahead of illustrated books (32%) and quick-reference guides (30%).
- Every month, mothers say girls need reliable access to products (**58%**), products they can trust (58%), affordability (46%), and privacy for their health information (42%).

## Where Moms Feel Least Prepared

Mothers handle the mechanics of periods with confidence. Where they feel least equipped is the emotional and situational side, shown here by the share naming each as a topic they feel least prepared to lead.

| | |
|---|---|
| Emotional changes and mood shifts | **25%** |
| Hygiene during periods | **20%** |
| Handling surprises like stains or cramps | **19%** |
| Reusable products | **19%** |
| Physical changes of puberty | **18%** |
| Managing periods at school | **18%** |

## How Mothers Feel

Asked how they really feel about the period talk, most mothers land on ready: prepared, relieved, even excited to share what they know. But nerves are real for a meaningful share, and they run highest among the mothers who feel least confident, some of whom carry hard memories of their own.

- Most feel ready: **37%** prepared and confident, 30% relieved to have had the talk, 23% excited to share.
- Nerves persist: **21%** are nervous but push through, and 17% worry about saying the wrong thing.
- Among the least confident, **34%** aren't sure where to start and 31% worry about getting it wrong.

## Breaking the Cycle

For many mothers, doing it differently is the whole point. A large share grew up with silence, embarrassment, or nothing at all, and they're determined not to hand that down. Today they're more open and more proactive than the mothers who raised them, turning their own experience into motivation to give their daughters a better start.

- **52%** are being more open and honest than their own mothers were, 47% are making it an ongoing conversation rather than a one-time talk, and 39% of mothers are more matter-of-fact and less embarrassed about periods than the mothers who raised them, part of a deliberate shift toward openness.
- Roughly **a quarter** of mothers describe their own upbringing on periods as negative or absent, the very experience they're working to break.

> *"We did not discuss this at all in my household so I was completely alone and had to experience it on my own. I do not want this to be the case for my daughter."*
>
> MOTHER, 35–49, DAUGHTER AGED 10–12

## What It All Means

*One thread runs through every answer: mothers want to give their daughters a better experience than they had: more information, more openness, and less shame. They're motivated and involved. What they're missing is timing, tools, and complete information. A few threads worth carrying forward:*

1. **Start earlier.** Most mothers want to begin by age 10, before school and before the first period. Tools that help them prepare ahead of time meet them where they already want to be.
2. **Reach girls through their mothers.** Girls want to learn from mom first, so the most useful resources help mothers have better conversations, not ones aimed straight at kids.
3. **The gaps are specific and fixable.** Where mothers feel least prepared isn't abstract: emotional changes, telling a normal period from a warning sign, reusable products, and managing periods at school. The clearest example is the 43% who believe it's normal to have cramps so bad you can't get out of bed, a myth with real consequences for whether a girl seeks care.
4. **Low-confidence mothers just need a starting point.** About one in seven feels unsure, not because they've turned elsewhere, but because they're missing a foundation: far less likely to lean on their own knowledge or family, and nearly three times as likely to be getting no information at all. The same starter tools built for everyone else, a kit, a simple guide, a place to begin, are exactly their on-ramp.
5. **The hardest-to-reach need a different route.** A smaller core is genuinely checked out, with no information from anywhere and no idea where to start. They can't be reached through their own initiative or family, so the people they'll meet anyway, a pediatrician, a school nurse, may be the only door in. That is why schools and providers matter most here, and why the first ask has to be tiny: one kit, one card, one thing to say first.

**The bottom line: this is a confident, motivated generation of mothers rewriting how period education is done. Meet them with the right tools, at the right time, and the rest follows.**